External Assessment of Nursing Education in Iceland 2001

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Appendices:
Appendix I Guidelines for the External Assessment by the Peer Review Group
Appendix II Meetings agenda at University of Akureyri
Appendix III Meetings agenda at University of Iceland

Supporting Documents:
Self Evaluation, Nursing Department (HA), University of Akureyri, Faculty of Health Science, November 2000
Self Evaluation, Faculty of Nursing (HÍ), University of Iceland, Faculty of Nursing, November 2000
Nursing Shortages. Report by a committee appointed by the Icelandic Nurses’ Association and its Hospital Nursing Directors’ chapter
I. Introduction

This report summarizes the findings of a Peer Review Group (PRG) in an external assessment of nursing education in Iceland which was conducted November 27th to November 30th 2000. The PRG based its work on Self Evaluation Reports (SER) from:

- University of Akureyri, Faculty of Health Sciences, Nursing Department, the B.S. program. The M.S. program is offered in conjunction with University of Manchester.
- University of Iceland, Faculty of Nursing, the B.S. program, the M.S. program.

In addition, the PRG had meetings with faculty, staff and students at both institutions as well as meetings with the deans of both universities. The objective of the PRG was to assess the education and curriculum of the nursing departments at the University of Akureyri and at the University of Iceland. The PRG looked for consistency between different sources of information regarding the criteria in order to collect information upon which to base recommendations.

The PRG conducted the assessment in accordance with the Guidelines for External Assessment, which is a document based on the Guidelines for European Pilot Projects for Evaluating Quality in Higher Education.

1.1 Peer Review Group

As specified by the guidelines, the PRG was appointed by the Ministry of Education, Science and Culture and should be composed as follows: The chairperson should have no connection with the establishments visited and have experience of management of universities or other higher education institutions and a good knowledge of the evolution in higher education that has taken place in recent years. Two experts from the academic field of nursing, an expert from the employment area, and one independent expert in the field of distance-learning in higher education. One group member should serve as a secretary of the group.

The group members were:

- Carolyn F. Waltz, Ph.D., RN, FAAN, Associate Dean for Academic Affairs and Professor, University of Maryland, Baltimore, Maryland, who served as a chairman.
- Sólveig Jakobsdóttir, Ph.D., Associate Professor Distance Education and Educational Technology, Iceland University of Education, Reykjavík, Iceland.
- Pia Ramhøj, Rektor, School of Nursing, Copenhagen Hospital Corporation, Copenhagen, Denmark.
- Sigríður Snaebjörnsdóttir, M.S., RN, Director for Metis, Private Consulting Firm in Health Care, who also served as a secretary.

1.2 Working Method

The PRG received the self-evaluation reports from both institutions along with appendices. The PRG spent four days together in both Akureyri and Reykjavík to get acquainted, go through the reading material, decide upon working methods and meet with the designated people. The first day was used for preparing for the meetings, the second day was spent in Akureyri with representatives of the University of Akureyri and the Nursing Department there, and the third day was spent in Reykjavik with representatives of the University of Iceland and the Nursing Faculty there. The last day was used mostly for going through all materials and additional documents obtained during the visits and to discuss the continuation of the project.
1.3 Evaluation of the Review
The self evaluation reports were provided both in English and Icelandic. However, almost all documents and appendices were in Icelandic only. Some inconsistencies were observed in the translation of the self evaluation reports. In addition, both the Self Evaluation Review Group (SERG) and the PRG had a short time to prepare, go through the appropriate documents and coordinate the work process. In retrospect, it would have been more helpful to have had all the documents in both languages earlier in the process. Furthermore, the PRG had to work within very strict time limits both in Akureyri and in Reykjavík and had limited opportunity to discuss issues and coordinate their actions between meetings on the agenda. The PRG is of the opinion that one additional day before the on-site visits, even an extra day on the sites, as well as an additional day between the visits to Akureyri and Reykjavík, would have been helpful in the process. All of the above-mentioned factors influence the quality of the evaluation. Finally, planning the visit so close to Christmas resulted in unfortunate delay in finishing the report.

The PRG is most grateful for the hard work of all people involved in this evaluation process at the Ministry of Education, Science and Culture; the University of Akureyri, Faculty of Health Sciences; and the University of Iceland, Faculty of Nursing. The PRG would also like to express sincere thanks to everybody for their warm hospitality during the days spent at the sites.
II. University of Akureyri

2.1 Introduction
The University of Akureyri (UA) offered its first courses in September 1987, but was officially established by an act of parliament in the spring of 1988. It was then divided into two faculties, Health Science and Management. At first, most activities were spread among various premises in Akureyri but since the summer of 2000 all activities of the Health Sciences and Management faculties have been at the Sólborg campus.

During the academic year 1999-2000 Health Sciences had 171 students enrolled in nursing and occupational therapy; the total number of students enrolled at the university was 579. UA operates as a research institute which is in close relationship with local industry. UA has 57 student apartments and 26 single rooms.

Special nursing courses were designed for the nursing department in 1987. In the first year 13 students enrolled in the nursing program, and the number has been growing since that time. Recently a restriction has been imposed on admission to the second semester, mainly due to lack of clinical settings for students. The nursing education is generally a four-year program and amounts to a total of 120 credits. Clinical training starts in the first year at health care institutions in Akureyri, Reykjavik and in other locations throughout the country. In 1998 nursing courses were offered in Ísafjörður (West Fjords) via video conferencing and it was extended to Neskaupstaður (East Iceland) and to Reykjanesbær (SW Iceland) in fall 2000.

In 1997 the University of Akureyri, in cooperation with the Royal College of Nursing Institute at the University of Manchester, began offering a M.S. program in nursing.

The University of Akureyri is answerable to the Ministry of Education, and administration is in the hands of the University Council, the Vice Chancellor and Faculties. The University Council has the ultimate decision-making authority within the university as well as being responsible for both interdepartmental and external relations. Policy and planning for the university is now being reviewed.

Currently there is a three-year plan on how to collect appropriate statistical data, starting with the university as a whole, and subsequently each department will have its own goal.

2.2 Strategy and Objectives
“The University of Akureyri is a scientific institution for education and research. It educates students to work independently on scientific tasks and assume positions of responsibility in the economy, especially associated with fisheries, management, education and health.” (University of Akureyri, 1999).

The department aims at preparing “...individuals in the basic subjects of health science in accordance with the needs of the community at any time and training them in
applying professional procedures to work in health issues and health service.”
(Faculty of Health Science resolution, 1991).
Furthermore, the nursing program prepares the “…students to work independently, to
master general nursing work and to be able to add administrative and educational
tasks in most fields of health service.” (Prospectus, nursing objectives).

The main goal has been to increase the number of nurses in rural areas and to train
students to work independently, alone in small institutions. Originally, it was not
planned to offer courses that were offered at other universities. But this was changed
due to a persistent nursing shortage, especially in the northern part of Iceland.

According to regulations, research is given priority over teaching and administration,
research must be within expert’s area of study, and teachers must be able to
demonstrate qualifications in research. Forty percent of teachers’ work requirement is
expected to be in research. No strategy or documentation was available at the time of
the visit on how this objective should be attained, but this is now being developed. It
is said that too much of teachers’ time is devoted to class preparation.

Clinical studies were called practical studies until 2000. The name was changed
because the faculty agreed that "clinical" better describes than "practical" what takes
place in “...training in the care of sick patients and demands substantial speculation
and thought, including academic considerations....”. The reorganization of clinical
studies is being discussed, but no decisions have been made. The focus for the
program in the future is among other things to establish critical thinking, holistic
nursing, family nursing, caring and secure performance. The basis for reforms will be
obtained by brainstorming on what society needs.

Just over half the credits are in the nursing disciplines, or 55% of the 120 credits,
science 25%, and humanities and social studies 20%. No changes are foreseen here.
A committee of three lecturers and the department’s only professor are working on
reviewing and redefining the department’s theoretical focus. Another committee, the
curricular council, is working on the theoretical focus and strategies for nursing.

It is pointed out that data collection should be used to a greater degree than at present
as a basis for decision making, strategies and goals of the university.

2.3 Course Content, Clinical Studies and Teaching Practices
The entry requirement for the nursing school is an upper-secondary school diploma
(gymnasium diploma). Originally, the theoretical framework in nursing was based on
Betty Neuman’s Theory but now the principle is to base the teaching on several
nursing theories. About 80% of the teaching is in lecture format, but the intent is to
increase the use of seminars. There is also an interest in using more case studies and
problem-solving methods to promote critical thinking. The PRG strongly
recommends such a change in teaching practices.

To meet some of the department’s objectives, e.g. to prepare students to work
independently and to be able to teach patients and staff, one course in
administration/management and two courses in teaching/education are offered. The
program is built partly on the curriculum of the University of Iceland, as well as nursing programs and programs for physicians' assistants in the United States. No textbooks in nursing courses are available in Icelandic but efforts are made to link content to Icelandic circumstances, reality and culture. References are made to scientific articles and evidence-based practice. A curricular council decides what is taught in terms of the amount and the depth of each subject.

All students are required to have 24 weeks of clinical practice. Clinical sites are in Akureyri, Reykjavík and in other places around the country. Students start their clinical training in more general areas, and then proceed to more specific areas. Students are required to work at a health institution for a three-month period as regular staff without supervision. The limited number of clinical sites, especially in specialties such as pediatrics, obstetrics and psychiatry, is the major reason for not being able to increase the number of nursing students.

