

## APPROVED

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of the Senate of Vilnius University  
(wording of Resolution No. SPN-77 of 19 November 2024  
of the Senate of Vilnius University)

# REGULATION OF RESIDENCY STUDIES AT VILNIUS UNIVERSITY

## CHAPTER I GENERAL PROVISIONS

1. The Regulation of Residency Studies at Vilnius University (hereinafter the ‘Regulation’) establishes the procedure for the organisation, implementation, funding and administration of residency studies in the study fields of medicine and dentistry (hereinafter the ‘residency’) implemented by Vilnius University (hereinafter the ‘University’) at the University and residency bases, as well as the rights and duties of persons participating in the residency study processes.

2. The Regulation has been prepared in accordance with the Statute of Vilnius University, the Republic of Lithuania Law on Higher Education and Research, the Republic of Lithuania Law on Medical Practice of Physicians, the Republic of Lithuania Law on Dental Practice and Oral Care Practice, the Description of Procedure for the Implementation Requirements and Supervision of the Medical Residency Study Programmes and Dental Residency Study Programmes approved by Decision of the Government of the Republic of Lithuania No. 144 of 13 February 2019 “On the Approval of the Description of Procedure for the Implementation Requirements and Supervision of the Medical Residency Study Programmes and Dental Residency Study Programmes” (as subsequently amended) (hereinafter the ‘Description of Procedure for the Implementation Requirements and Supervision of the Medical Residency Study Programmes and Dental Residency Study Programmes’), the Requirements for the Medical Residency, Dental Residency and Veterinary Medicine Residency Study Programmes and the Regulations on the Evaluation and Selection of Residency Bases approved by Order of the Minister of Education and Science of the Republic of Lithuania and the Minister of Health of the Republic of Lithuania No. ISAK-969/V-445 of 17 June 2004 “On the Approval of the Requirements for the Medical Residency, Dental Residency and Veterinary Medicine Residency Study Programmes and the Regulations on the Evaluation and Selection of Residency Bases”, the Model Job Regulations of Medical Residents approved by Order of the Minister of Health of the Republic of Lithuania No. V-902 of 24 September 2008 “On the Approval of the Model Job Regulations of Medical Residents” (hereinafter the ‘Model Job Regulations of Medical Residents’), the Study Regulations of Vilnius University approved by Resolution of the Senate of the University No. SPN-43 of 21 June 2022 “On the Approval of the Study Regulations of Vilnius University and on the Amendments and Repeal of Certain Resolutions of a Senate Commission of Vilnius University” (wording of Resolution of the Senate of the University No. SPN-37 of 21 May 2024 with subsequent amendments), the Rules for Admission to Residency Study Programmes of Vilnius University approved by Resolution of the Senate of Vilnius University No. SPN-23 of 19 March 2019 “On the Approval of the Rules for Admission to Residency Study Programmes of Vilnius University”, Order of the Rector of the Vilnius University No. R-159 of 21 March 2018 “On the Organisation and Administration of Residency Studies” (as subsequently amended), and other legal acts of the Republic of Lithuania and the University.

3. Key terms used in the Regulation:

3.1. **On-call time** is the time during which the medical resident works at the relevant structural unit (centre, division) of the residency base, in accordance with a pre-approved on-call schedule.

3.2. **A cycle (module)** is a part of a residency study programme with defined objectives and expected learning outcomes, consisting of a professional internship component during which the resident, with the assistance of the resident’s supervisor or mentor, acquires the knowledge, abilities,

practical skills, and experience provided for in the residency programme at the residency base, and a theory component the sessions whereof are conducted in parallel with and related to the practical component. Cycles are divided into speciality and non-speciality (external), as well as compulsory and optional. Speciality cycle is a cycle corresponding to the speciality of the residency study programme being studied; non-speciality (external) cycle is a cycle corresponding to the speciality of a residency study programme other than the one being studied. For each cycle, a cycle description is prepared. The proportions of compulsory and optional cycles and the rules for choosing them are specified in the description of the specific residency study programme. The terms *cycle* and *module* are used synonymously in the Regulation.