Since 1994 the number of students who are admitted to the second term in the first year has been restricted by a system of *numerus clausus*: originally 25 students, later 30, and now 32 students. According to administrators and staff that number is not likely to increase due to the limited number of clinical sites. Most students (70%) who pass the *numerus clausus* complete the program. Of those who pass *numerus clausus* the drop-out rate is low (less than 10%). It should be remembered in this context, however, that only three year-groups have finished the program, of those who had to pass the *numerus clausus* at the start of the studies. According to faculty, 80% of 175 graduates work outside the Reykjavík area and most of the youngest nurses tend to work in hospitals.

### 2.4 Master’s Program

There is an agreement between the University of Akureyri (UA) and a branch of the University of Manchester (UM) on joint responsibility of a master’s program at Akureyri. The University of Akureyri uses all the course materials from UM, and communication is by mail and e-mail. Courses are taught by Icelandic teachers, and a degree is granted by UM. As of next semester (spring 2001), the final degree will be awarded from both universities, and a M.S. degree will be granted from UA independently from the year 2003. UA has already recruited 22 students into the program. An additional 12 students will start the program in January 2001. Six out of 12 originally enrolled M.S. students have already finished the program, some of whom have already started teaching at the department. This could be a positive development for the department; however, attracting teachers from other universities should be encouraged as an “inbreeding” can be a cause for concern. The objectives are to graduate clinical nurse specialists with four years’ prior experience in clinical fields, and to offer a research-oriented program with two research methodology courses. All students will be required to write a thesis, and students have to be well grounded in both theory and practice. Other course examples are a consultancy course, and development of nursing leadership. In the future, as the number of teachers increases, it is expected that the number of master's students will increase also.
2.5 Distance Education (DE) and Information and Communication Technology (ICT)

As mentioned earlier, there are three groups of DE students in the nursing program at Akureyri. One group of 11 students, located in and around Ísafjörður, started in the fall of 1998, and in the fall of 2000 two new groups were added in Neskaupstaður (10 students) and Reykjanesbær (17 students). The rector of the University initiated distance education in the nursing department in 1998 after gathering information from abroad on other DE programs. He also consulted with Icelandic experts, and met with a small group of women in Ísafjörður who were highly interested in an opportunity to complete a nursing degree at a distance. A working committee was established, allocated only three weeks in late summer to plan the DE in the 1998 fall semester, and a brief training session was offered for the staff involved before the program started. The technology chosen for the delivery of the courses was video conferencing, with the idea of creating and teaching a group, not individuals. All lectures have been delivered at Akureyri but broadcast simultaneously to Ísafjörður, and all this has now been extended to the two new sites. In the beginning there was only one ISDN line but now there are six lines (three pairs) and plans are being made for the use of fiber-optics. The Internet has also been increasingly used to enhance the courses offered e.g. to deliver information and materials via e-mail and the web and to facilitate communication between students and teachers. Currently, all teachers use e-mail to communicate with students, at least three permanent members of the teaching staff used WebCT and/or the web during the fall semester, and there is an increasing interest among others in using WebCT as a tool to deliver or enhance courses. Temporary members of the teaching staff also send PowerPoint presentations or other teaching/learning materials via e-mail to students prior to the lectures.

The selection in 1998 of video conferencing technology as the main DE delivery tool appears to be a logical one considering that lectures (or seminars) have been the main form of teaching practice in the nursing department, and that the students all lived in or close to one town, and were not distributed around the country. However, there have been many technical problems, e.g. with regard to connecting the sites, and the technology has not been very reliable in the past. Sometimes it was time-consuming to get the sites connected, which was perhaps particularly annoying for the regular students in Akureyri. When a whole lecture is lost to the DE students due to technical difficulties it is usually repeated later on. When a short time is lost during a session an effort is made to cover the materials during recess time. There is also an option to use phone meetings as backup when the video conferencing does not function properly, which works well if the students have received copies of transparencies through e-mail prior to the lecture. The DE students interviewed emphasized the importance of receiving handouts one day ahead of each lecture.

The above problems appear to be diminishing as the human and technical infrastructure are being strengthened at the university. A key position was recently created, a director of distance education, and an appointment was made to the new post last August. Her tasks include overseeing the implementation of DE at the university and leading development of net-based teaching, as well as providing advice and assistance to teachers regarding technology use and web design (e.g. putting teaching materials on the web). The human infrastructure regarding technology is also
being strengthened by the increasing experience of the teaching staff with the video conferencing system. A course was offered via video conferencing from Belgium last December for staff members on how to use such a system in a pedagogically sound way in distance teaching. And the director of DE provided workshops following the course. In addition, the technology is improving with more ISDN lines and new video conferencing systems (now there are three rooms equipped with such systems). The main bottleneck may still be the technical infrastructure provided by the telecommunication company. However, plans are being made for the strengthening of that structure with possibilities of connections through IP addresses. In addition, a committee at the university is working on a DE/ICT-related policy for the university which should help improve the program further in the future, as well as help improve and increase the use of ICT to enhance teaching and learning across the curriculum.

In spite of the very short preparation time before starting the program, there are indications that the DE program has been successful and effective for the participating DE student groups. For example, all eleven students from the first group in Ísafjörður in 1998 passed *numerus clausus* and the drop-out rate for that group has been zero. The following two groups have not been quite as successful. However, after the fall semester 2000 80% of the 10 new students in Neskaupstaður passed *numerus clausus*, as well as 64% of the 17 students from Reykjanesbær, as against only 52% of the 29 regular students located in Akureyri. According to a member of the teaching staff DE students, who tend to be older than the regular students, have the reputation of being dedicated and an asset to the program.

It is positive how the university is developing uses of technology for the DE program and increasingly taking advantage of the Internet to enhance the program. As an example, the university is looking into ways to use Netmeeting, which could e.g. help teachers to communicate and collaborate more closely with the DE students, who feel they need more contact with the teachers. It is important that heavy use of video conferencing equipment should not slow down planned changes in teaching practices from the lecture-based format that has been predominant in the past, but more use of the Internet should support a wider variety of teaching strategies.

Finally, the department should look into ways of enhancing courses with increased use of multimedia and ICT.

2.6 Faculty, Staff and Human Resource Management

The faculty is academically young, they are enthusiastic and open to new ideas and are willing to try new teaching methods. In 1987 there was one tenured teacher at the department so untenured teachers did most of the teaching. Since then the number has increased and now (2000) there are 14 tenured teachers, of whom four work full-time at the school and ten have 50% positions. Four faculty members have doctoral degrees and, additionally, one non-tenured faculty member with a large teaching obligation has a doctorate. The others have master’s degrees. Not all of them have been deemed qualified to hold assistant professorships due to lack of published academic articles. There is a very high number of untenured teachers giving lectures at the department, i.e. 40% of the teaching units are taught by 160 – 180 people. It is a matter of concern that the university is so dependent on teachers from the Reykjavík
area, both in relation to travel cost and quality of the program. The PRG strongly suggests that lecturers could deliver many or most of their lectures via video conferencing to cut costs, instead of flying to Akureyri for each lecture as is the current practice. Care should then be taken to provide strong technical support for those staff members, as well as courses and workshops on how to use the technology for teaching and learning.

2.7 Facilities and Equipment
All academic teaching is now at the campus at Sólborg which is a new housing complex. Clinical courses are taught in the older complex (Thingvallastaðir) but will soon be moved to the Sólborg campus. The facilities are spacious and well equipped with both computers and library services. Students say that the facilities need to be completed soon, there is too much noise in the new building. They say they need more space for reading, and better access to computer printers - only one printer is accessible, which often becomes overloaded. Also, temporary faculty complain of lack of office facilities.

2.8 Administration
Nursing and occupational therapy are both in the health science faculty and have asked for increased independence. Today there is a program director for the occupational therapy program, and from the fall semester of 2001 there will be one for the nursing program as well. Obviously there are pros and cons concerning those views. It is of some concern that the dean does not have a nursing background - he is a dentist. However, the faculty is satisfied with the dean, he is well accepted by the faculty, he has a strong research background and is considered a good leader. For the last two to three years the structure of the department was described as somewhat “loose” but is now considered more stable. It was suggested that contact between temporary faculty on one hand and administration and other faculty on the other hand could be increased. It is up to the temporary faculty whether they become involved in departmental affairs or not.

2.9 Research
Teachers at the university are expected to spend 40% of their time on research. Four faculty members have doctoral degrees and in addition, one non-tenured faculty member with large teaching obligation has a doctorate. The others have master’s degrees. However, the faculty has made an effort to conduct research. Examples include a study of the development of professional values of students and nurses and in British Columbia and Iceland, a comparative study of diagnosis and treatment of cancer, quality of life, social support for cancer patients, and a study about women diagnosed with cancer.

Faculty is usually not involved in research in other departments. Most of the research is related to clinical work and funded by the Research Fund of the University of Akureyri.

The library provides good services and there is good Internet access. In 1992 a Research Institute was established at the University of Akureyri with the aim of providing a research infrastructure. Local private companies have been helpful in
funding research at the institute. The nursing department could take more advantage than at present of the Research Institute, to plan their research, attract funding, conduct studies, disseminate findings and promote their research. However, it should be mentioned that the Research Institute is an independent institution within the University of Akureyri and charges for services rendered.

Tenured faculty work both on the faculty and as clinicians. Students make a research/thesis proposal within a special research course, which the PRG considers a positive practice. Students work both with faculty on their research and the faculty derives research ideas from student projects or interest areas. However, according to the students interviewed there could be more involvement of students in faculty research.

Objectives and goals for the research of the department are not yet clarified.

2.10 Students’ Evaluation of Program
During the visit the PRG had an opportunity to interview a few B.S. students, newly graduated nurses, and students from the master’s program. The following views and opinions can, therefore, not be used for generalizations. They only reflect the opinions of these respective individuals.

Students appreciate the small school and good personal relationships, both with each other and the staff. They appreciate good teachers and good contacts with the faculty at the hospital, and they like the small size of hospital and clinics. They especially liked the three-month mandatory summer work.

Students say the content in many courses is repetitious, e.g. in medical, surgical and geriatric courses. First-year students want more introduction to the university and the department of nursing. Third year students say that nurses repeat what doctors have already taught, and also that nursing is too medically oriented. They would like to have the geriatric nursing course taught earlier, not in the 4th year. They would like more problem-solving tasks and they feel they need more preparation for the final project. Nursing directors at the Regional Hospital (FSA) need to be better informed of students’ needs and to spend more time with them. The students sometimes feel unwelcome. Likewise students need to know what is expected of them during clinical training and sometimes it is hard to find clinical staff to supervise students. It is hard to gain a holistic overview of clinical practices. Students make a self-evaluation at the end of the course, and also receive feedback from their teachers. Some feel that they should receive feedback in the middle of the semester, and they want more variety of clinical training for a shorter period of time. The students at Akureyri feel at times that DE students get too much attention because of technical problems and they think that distance education is being implemented too fast. Perhaps it would be wise to have joint face-to-face sessions for the different groups at the beginning, so the students could become better acquainted with each other. Such sessions could facilitate better communication and cooperation between members of the groups later on.
2.11 Summaries of findings
In general there are many positive things going on in the department of nursing in Akureyri. At the same time it is a young university and a young department that has been progressing steadily since it was established 12 years ago.

The benefits for the society and for public health of having both a university and a department of nursing in Northern Iceland is not to be underestimated. The special local interest and responsibility that goes with the location of the University of Akureyri will in many ways be different from the one of a university located in a more traditional university setting, as for instance the nursing course offered via video conferencing in the West Fjords and in East Iceland.

Viewed in this context it is very relevant that the department of nursing at the University of Akureyri started by basing its curriculum on that of the department of nursing at the University of Iceland. In 1997 the University of Akureyri established cooperation with the Royal College of Nursing Institute of Manchester in the M.S. program in nursing. Thus it is possible to complete a B.S. degree and an M.S. degree in nursing. This is a considerable academic achievement for the department of nursing.

Furthermore, there exist research links with for example the University of British Columbia, besides research links with other countries and with other researchers and institutions in Iceland. These relations are a great advantage to a small university nursing department such as this one.

Originally, the theoretical framework was based on one theory but now the principle is to base the teaching on several different theories. A committee of senior lecturers and the professor are working on reviewing and redefining the theoretical focus of the department. The PRG views this change as beneficial for the program.

In the same way as the department of nursing is redefining its overall theoretical base, the department ought to redefine its pedagogical practice. A great part of the teaching is in lecture format. There is a growing interest in a seminar-like format, and more problem-based and problem-solving methods to promote the students to think more critically. The students point out their interest in participating in their teachers' research and projects, in order to be better prepared for their final bachelor’s or master’s projects. Students also point out negative aspects of other parts of the teaching, such as repetition of course material from one course to another. This could be prevented up to a degree by systematic information distribution and meetings between teachers and faculty.

Not all of the teachers have gained a master's degree or a Ph.D. In addition, there is a very high number of untenured teachers who lecture within the department. This may be another cause for dissatisfaction of students. It may be a problem that, although many teachers have the academic qualifications generally considered necessary, there are some who do not fulfil generally accepted standards.
Research at the department of nursing at Akureyri is still in its infancy. The objectives and goals for the research of the department will be related to the needs of society.
III. University of Iceland

3.1 Introduction
The nursing program at the University of Iceland was established in October 1973. Iceland was the first country where the entry level to nursing was at a university level. Specialists from the World Health Organization had provided Icelandic authorities with advice and information, and both the USA and Canada were used as models, as well taking Icelandic conditions into consideration. At first the nursing department was under the aegis of the faculty of medicine because of a lack of fully qualified teachers and limited scope of nursing research. In practice, the program was run as an independent unit. In 2000 the nursing program gained its independence from the medical faculty.

The University is governed by the University Council, the Vice Chancellor, faculty meetings, faculty chairs and administrative managers. The faculty of nursing is governed by faculty meetings, the faculty council and the faculty chair. Each faculty has its own responsibility for internal affairs. The B.S. nursing program is a four-year 120-credit program.

In 1989 the nursing faculty took over the role of the New Nursing School in continuing education of nursing. A decision was made at that time to offer the opportunity to obtain a B.S. degree to as many RNs as possible holding diploma degrees.

In 1996 a two-year postgraduate midwifery program was established. The Icelandic School of Midwifery was closed in 1994.

In 1998 a 60-credit M.S. program was introduced for nurses.

The discipline of nursing is the field of scholarship which provides information and guidance on nursing. Some specialist fields in nursing reflect certain health problems and health-related needs at different times, e.g. tubercular nursing. Other specialist fields have a long history and are fully valid, e.g. psychiatric nursing, and still other branches are growing, e.g. ontological nursing.

“The policy of the Faculty of Nursing is to ensure public access to the best knowledge and hence the correct specialist service that is required. Hence it is important that specialization in nursing be flexible and in constant evolution. Emphasis is placed upon cross-disciplinary approach, and the integration of knowledge from many fields of scholarship. The Nursing Council recently resolved to review the special fields in nursing in view of developments that have taken place and may be foreseen in the near future.” (Self-report, Dept. of Nursing, University of Iceland, 2000).

3.2 Strategy and Objectives
The nursing program is research-based. The strengths of the undergraduate program should be to integrate community health knowledge and social services into practice.
The faculty of nursing aims to give students good grounding in both general and special disciplines in nursing, as well as training them in nursing practice, research and scholarly work.

The program should meet changing health-care needs of the society, have a holistic understanding of human beings, e.g. aging of the population, shorter length of stay, trends etc. Students are supposed to be highly qualified in any setting, have a view and a voice, be able to work in teams, independent and critically thinking.

Nursing aims to promote the health and wellbeing of the individual and groups until their peaceful death. The objective of nursing is to create circumstances for the individual, and care for him/her, so that s/he will have the optimum potential for maintaining a desirable state of health, and for recovering from illness.

The aims of nursing studies are:

- Assess the nursing needs of the individual, family and community.
- Plan nursing care, implement the plan, provide instruction to others and supervise the project.
- Assess the effect and results of nursing. Keep records of the nursing process and use this information as a basis for decision-making to improve care.
- Participate in tuition of nurses and their ancillary staff. Organize health instruction for individuals and groups, and carry this out.
- Participate in research that aims to contribute to better understanding and knowledge of nursing and nursing tuition.
- Play an active part in group work with health care workers and others involved in health issues
- Assess and acknowledge their own need for continuing education and more knowledge in their work.

3.3 Course Content, Clinical Studies and Teaching Practices

The faculty of nursing offers a four-year 120-credit program for degree of B.S. and a 60-credit program for the degree of M.S. Since 1991 there is a special track for diploma nurses to obtain a c degree; already 164 RNs have graduated and 70 are still in the program (2000). In the fall of 2000 there are 48 courses offered in the faculty, which amount to 181.5 credits. Possibilities are also being explored for collaboration with the Institute of Continuing Education. More options are needed for continuing education and this is under consideration.

Nursing practice is partly high-tech in nature, which is reflected in the curriculum. A new two-credit undergraduate course in acute care and emergency nursing supported with ethical issues is being introduced. To address ethical issues along with high-tech health care is an important and positive addition to the course content. Faculty is concerned with how to meet the different and changing needs in teaching, and developing courses both in OR nursing and anesthesia nursing, which need to be reevaluated.

Teachers meet with students at clinicals where the link between theory and practice is explored. Clinicals are not necessarily planned at exactly the same time as the lectures are given, theory comes first but usually the two are within the same semester.

The teacher workload is heavy. To meet the workload, lecturers and laboratory teachers have been recruited from outside, but this is expensive. More clinical
opportunities for students are needed, and some competition exists with UA for clinical placements.

It is stated that more good, clinical bedside nursing role models are needed for the students, and that the students need more clinical practice. Students want to spend more time with nurses in the units without the school assignments. Supervisors in patient units need to be better informed on the requirements of students, in order to be better able to help them develop the right skills. To acknowledge the importance of clinical competence and excellence is vital to good nursing care, and needs to be a major focus in any nursing department.

The academic level has been elevated and questions are raised, especially by students, on whether academic assignments are too much of a load for students, leaving little time for training during clinicals.

3.4 Master’s Program
A 60-credit research-based master’s program was established in 1998, which includes a 30-credit research project. Its main goal is to promote research in nursing and to improve nurses’ theoretical knowledge and skills. The program offers four core courses. The faculty collaborates with universities in Sweden, Norway and the United States, and this is intended to increase academic opportunities for students and broaden their minds. Emphasis has been on improving students’ knowledge in information technology, and future management courses are being discussed. Nurses have also asked for more opportunities in clinical specialties, which are currently being worked on. Students are encouraged to publish their work as well as working independently. There is a plan about offering a new curriculum for graduate students which includes decreasing the weight of the research project for M.S. students from 30 credits to 15 credits, thus leaving more credits for clinical studies, which is considered a positive option for graduate students.