3.3. **Competency Validation Committee** is a structure for the assessment of the achievement of the tiered competencies of the residency study programme(s), which operates at the University and decides on the issuance of a certificate of validation of a tiered competency to a resident.

3.4. **Medical residency** is university studies in the field of medicine designed for persons who have completed their medicine studies and wish to acquire a specialisation in medical practice in accordance with the procedure established by the legal acts of the Republic of Lithuania. Graduates of a medical residency are issued residency certificates indicating the professional qualification of a specialist medical doctor or a general practitioner;

3.5. **Dental residency** is university studies in the field of dentistry designed for persons who have completed their dentistry studies and wish to acquire a specialisation in dental practice in accordance with the procedure established by the legal acts of the Republic of Lithuania. Graduates of a dental residency are issued residency certificates indicating the professional qualification of a dental specialist;

3.6. **Tiered competency** is the totality of knowledge, clinical skills and personal characteristics required to perform the activities in clinical practice, which, when acquired, leads to the resident's right to perform the defined scope of medical/dental internship activities at the residency base independently, without the supervision of a medical/dental resident's supervisor or mentor, following their residency study programme. The list of tiered competencies under residency study programmes shall be approved by an order of the Minister of Health of the Republic of Lithuania.

3.7. **Certificate of validation of a tiered competency** is a certificate issued by the University in accordance with the procedure laid down by the University during the course of the residency studies, certifying the acquisition of the relevant tiered competency.

3.8. **Levels of supervision (autonomy) concerning a tiered competency** are a scale of levels of supervision (autonomy) of the resident's practical activities to help the residency coordinator, the resident's supervisor or any other person authorised to do so, to decide on the medical resident's readiness to perform the tiered competency independently and to monitor the medical resident's progress in the learning process.

3.9. **Technical skill of a tiered competency** is a clinical action, procedure, or operation indicated in the description of the residency study programme, the observation and progressive performance of which is essential for the development of a tiered competency.

3.10. **The host coordinator** is the residency coordinator of another residency study programme in which the resident is doing one or more non-speciality cycles;

3.11. **Resident** is a student of the University studying in the residency and doing their professional internship at a residency base. In accordance with the procedure established by the legal acts of the Republic of Lithuania, residents are classified into first, second, third, fourth, fifth, sixth, and seventh-year residents based on their study year;

3.12. **Residency base** is a University hospital or other training base evaluated and selected in accordance with the procedure established by the legal acts of the Republic of Lithuania for the purpose of implementing a residency programme or its cycle(s);

3.13. **Residency coordinator** is an employee of the University who coordinates and organises a specific residency study programme and is responsible for its implementation;

3.14. **Residency study programme** is a totality of study objectives, content, methods and means, academic and professional staff used for the studies as well as the material facilities and a description of the programme of a particular branch of medicine or dentistry. A residency study programme consists of cycles;

3.15. **Residency Study Programme Committee (hereinafter the ‘Committee’)** is the academic governance body of a residency study programme(s) that operates at the University and is responsible for the management of the relevant accredited residency study programme or several accredited residency study programmes of the same study field;

3.16. **Resident’s supervisor** is a University lecturer and a health care specialist working at the residency base and having no less than five years of work experience in the area of professional qualification corresponding to the course unit taught, who supervises the resident and the work of medical doctors working with the resident during the residency cycle. In the case of a cycle consisting only of a theory component, a University lecturer (professor or associate professor) who does not work as a health care specialist at the residency base and whose field of research activity corresponds to the course unit being taught may be appointed as the resident’s supervisor in such a cycle.

3.17. **Resident’s mentor** is a health care specialist appointed by the residency base, who has completed educational competency courses organised in accordance with the procedure laid down by the Minister of Health of the Republic of Lithuania, and who is not an employee of the University but works at the residency base and has no less than five years of work experience in the area of professional qualification corresponding to the area of the residency cycle;

3.18. **Sub-competency** is the totality of a resident’s knowledge, skills, attitudes and behaviour, the ability expected of a resident at a particular stage of their professional activities. It is part of the process of developing tiered competencies.