3.5 Distance Education (DE) and Information and Communication Technology (ICT)
There is no special DE program at the nursing faculty at the University of Iceland. However, many of the staff members there give lectures in the nursing program at the University of Akureyri, and the PRG strongly suggests that the universities should look into ways for those lecturers to deliver most of their lectures via video conferencing to cut costs, instead of flying to Akureyri for each lecture as is the current practice. Care should then be taken to provide strong technical support for those staff members as well as courses and workshops on how to use the technology for teaching and learning. Faculty members currently have opportunities to share and discuss their research plans in special sessions. Similar sessions could also be held to share and discuss how they are using technology in their courses. Some faculty members showed concern about distance learning in terms of standards and requirements, and some are not interested in the use of ICT in teaching and learning, while others feel that technology opens up new methods to teach and are excited about possibilities of ICT use.
Last spring some faculty members started to use WebCT to create course webs, and an international web-based master’s level course was offered about informatics for groups in Örebro, Oslo, Iowa and Reykjavík. There has been positive experience of using course webs, e.g. faculty member find that students then need less information directly from the teacher and ask fewer questions. There is also an option to provide access to a growing number of good web-based resources (including materials in Icelandic). Also, there was great interest in the use of the built-in webboards/conferences for discussion and improving critical thinking skills. Use of web-based courses opens up possibilities of more collaboration between the nursing faculties at both universities, and could give students at each faculty access to a wider selection of courses.

There is no special plan for ICT use or integration at the faculty or the university. However, a teaching center has recently been established, where teachers have been offered courses and been able to seek assistance. There has been increased use of computers in teaching and an increasing number of faculties have home pages. A session is held for students when they enter the program on how to use the Internet and basic applications (e.g. spread sheets/data bases), as well as the library, to be able to do good literature reviews. During research day fourth-year students give PowerPoint presentations to introduce their work. There is a feeling among the faculty that there is some gap between younger and older students in use of ICT. Most of the younger students are less inhibited about use of technology than earlier groups, and perhaps most of the faculty members.

The PRG feels that the faculty is moving in the right direction in terms of use of ICT but recommends that the faculty (and the university) establish an ICT/DE-related policy. Research has shown that innovative practices spread very slowly within an institution without administrative support, which affects decisions at different organizational level, the curriculum, and funding for technology.

3.6 Faculty, Staff and Human Resource Management

In 2000 there are 20 tenured teachers in nursing, seven with Ph.D.’s and one a doctoral candidate, in the foundation disciplines (science) there are four tenured teachers, all of whom have doctorates. Fourteen of the 20 tenured nursing teachers work full-time. Besides tenured teachers, there are about 400 part-time lecturers with the faculty.

Teachers and faculty do not have any formal information on academic work in other departments and vice versa. Knowledge about what is going on is mainly on an individual basis. There are some links between different faculties, e.g. a physiology professor is placed in the nursing faculty but works with students wherever is needed.

Many teachers and faculty at the nursing faculty of the University of Iceland lecture at the University of Akureyri. Some of the faculty say it would be practical to share teaching responsibilities more, because of scarce resources.
3.7 Facilities and Equipment
The faculty is located in a building constructed for the Icelandic Nursing School which was opened in 1956. It is situated next to the main building of the National University Hospital. In 1986 the building was handed over to the University, but is partly used for the National University Hospital Library. The building, now called Eirberg, reflects the building standards of the middle of the last century. Maintenance is somewhat lacking, there is no classroom for distance education, there is no auditorium, it is difficult to teach in smaller groups and seminars, teaching equipment is lacking and classroom for simulation and demonstration is in urgent need of renovation. The majority of the lectures are given in the Eirberg building; this does not have capacity for very large classes, but smaller classes, seminars and clinical laboratory are all housed there. The information technology service runs a computer center at Eirberg where all students and staff have access to Internet-linked computers and printers. The Nursing Research Institute is also located at Eirberg.

3.8 Administration
The management of the faculty is in the hands of faculty meetings, the faculty council and the chair of the faculty. All 20 tenured teachers of the faculty have a seat at faculty meetings, along with four student representatives. The faculty council comprises three teachers, the faculty chair and two students.

Hardly any formal link exists between UI and UA. There is general agreement between the two universities about collaboration but there has not been any systematic collaborative work so far.

There are questions about the distribution of funds according to the budget allocation model ("reiknilíkan") used, based on a Swedish model; the model was revised in 94/95. The nursing faculty states that the model does not reflect the real financial needs of the faculty nor does it reflect the proportional needs between the various faculties of the University of Iceland. The teachers have received grants from the Icelandic Research Council and the University of Iceland Research Fund.

3.9 Research
According to the university administration authorities, research activities of the nursing faculty need to be emphasized and supported vis-à-vis other faculties of the university. The nursing faculty was established in 1973. Originally the main focus was on teaching, but as teachers’ education has improved overall, there is now much more emphasis on research. Some faculty members worry, however, that if the number of students were increased in reaction to the nursing shortage, the research focus would suffer and the major emphasis would again be on teaching. Research projects of the faculty are based both on individuals’ clinical and theoretical interest and on collaboration with other nurses and scholars in Iceland or abroad. Collaboration between teachers on the nursing faculty in research is still limited. Preparation is under way for establishing joint positions between the University and the National University Hospital.

The Research Institute for Nursing (RIN) was established in 1997. One FTE nurse researcher works at the RIN in counseling and research; 50% is considered to be her
own research and 50% in counseling research work for others. The RIN has a small computer laboratory. Some faculty use the facilities both at the RIN and the department of education. Both temporary and full-time faculty use the RIN. The institute appears to have opened up new opportunities and facilitated research for faculty and should help to make nursing research more noticeable. The institute operates e.g. on the excellent idea of linking students with teachers and professors according to research areas and interest, as well as promoting collaboration between staff members. Both research studies and proposals are presented at different stages at special sessions. Graduate students are encouraged and invited to participate in those sessions.

3.10 Students’ Evaluation of the Program
Currently, there are 240 students enrolled in the nursing program. Last fall (2000) 102 new students enrolled in the nursing program. The number has been gradually falling in the last six years, among other things because diploma nurses are gradually completing their studies. Since 1993 a competitive exam has been held after the first semester in the first year, a *numerus clausus*. Initially 60 students who qualified proceeded, but the number has been raised to 65 students. Students are evaluated mainly on written exams but also on assignments, clinical/practical assessments and in seminars. It was stated that average grades had risen since competitive exams started. As in the program at the University of Akureyri, the reason for *numerus clausus* is mainly the difficulty of providing the students with appropriate clinical practice opportunities.

Several introductory meetings are held with the students during the first year and later if necessary. Students also receive information through the Internet and the university syllabus.

During the visit the PRG had an opportunity to interview a few B.S. students, newly graduated nurses and students from the master’s program. The views and opinions in the following chapters can, therefore, not be used for generalizations. They only reflect the opinions of these respective individuals.

**B.S. students**

During the interview with the PRG, B.S. students said they felt they controlled their own education in the program, and that they could use their own ideas and teachers were willing to listen and involve them in their work. However, there was still a feeling that in some respects rules and regulations at the faculty were too rigid. It was mentioned that rules and regulations were too strict and needed to be to loosened up, and increased democratic decision-making was asked for.

But they also said they had good access to computers and articles through the Internet, and thought they were well-prepared to take advantages of Internet-based resources.

Usually the lectures and respective clinicals are planned in the same semester. But some students felt that the gap between theory and practice was too great. They felt that they were reasonably prepared for graduation because of summer work in clinical settings, which most nursing students took on even though it was not mandatory (in
contrast to the program at the University of Akureyri where such work is required). Part-time work during the school year was also common.

Students said they saw many sides of nursing during the clinicals, but only for a short period of time, and with too little insight into clinical subspecialities. They felt they were given too many school assignments during the clinicals. On one hand, they felt these assignments were helpful and in many ways good in retrospect, requiring profound information gathering e.g. on the Internet. On the other hand, they complained that:

- Assignments involved too much workload and were too demanding in the clinical settings where the students were under high pressure.
- Students needed more time than they got for practicing clinical skills and to gain insight in what is going on in the units.
- Sometimes too many students were looking for scarce and precious patients for the assignments.
- Sometimes it was hard to see the connection between project work and clinical work.
- Students are pressured to use a certain number of articles as references with assignments rather than consider how appropriate the articles are.

Given the concern many students expressed concerning the assignments, the PRG suggests that the number of assignments could perhaps be cut and/or that at least some of the assignments could be more open-ended in nature.

Almost all project and thesis work is group work, and some students complained that group work resulted in a single grade, even if some students contributed more than others. Perhaps it would be better if students had more opportunities to work independently, although the importance of group work should not be undermined in preparation for the real world.

**Graduates**

Generally, it was felt that newly-graduated nurses were well prepared for work, even though they worry about future responsibilities. The graduates of the program expressed many of the same views as the B.S. students. They felt that summer work in health settings was essential and gave students both confidence and good experience. Students also learned a lot from thesis/project work. A good combination of theory and practice was necessary for future practice. They thought students learned well how to use resources, were encouraged in global thinking, Internet use and library use.

Graduates of the nursing program have been very sought-after at work. Some graduates go into non-traditional jobs, e.g. companies/private sector, research institutes and informatics. There is a concern, especially in geriatrics and psychiatry, that nurses are not keen to go into those fields, that nurses seem to be more interested in high-tech area work. Young people show more interest in acute care in specialized settings. It is felt that taking care of “regular” patients needs to become more desirable for RNs today. It is cause for concern that shift work does not fit young people’s lifestyle today. There should be emphasis on finding out what is attractive to the youngest generation of nurses. Most graduates go into hospitals and community health care settings. Some of the teachers have little clinical experience, and more
clinical role models are needed. Most larger health care institutions offer orientation programs to ease the transition into the workplace.

**Master’s students**
Graduate students were happy with the program, felt it was fulfilling and considered it a great success. The lectures and the program on the whole were considered of high quality. There was good communication with the teachers. Work with a mentor was considered the highlight by some of the students of the graduate program. Students have to decide early on what courses to take in the graduate program and what project to work on; if not, someone else will decide for them. Students have to find the “right” teacher. Some would like to have more graduate courses to choose from.

Graduate students are required to go abroad and take 5-15 credits of work/courseload. One graduate student was very happy with her experience, but another student thought Icelandic courses had been of better quality. She felt the expense of going abroad was far too great, and suggested that the practice should be abandoned. The PRG think that this requirement is a good one, but recommends that to cut costs for students the faculty should allow students to meet this requirement by completing DE courses from other programs, as was done with an informatics course last year. Such practice could also encourage students to look for and identify possibilities for continuing education on the Internet.

3.11 **Summaries of findings**
The University of Iceland is historically a large, old university that offers a great variety of university education. The university has since 1973 offered nursing education at university level. In 1989 the midwifery program was established as postgraduate study. In 1998 a M.S. program was offered to nurses. Since 2000 the faculty of nursing is independent within the university. The faculty of nursing is organized in its structure and focus similarly to other faculties at the University of Iceland, and faculties at other large universities.

The course content is partly scientific and high-tech in nature. This is reflected in the curriculum and in the organization of the education, including evaluation of the students and the form and number of examinations.

In the first two years of the B.S. program emphasis is placed on course work. Over the last two years there is a combination of course work and clinical assignments. This implies that students have the opportunity to relate theoretical knowledge to practice and to apply it in specific situations. The ability to relate theoretical knowledge to practice situations is seen as a central ability of a graduate nurse.

The teaching methods vary depending on the focus of study, the most common methods being the lecture format, but also seminars, project work, practical classes and clinical tuition. The introduction of professional, rational and critical thinking seems to be the main point, and to determine the choice of methods of teaching.

It seems as if the clinical part is well connected with the theoretical part in terms of purpose and content. However, there are certain problems in connection with the
clinical lectures. More good clinical bedside role models are needed and the supervisors in the patient units need to know more about the educational background and needs of the students, in order for them to benefit the most.

It seems as if the nursing education both on bachelor’s and master’s level is characterized by a societal demand for highly qualified and clinically competent nurses on a technically high level.

In general, the students seem to be reasonably content with their education and this seems to be the same at all levels. The students feel that they control their education and that they can use their own ideas. They also have a feeling that the teachers are willing to listen to them and take notice of their views and opinions in their own proposals. They estimate the academic standards in the education as high and the lectures are of good quality. However, the students emphasize some weaknesses. For one thing the work load is too heavy, among other things because of the many assignments, and they point out that the gap between theory and practice needs to be narrowed. Some feel that there are too many strict rules, and that students have too little influence.

There are 20 tenured teachers in nursing, seven with a Ph.D. and a doctoral candidate. In the foundation disciplines (science) there are four teachers, all of whom have a doctoral degrees. Besides the tenured teachers there are about 400 part-time and guest lectures. Thus there is a large number of outside teachers. The qualifications of these teachers have not been specified. There is no formal relation or cooperation with the other departments of the university and it has not been stated whether the outside teachers (lecturers) are attached to the university in any way. More formal cooperation with other departments within the university dealing with scientific fields included in the scientific curricula of nursing might be useful viewed from a perspective of teaching.

Apparently there is informal cooperation between the faculty of nursing at the University of Akureyri and the faculty of nursing at the University of Iceland, in the sense that some of the teachers from the University of Iceland are teaching at the University of Akureyri. This could be desirable as the different programs of education in this way presumably learn from each other and inspire each other, without necessarily becoming identical, and retain their specifics. Presumably it might be of benefit to increase formal cooperation between the two faculties of nursing.

When the faculty of nursing at the University of Iceland was established in 1973 teaching was its main focus. The faculty needs increased financial resources if it is meant to fulfil the research quota responsibilities at the same level and of the same degree as other departments at the university.

At any rate, there has been a marked increase in the faculty’s research activities, especially in relation to the establishment of a research network both nationally and internationally in cooperation with different universities and institutions of research. The establishment of RIN in 1997 seems to have had a positive effect and has made the nursing research more noticeable.

Thus the education appears to be both based on professionalism and on research.
 IV. Evaluation and recommendations

The faculty and students at both schools verified the assessment of strengths and weaknesses cited in each of the self-evaluation reports (SER), as did other materials reviewed and observations on site.

1. In regard to the concern for lack of clinical experience and students’ expressed interest in obtaining more clinical skills, the PRG recommends attention be given to use of technology such as clinical simulations and interactive computerized case studies, that have been empirically demonstrated to enable students to increase both their skills and confidence in providing care to actual patients.

2. Further, the PRG believes that sharing of clinical experience by students may be an area for further collaboration between the two institutions whereby students from the University of Iceland might benefit from clinical experiences in a rural setting, and students from the University of Akureyri gain the desired additional specialized care experiences (e.g. psychiatric nursing) noted in the SER of University of Iceland.

3. Collaboration might also be a benefit to both schools if undertaken in regard to research. Specifically, the University of Akureyri has established a strong infrastructure in the form of its Research Institute. The University of Iceland has more faculties who have established a research track record. Should faculty at Akureyri undertake research in conjunction with faculty at the University of Iceland in areas of common interest, the PRG believes both schools would benefit greatly and the research agenda at both schools would be likely to advance more rapidly than if each continues to work in isolation of each other.

4. Similarly, in regard to concerns noted in the SER regarding the faculty shortage, the expressed desire of students at Akureyri for more specialized content, and the able manner in which DE is employed, especially at Akureyri, the PRG recommends that courses offered at University of Iceland be made available to them by distance education and vice versa. Design and implementation of online courses could facilitate such collaboration.

5. Concerns expressed regarding library resources for DE students might be addressed by using more Internet resources in the form of online journals etc. In fact, the PRG would recommend attention be given at both sites as to how technology use can be increased to enhance courses and resources available to all students.

6. The PRG agrees with the assessment in the SER regarding the overuse of lectures relative to other teaching methodologies. Increased use of more student-centered teaching methodologies such as case studies, etc. would not only introduce more balance in how content is delivered but would also be more consistent with the objectives related to developing students who can think critically.

7. The PRG concurs that teaching based on several theories, both nursing and non-nursing, would put students in a better position to deal with contemporary nursing problems than would focusing only on one nursing theory.
8. The PRG believes that the University of Akureyri should be complimented on the contribution they are making to nursing care in a rural setting and the University of Iceland on their fine scholarship in investigating relevant current research questions of concern to the profession at large. The PRG encourages both schools to increase the extent to which they disseminate their scholarship (e.g. Akureyri evidence based practice/DE, i.e. the scholarship of practice), and research in the case of the University of Iceland.

9. The PRG believes that attention should be given to increasing focus on systematically evaluating nursing processes and outcomes of both programs and that the resulting findings should be used to modify, expand, and sustain programs. Thus, the PRG agrees with students who noted a desire for feedback (evaluation) in the middle, and not just at the end of their experiences.

10. Concerns noted in the SER and on site also reinforce the need for more attention to be given to faculty development (e.g. in terms of use of technology, how to facilitate interaction among students using web-based strategies and techniques for dealing with technical difficulties encountered when using DE) and for orientation of temporary faculty.

In summary, the PRG applauds both nursing programs, each of which are making significant contributions to the health of people in Iceland and to the profession of nursing. The programs are complementary to each other, e.g. the focus at the University of Akureyri on preparing a generalist and at the University of Iceland a specialist; focus on rural health at Akureyri and more urban at the University of Iceland; scholarship of practice at University of Akureyri and research at University of Iceland. In addition, the PRG believes that there are areas where each, through collaboration, can benefit so that both programs are better able to more efficiently and effectively realize their own objectives and ultimately to make even greater contributions to the country’s health care.
V. Answers to Questions posed by the Ministry

1. Should the institutions respond to the shortage of nurses?
   In principle there is a connection between the need of a community for a certain subsection of a faculty and the commitment of the university to educate a sufficient number of people in order to maintain a balance between supply and demand. However, this balance is depending on a number of conditions on which the university does not necessarily have an influence. There is a long history of nursing shortage in Iceland as in many other western countries. Much work has been put into finding solutions to the problem, but the shortage remains and the need for nurses increases with new job opportunities.

   First, it is important that the profession be attractive to young people who are planning their future careers in order to have enough student applicants with the right qualifications. Second, it is necessary to have the appropriate and ample resources, e.g. financial, staffing and other conditions in the nursing faculty. Last, it is important that the faculty of nursing has the capacity and capability in terms of academia, education and research in order to be able to accommodate and educate an increased number of students, so neither the education nor the research suffers a reduction in quality.

   It is also necessary to take into special consideration the limited number of clinical practice opportunities for students in Iceland. And, furthermore, there is also a limited number of qualified clinical teachers and supervisors present in the clinical settings.

2. If so, are the institutions prepared for that?
   The two universities are different and it is necessary to benefit from the respective strength of each one. The University of Akureyri is a young university and small. The department of nursing is also young and its resources are naturally limited. There are two facts that have to be noticed in relation to this question. The teaching staff of the department may not have reached a full academic level, and it has not yet attained a real tradition of research. The number of research activities and publications in the department is in its infancy.

   At the same time the teaching responsibilities are dispersed over a large geographical area and even though distance learning is a success, there are local demands that need to be considered and incorporated into the curriculum. The department will benefit from recruiting more qualified teachers, which certainly could be difficult but not impossible.

   On the other hand, the department of nursing is open to new ideas and suggestions and plays an important role in rural development of health care. By establishing a faculty of Health and Science in this thinly populated part of Iceland, it is expected to take on many concomitant responsibilities. Quality of education will always have to be taken into consideration.

   Finally there is the question of possible clinical settings for students. As mentioned earlier in this report the students call attention to the fact that it is hard to find clinical
people to supervise, and that they need to be better informed and to spend more time with the qualified nurses. Therefore, if an increasing number of students is admitted it will be necessary to plan how to secure, not only the quality of the theoretical part, but also the quality of the clinical part of the education.

For the faculty of nursing at the University of Iceland it is different. The faculty is older and a more established unit where teaching and research now seem to function well. However, this situation is new, and the faculty has stressed to the PRG that if the number of students is increased in reaction to the nursing shortage the research focus will suffer and the major emphasis will again be on teaching. It is a delicate issue where an increasing number of students might reverse the constructive development in the faculty of nursing at the University of Iceland.

The existing budgeting model for all departments used by the University of Iceland may need some re-evaluation to make sure the distribution of valuable resources is fair. If the number of students is increased it is recommended that this model will be critically analyzed.

3. Are the nursing graduates well prepared for the labor market?

The best answer to this question is naturally given by the newly-graduated nurses themselves and their employers. The PRG only had a chance to discuss this issue with four representatives in Reykjavik, two newly-graduated nurses and two managers. It is not possible to generalize from this discussion, but it was felt that new graduates are generally well qualified. They make use of their education in practice among other things from their theses and project work and they are theoretically savvy, they know how to use resources, they are encouraged in global thinking, Internet use and library use.

At the same time more new graduates enter non-traditional jobs, e.g. in the private sector, research institutes and informatics. They are thus well-educated and oriented and have become attractive not only to the traditional employers, i.e. hospitals and local authorities, but also to a number of new/other employers whose main production is on the periphery of the health services or even outside of it.

It is of concern that young nurses seem to be more interested in working in high-tech areas. There is a special concern in geriatrics and psychiatry that new graduates are not interested in these fields. It should be of concern that working with “regular” patients is not considered challenging, as well as the fact that shift work does not fit young people’s lifestyle. These issues were especially pointed out by both students and managers.

Therefore, it is important in the future for the institutions of education to plan and decide to what extent they are going to prepare the students for reality in terms of demand for nursing services. The above mentioned trend is internationally known and parallel to the experience of most western countries.
4. **How well do the institutions respond to the need of the labor market?**

This question is connected to the preceding question. Apparently, the health sector has an unmet need for nurses, for example within the geriatric and psychiatric fields where the demand in Iceland, as well as in other parts of the Western world, is expected to increase. It is not possible for the PRG to foresee exactly the demand for nurses in Iceland today or in the near future based on any reliable data. The PRG finds it worth considering how to attract and keep young nurses in specialties where there is a demand. It would thus be relevant to emphasize those specialties within both theoretical and clinical education. Further development within these areas will hopefully both attract more new graduates as well as giving them opportunities to use and develop further their academic qualifications. The most relevant response to an unmet need for some qualification in a society is in principle to offer more education.

Finally, the PRG has not enough information about the applied budgeting models for the departments. A budgeting model can be used in such a way that it could be advantageous for the institutions to respond more to the need of the labor market.

5. **Is the relative weighting and the relation between classroom work and practical clinical training appropriate?**

Clinical training in a bachelor program takes place primarily during the middle of the course or at the end. At the University of Akureyri as well as at the University of Iceland the total length of the clinical program is about 24 weeks. The bachelor programs of the other Nordic countries include at least a one-year clinical education period. Compared to other nursing programs this is a relatively short clinical period especially when viewed in the light of the fact that it is a 4-year program. Of course there are both advantages and disadvantages in this short clinical period of education. Some of the advantages are that there is a good connection between the theoretical and the clinical part of the education, because the teachers are involved also in the clinical part of the education.

Some of the disadvantages might be that the students do not achieve the necessary clinical qualifications. Another disadvantage is that it is difficult to intensify the international collaboration that often mainly consists of exchange of the students in the clinical period of the education, especially when those periods are so brief.

However, when students are well-prepared for their work even though they worry about being responsible, this is mainly due to the summer work in the health settings, that gives the students both confidence and good experience. It might be a good idea to include the extra training provided by the summer work in the context of the education.

The relation between theoretical and clinical training seems quite appropriate and in many ways optimal. Since each clinical course is accompanied by an academic course, the students have received tuition in the theoretical material on which the clinical study is based and the assignments are based upon theoretical knowledge the students already possess. Good organization and co-operation between the clinical instructors and the course instructors is very important.
6. **Should any subject areas be more strongly emphasized in the curriculum?**

The curricula at both nursing departments are based on a holistic point of view and emphasize the basic sciences and disciplines relevant to nursing. These are reflected in both academic and clinical courses. It is also a strength that there is an ongoing review of the curricular structure. Especially, the departments need to be open to changing societal needs, such as increased demand and/or decreased supply in certain specialty fields, as mentioned before. The requirements, as well as the educational methods should be discussed and evaluated constantly. It is considered a positive step that the nursing department at Akureyri is revising its former monotheoretical framework based on only one nursing theory, and hence including a broader variety of theories into the program. At Akureyri the department is planning to add methods of problem-based learning techniques as well as including more project work to add variety to the learning process.

7. **What is the experience with distance-learning at the University of Akureyri?**

In spite of technical problems in the past, on the whole the experience with distance learning at the University of Akureyri appears to have been a very positive one. The program has opened up possibilities for prospective students from different parts of the country to complete a nursing degree from their own community, and probably helps decrease the nursing shortage in areas outside Reykjavík. One could say that the first group of DE students starting in 1998 was a part of a pilot project and after two year’s “testing” more groups have now been added. The quality of the program can e.g. be judged by the relatively low drop-out rate of the DE students, as well as from the positive attitude of those students. The program may have accelerated the use of the Internet and ICT in the nursing department. That is a development which could result in opening possibilities in nursing education for individuals across the whole country, not just from a few selected communities, as well as strengthening the department in general. The university has taken several steps to strengthen the DE program e.g. with better technological infrastructure and a new staff member – a director of distance learning. Experience and uses of DE tools and methods may also facilitate cooperation between the nursing departments of University of Iceland and Akureyri and result in more use of such methods and tools for work and learning by the nursing graduates of the future.

8. **What is the experience with the recently launched master's programs?**

Currently, the University of Akureyri does neither have the necessary expertise nor the resources to carry a master’s program independently. The PRG believes that the University of Akureyri cooperates with an “experienced” University and thus gathers both experience and knowledge which will be needed in order to offer an independent master's program.

The master's program at the University of Iceland was established in 1998. The faculty of nursing collaborates with universities in Sweden, Norway and USA in order to increase academic opportunities. The faculty seems to be prepared for the implementation of the master's program, many of the teachers have doctoral qualifications and the faculty is focused on keeping up with research. The staff has expert knowledge in various fields of nursing, which is a precondition for offering courses at a master's level. To ensure quality and use scarce resources in the most
In an economical way it is suggested that the two universities explore possibilities of closer collaboration in their master's programs.

9. **What are the estimated effects of establishing the Faculty of Nursing at the University of Iceland?**

The estimated effects of establishing the Faculty of Nursing at the University of Iceland are bound to be many. First and foremost, the academic nursing status and capacity will increase and improve significantly by having an independent nursing faculty. This means that the nursing faculty will be in a position to have greater influence in academic society, in committees and projects, board meetings etc. as well as having a positive impact on the overall strategy and administration at the University of Iceland.

At the same time it will result in greater opportunities for collaboration within the university and in connection with other universities and research centers. Moreover, new relevant research relations may emerge, and possibilities for external funding for various research activities may improve.

Therefore, the establishment of the Faculty of Nursing will hopefully become a booster for both nursing and health care and create new opportunities as well as making the nursing profession more attractive to young people.

The question is also whether the faculty is ready to become an independent faculty in terms of meeting standards of quality and quantity requirements. To the PRG’s best knowledge there are no exact standards used to evaluate a faculty on how to qualify as an independent faculty. The PRG believes that the faculty of nursing should be able to take on the responsibility and meet the challenge.

10. **How does the research aspect of nursing function in the institutions?**

Both faculties are expected to spend 40% of their time on research. The department at Akureyri is young and is facing all the challenges a new department can expect. The faculty and staff are working on or have just recently obtained their required academic qualifications. The Research Institute should become a valuable resource and the faculty and staff should take better advantage of that. Most of the research is related to clinical work and clinical education, which is important. In such a small department as Akureyri is, it is wise to use its research resources efficiently and not try do be “all things to all people”. Examples show that research projects have been conducted in collaboration with international researchers, but a network of researchers internally and externally has not yet been established.

The PRG recommends that emphasis be on strengthening the research part of the program and that a research strategy be developed for the coming years. Thus, an infrastructure of research could be established which could facilitate the research efforts at the department of nursing at the University of Akureyri.

The faculty of nursing at the University of Iceland was founded in 1973. At first, the main focus was on teaching, but as the teachers grow in number and their academic
qualifications improve the focus is shifting more towards research. The focus on research is both on clinical and theoretical aspects of nursing.

The number of research publications has increased in recent years. A number of the research projects are conducted in collaboration with other universities and research institutions. Currently, the faculty is building up research networks with institutions both nationally and internationally.

The faculty has developed an infrastructure of research that facilitates research efforts in the faculty and the Research Institute for Nursing (RIN). Since the founding of RIN in 1997 new opportunities have emerged. There are difficulties in raising external funds to complete research projects, which is not unique to this faculty.

The PRG is of the opinion that the research part of the faculty needs to be acknowledged and supported in comparison with other departments of the university, and recommends that initiatives be implemented in order to achieve this.

The PRG recommends that the faculty works further on a strategic research plan for the near future.
Appendix I

Guidelines for the external assessment by the Peer Review Group (PRG)

This text is based on the Guidelines for European Pilot Projects for Evaluating Quality in Higher Education, published by the European Commission in 1994 with some amendments and rules nr. 331/1999 on quality evaluation of university education in Iceland.

The process for the evaluation is that each institution first completes a self-evaluation report, after which the external team of experts visits the department, faculty or school. In general the assignments of the Peer Review Group (PRG) are the following:

- The group has to form an opinion on the basis of information supplied by the department/faculty and by means of discussions held on the site about the quality of education and the quality of the educational process, including the organization of education and the standard of the graduates. In making its evaluation, the PRG will take account, as far as possible, of the expectations of the students and of society.
- The group has to form an opinion on the relationships between the departments and their university, and to consider the link to research conducted within the institution.
- The group has to make recommendations on improving the quality of the department/faculty concerned.

I. The Members of the Peer Review Group

- The chairperson may be considered as *primus inter pares* and has no connection with the establishment to be visited. This person should have experience of management of universities or other higher education institutions and a good knowledge of the evolution in higher education that has taken place in recent years;
- two experts from the academic field (one possibly being the chairperson);
- an expert from the employment area taking up graduates and/or from the professional associations;
- one independent expert in the field of distance-learning in higher education;
- one of group member serves as secretary who will be responsible for organizing the work of the PRG and preparing its report.

The Peer Review Group is appointed by the Minister of Education, Science and Culture.
II. The Preparation of the Site-Visit
Some of the experts appointed to the peer review group may not have extensive experience in quality assessment. The task is a difficult one, and demands considerable amount of work. These guidelines are intended to serve two purposes:
a) To guide the experts and hopefully lighten their work-load;
b) To ensure the relative homogeneity of the assessments by providing some points to be considered and criteria to be used in making the evaluations.

The process described in these guidelines is outlined step by step. However, it is meant to guide the committee in its work but not to limit it.

II.1 Verification and comments on the self-assessment report
The task of the PRG is to verify and comment on the content of the self-assessment report, as well as respond to questions raised by the report and during the site visit. It is very important to study the self-evaluation reports carefully before the committee comes together for its meetings. The comments should focus on the following questions:

- Is the report sufficiently critical and analytical?
- Are the strengths and weaknesses clearly presented?
- Is any information missing?

Previous experience has shown that these elements are often lacking in the self-evaluation reports. However, in examining the reports with these questions in mind the PRG is not to formulate its final judgement. This is only a first impression, based on written information. During subsequent discussions and the site-visits there will be time to form a more considered opinion.

Each member of the PRG is requested to send his/her comments on the self-assessment report to the secretary of the group by November 21st. In the first meeting the secretary will summarize the comments of all PRG members, and subsequently make a first rough draft of each faculty, summarizing quantitative data and its principle characteristics, based on the self-assessment. In addition the secretary of the group will formulate a draft version of the terms of reference for the site-visits for discussion at the preparatory meeting.

II.2 The Formulation of the Terms of Reference
Every expert has implicit ideas about the quality of a curriculum or the qualities of the graduates. Individual terms of reference will also differ because of the different backgrounds and different experiences of the members of the group. Therefore, it may prove helpful if one of the first tasks in the meetings of the PRG was to make implicit opinions explicit and to formulate a common terms of reference, acceptable to all PRG members. This would provide the framework for the group to assess the departments/faculties involved.

In defining their terms of reference, the PRG should always keep in mind that the aims and objectives as set forward by the department under evaluation have to be the starting point for their assessment. It is not the intention to impose external criteria and/or standards, for example from a professional body. However, the PRG must
verify if the aims and objectives proposed by the department are sufficiently clear, complete and academically rigorous.

During its meetings the PRG will:
- discuss the self-assessment reports,
- come to an agreement on its terms of reference,
- decide upon a division of labour for the committee so that the same working method will be used in each of the departments under evaluation.

II.3 Possible Topics for Discussion
During the meetings, certain topics concerning the frame of reference will probably be brought up. One of the basic problem is how to assess the quality of education or what the PRG should be looking for? This involves at least four questions:
- Are the goals and aims clearly formulated?
- How are these goals and aims translated in the curricula?
- Do the student assessments and the exams reflect the content of the programmes and courses?
- Does a graduate have the expected knowledge, skills and attitudes?

These factors defining quality are further formulated in the following figure:

| Stated goals and aims | Translation of goals/aims in curricula | Reflections of programme contents in the examinations and the design work | The graduate: what did he/she acquire with regard to: a) knowledge b) skills c) attitudes |

Quality is a concept which can be interpreted in many ways. We cannot speak of the quality, we have to speak about qualities or aspects of quality. The consequence is that a PRG has to look for the requirements of the different stakeholders: the students, the academic community, employers, government, and society-at-large. This is difficult to judge at first, without spending a great deal of time in lectures and seminars, but that is not the role of the PRG.

Indirectly, an opinion can be formed by drawing on the comments of students with respect to the educational provision, the extent to which the lecturers are able to receive didactic training, and the extent to which didactic qualities are taken into account in the appointment and promotion of staff. These are aspects to discuss with staff and students.

The quality of the educational programmes is further determined by the content and the level of the subject matter taught. The content is again strongly dependent on the objectives and the manner in which these are translated into final student assignments. To a certain extent, the course description gives some insight into the course content.
Questions which can be asked concerning this are related to the consistency of the programmes and the underlying philosophy.

The nursing programmes are professional programmes and therefore the PRG should expect the self-assessment report to answer questions like: Are the elements necessary for practice in the professional field included? Does the content of the programmes satisfy the requirements of employers and/or the profession? For the master’s programme, which is more academic in nature, questions could be: Does the programme conform with recent developments within the discipline? Is it of sufficient academic standard?

The given restraints and educational policy also determine the quality of the educational programme. What are the conditions under which the degree programme must give shape to the educational process? What is the relationship between teaching and research? What is the situation concerning study load? What policy is followed with respect to education? An important aspect of educational organization and management is the structural quality control. In what ways are these attended to? What is done as a result of evaluations?

II.4 The relationship between education and research
The main emphasis of this evaluation is on education. Nonetheless, the link between teaching and research is characteristic for a university, thus the educational quality cannot be assessed without taking this link into account. Questions like: “In which way do students come into contact with research? What role does research play in the programmes?” cannot be avoided and must be answered during the assessment. The assessment of research projects or research programmes as such is not part of the terms of reference of the PRG.

III The Site-Visits
University Councils or relevant departmental/faculty authorities appoint a chairperson for a self-evaluation group who organizes and bears responsibility for implementing the self-evaluation and writing the self-evaluation report. The chairperson also serves as a contact for individuals both outside and inside the institution and organizes the site-visit of the PRG.

The site-visit schedule for each institution should include the following:

1. First meeting with the university authorities
The visits should start with an introductory meeting with the rector/president (vice-chancellor) of the institution and senior members of the administration. During this meeting the mandate and objectives of the PRG should be presented.

2. Meeting with the self-assessment group
During this meeting the PRG can inquire about points made in the self-evaluation reports and ask for clarification and explanation.
3. **Meeting with representatives of the student body**
The departments should choose students at random, approx. three from each cohort. The students can be a very rich source of information, but the information needs to be compared against the ideas of the staff members. The student interviews are important for getting insight into the work load, the didactic qualifications of the staff, the coherence of the programme, whether they are they familiar with the goals and aims of the curricula, and the organization of the curricula and the facilities. The interviews with the students should be held in the absence of staff members so that the students may speak freely.

4. **Meeting with staff members other than the self-assessment group**
The meeting with the staff should be divided into two sessions, one with permanent members of the teaching staff, who are not members of the self-assessment group, and second with instructors or temporary members of the teaching staff. These meetings will be used for a discussion on the content of the curricula, the aims and objectives. Other topics to be discussed are: the manner of student assessment, examinations, student-work, research projects etc.

5. **Looking at the facilities**
A part of the programme should be dedicated to looking at the facilities: lecture halls, working group rooms, laboratories, practical rooms, hospital facilities, libraries etc. For the visit of the facilities the PRG could be split up.

6. **Final meeting with the university authorities**
The visit should conclude with a discussion between the PRG and those representatives of the University authorities, who participated in the first interview. It may be the case that the PRG find it relevant at this time to present its first and preliminary impressions. In that case the PRG should use the occasion to discuss the main elements of its findings. It is at this point in the evaluation that the PRG can have a personal discussion about a number of things, since the public report will not include any of the elements involving individuals.

It is useful for the PRG group to spend some time at end of each day to formulate its findings. The group will also be able to spend time together after the visits in order to sum up for the report.

**IV. The Report**
After the visit of a department, the secretary will write a first draft of the department, drawing on PRG member comments and minutes of the meetings. The secretary will use a format for the department report that is compatible with the format and structure of the guidelines for the self-assessment. The draft versions of the report will be distributed among the members of the PRG for additions and comments. The final version will then be sent to the institutions for clarification of factual errors. The PRG will decide what to do with any department comments.

The final report of the PRG will be presented to the Minister of Education, Science and Culture.
Following is a suggestion for a PRG report format, based on the items of the Guidelines for Self-assessment. The PRG may choose to structure its report in a different way, combine some items, omit others or include new ones.

1. Introduction
   • the committee
   • terms of reference
   • working method
   • short evaluation of the review

2. Policy and objectives
   • Official objectives
   • Policy and objectives of instructors’ research
   • Connections between research and scholarship of permanent faculty and instruction
   • Policy concerning on-the-job training of students
   • Policy on the relative weighting within the study programme
   • Policy formulation, setting objectives and monitoring

3. Content and processes of study programme
   • Connection between objectives and courses
   • Relative emphasis on Icelandic and foreign instructional materials
   • Influence of the National Curriculum Guide on content of the programme

4. Instruction and instructional methods
   • Organisation of the programme and responsibility for instruction
   • Instructional methods
   • Support for students
   • Connection between regular instruction and practice teaching

5. On-site study and training in hospitals
   • Duration and placement in the programme
   • Student preparation
   • Preparation of tutors and teachers supervising students in practice teaching
   • Students’ assignments
   • Organisation, responsibility and supervision, tutoring and counselling
   • Connections to other studies
   • Student evaluation
   • Supply of schools

6. Student assessment
   • Frequency of exams
   • Responsibility for examination content and standards
   • Connections between student evaluation and objectives
7. **The student body**
   - Student numbers
   - Admission requirements and selection of students for admission
   - Drop-out and completion rates
   - Achievement

8. **Staff and human resource management**
   - Staffing: number and composition
   - Teaching responsibility
   - Division of responsibilities between research, administration and teaching
   - Personnel management

9. **Facilities**
   - Budget and sources of funding
   - Infrastructural support
   - Lecture halls, laboratories, libraries, computer rooms etc.

10. **Administration and quality management**
    - Administrative efficiency
    - Internal quality assessment
    - Procedures for innovation of curriculum

11. **Research and development work**
    - *Connections between research and development work and instruction and student projects*
    - Co-ordination of projects and co-operation on research
    - Financing of research

12. **External relations**
    - Contacts with private, public and professional bodies
    - Consultation with external parties concerning new programme offerings
    - Contacts with other institutions of higher education nationally and abroad
    - Participation in exchange programmes
    - Connections with schools concerning students seeking employment

13. **Summary of findings**
    - Main conclusions and recommendation

V. **Comments on the context for the evaluation project**
   In recent months the political and public debate on nursing education has focused on some issues that define the wider context for this evaluation project. Even though the main focus of the evaluation is on processes within the institutions as formulated in the self-evaluation reports it is necessary take the wider issues into account.
   Some of the major events and issues concerning nursing education in Iceland currently are the following:
   - As in previous years, there is a shortage of nurses at Icelandic medical institutions. According to a report by the Association of Icelandic Nurses, published in March
1999 (“Mannekla í hjúkrun”), the shortage accounts to approximately 14% of nursing position equivalents. This accounts to a shortage of around 300 nurses at Icelandic medical institutions.

- The University of Iceland and University of Akureyri have both recently graduated their first master’s students. The University of Akureyri launched their programme in January 1997 in close cooperation with the Royal College of Nursing (University of Manchester). The University of Iceland launched its programme in the fall of 1998.

- The University of Akureyri pioneered in offering undergraduate nursing education via distance-learning in 1998. Students both from the western fjords (Ísafjörður) and the eastern fjords (Egilsstaðir) have used this opportunity to pursue their B.S. degrees in nursing.

- The department of nursing at the University of Iceland was transformed into a faculty, the Faculty of Nursing, in spring 2000. Before that time, from its establishment in 1973, the department had been a part of the Faculty of Medicine at the university.

Taking these events and issues into account the Ministry of Education, Science and Culture has decided to ask the PRG to address the following questions that concern the main issues that have been prevalent in the ongoing debate about nursing education.

1) Should the institutions respond to the prevalent shortage of nurses in medical institutions by graduating more nurses annually? Or should perhaps more emphasis be put on attracting nursing graduates into the medical institutions?

2) If so, are the nursing education institutions prepared to adapt to a larger number of graduates annually?

3) Are nursing graduates at the two institutions well prepared for the labour market?

4) How well do nursing education institutions respond to the needs of the labour market?

5) Is the relative weighting and the relation between classroom work and practical training appropriate in the two institutions?

6) Should any subject areas be more strongly emphasized in the curriculum?

7) What is the experience with distance-learning at the University of Akureyri (please note any positive and/or negative aspects)? Is the distance-learning programme of the same academic standard as the regular programme?

8) What is the experience with the recently launched Master’s programmes at the two institutions (please note any positive and/or negative aspects)? Are the programmes of sufficient academic standard in an international perspective?

9) What are the estimated effects of establishing the Faculty of Nursing at the University of Iceland (please note any possible positive and/or negative effects)?

10) How does the research aspect of nursing function in the institutions?
Appendix II

External Assessment – Nursing Education

The Site-Visits
November 27th-30th

University of Akureyri
Tuesday November 28th

07:30-08:15 Flight to Akureyri

08:15-09:30 Meeting with the university authorities (Meeting room at the airport)
Þorsteinn Gunnarsson, president
Ólafur Búi Gunnlaugsson, director
Þórleifur Stefánsson, director of research/forstöðumaður rannsóknarsviðs
Ógmundur Knútssson, director of policy/ framkvæmdastjóri stefnumótunar

9:30-11:00 Meeting with the self-assessment group (Sólborg-Aðalskrifstofa)
Þórarinn Sigurðsson, dean
Hildigunnur Svavarsdóttir, assistant professor
Elsa Friðfinnsdóttir, assistant professor
Kristjana Fenger, assistant professor
Bryndís Börhallsdóttir, registered nurse
Anna Lilja Björnssdóttir, student

11:00-12:00 Meeting with representatives of the student body
Edda Björg Sverrisdóttir, BSc. 2nd year
Sólveig Klara Káradóttir, BSc. 3rd year
Sigrún Pétursdóttir, BSc. 3rd year
Svanlaug – distance education (telephone)
Ragnheiður Alfreðsdóttir, MSc. programme (telephone)
Brynja Dröfn Tryggvadóttir, graduated spring 2000
Elma Rún Ingvarsdóttir, graduated spring 2000
Íris Sveinbjörnsdóttir, graduated spring 2000

12:00-13:00 Lunch

13:00-13:45 Meeting with temporary members of the teaching staff
Sigurður Bjarklind, upper secondary school teacher
Sigmundur Sigfússon, doctor
Elín Sigurborg Harðardóttir, nutritionist

13:45-14:30 Meeting with permanent members of the teaching staff
Sigfríður Halldórsdóttir, professor
Sigfríður Inga Karlssdóttir, assistant professor
Ingvar Teitsson, associate professor

14:30-15:00 Coffee

15:00 –15:30 Meeting with head of the distance education
Anna Ólafsdóttir, director of distance education

15:30-16:15 Looking at the facilities
Umsjón: Ólafur Búi Gunnlaugsson, director, Þórarinn Sigurðsson, dean and og Björn Jóhannsson, facilities supervisor.

16:15-16:45 Final meeting with the university authorities (Sólborg)

16:45-17:30 Peer Review Group meeting (Sólborg)

18:10-18:55 Flight to Reykjavík
Appendix III

External Assessment – Nursing Education
The Site-Visits
November 27th-30th

University of Iceland

Wednesday November 29th

09:00-09:30  First meeting with the university authorities (Main building)
Páll Skúlason, president
Þórdur Kristinsson, director of teaching
Halldór Jónsson, director of research

9:45-11:15  Meeting with the self-assessment group (Eirberg)
Erla Kolbrún Svavarsdóttir, dean
Ásta Thoroddsen, assistant professor
Helga Jónsdóttir, associate professor
Jóhanna Bernharðsdóttir, assistant professor
Kristín Björnsdóttir, associate professor
Porsteinn Jónsson, student
Guðlaug Vilbogadóttir, office manager

11:15-12:15  Meeting with representatives of the student body
Sigríður Zoéga, BSc. 3rd year
Sandra Hjálmarsdóttir, 4th year
Guðrún Halldórsdóttir, special BSc programme for nurses
Ólöf Kristjánsdóttir, MSc programme
Ingibjörg Hjaltadóttir, MSc programme
Helga Atladóttir, graduated spring 2000
Hulda Pétursdóttir, graduated spring 2000

12:15-13:00  Lunch

13:00-13:45  Meeting with temporary members of the teaching staff
Guðrún Jónsdóttir (Hjúkrun fullorðinna IV)
Jónína Sigurðardóttir (Hjúkrun fullorðinna I)
Nanna Friðriksdóttir (Hjúkrun fullorðinna III)
Sigrún Barkardóttir (Heilsugæslu samfélagsins)

13:45-14:30  Meeting with permanent members of the teaching staff
Hildur Sigurðardóttir, assistant professor (Barneignir og heilbrigði
fjölskyldunnar)
Jón Olafur Skarphéðinsson, professor (Lífefélisfræði)
Margrét Guðtafsdóttir, associate professor (Óldrunarhjúkrunt)

14:30-15:00  Coffee

15:00-15:30  Looking at the facilities
Supervision: Erla Kolbrún Svavarsdóttir, dean, Ársæll Þórðarson, janitor
and Herðís Hall, chairman of house committee.

15:30-16:00  Final meeting with the university authorities
(Main building)