4. Other terms used in the Regulation shall be understood as defined in the Republic of Lithuania Law on Higher Education and Studies, the Republic of Lithuania Law on Medical Practice of Physicians, the Republic of Lithuania Law on Dental Practice and Oral Care Practice, and other legal acts of the Republic of Lithuania and the University.

## **CHAPTER II ADMISSION TO RESIDENCY STUDIES**

5. Admission to residency studies shall be carried out in accordance with the Rules for Admission to Residency Study Programmes of Vilnius University approved by the Senate of the University.

6. The start date of residency studies at the University is 1 September.

## **CHAPTER III ORGANISATION OF RESIDENCY STUDIES**

7. The organisation and administration activities of residency studies at the University shall be carried out by the Faculty of Medicine of the University (hereinafter the ‘Faculty’).

8. Residency studies shall be carried out in accordance with residency study programmes accredited by the Centre for Quality Assessment in Higher Education and registered in the Register of Studies, Training Programmes and Qualifications. The residency study programme shall consist of a theory component and a professional internship. The duration of the residency studies, the scope of the theory component and practical component and the ratio between the theory component and practical component shall be established by the Government of the Republic of Lithuania (hereinafter the ‘Government’).

9. The study form of the residency studies is full-time studies conducted at the University’s hospitals and residency bases selected by the University.

10. Theory sessions (lectures, seminars) can only be taught by a resident’s supervisor holding a scientific degree whose field of scientific activities corresponds to the course units being taught.

11. A resident may practise medicine/dentistry within the residency study programme only at the residency base and only under the supervision of the resident's supervisor or the resident's mentor, with the exception of a medical/dentistry resident who has been issued a certificate of validation of the relevant tiered competency.

12. The residency, or a part of it, may be carried out in other Lithuanian and foreign universities or their residency or clinical bases. The decision to conduct residency studies at another university or clinical base shall be taken by the residency coordinator after taking into account the possibilities offered to the resident at that university or its clinical or residency base to fully carry out the residency study programme and to develop the tiered competencies provided for in it.

13. Part of the residency professional internship shall be carried out at the residency base in non-university hospitals in accordance with the procedures and scope established by the Government.

14. Residency studies shall be organised in cycles (modules). An individual schedule for the current year's residency studies shall be drawn up for each resident and entered into the residency study administration information system by 1 July of each academic year, except for first-year residents, for whom the deadline is 20 August.

15. The schedule may be amended following a reasoned request by the resident and the approval of the coordinator or due to other unforeseen circumstances.

16. The theoretical knowledge and practical skills acquired by the resident shall be assessed during and after each cycle in accordance with the procedure laid down in the Regulation. Each cycle shall end with a pass/fail examination.

17. After completing the entire residency study programme, the resident shall take the final qualifying residency examination (hereinafter the 'final examination') in accordance with the procedure specified in the description of the relevant residency study programme.

18. The duration of the annual leave for residents shall be 36 calendar days. The duration of the leave shall count towards the duration of the residency programme. The timing of the leave shall be planned based on the curriculum of the theory component of studies. The leave shall be granted in accordance with the procedure laid down by the legal acts of the Republic of Lithuania and the University.

19. The time spent in residency will be counted towards the medical doctor's total length of employment in their specific profession.

#### **CHAPTER IV**

#### **ACADEMIC LEAVE OF ABSENCE, SUSPENSION OF STUDIES. RESUMPTION AND TERMINATION OF RESIDENCY STUDIES**

20. Academic leave of absence shall be granted to a resident who is temporarily unable to continue their studies:

20.1. due to an illness, based on the recommendation of a physician or a medical consultation board – up to two years;

20.2. due to a pregnancy and childbirth leave, paternity leave, and parental leave – for the period provided for by the legal acts of the Republic of Lithuania, but no longer than three years;

20.3. due to personal reasons – for no longer than one year, once during the study period;

20.4. due to initial mandatory military service.

21. The Dean of the Faculty may authorise the suspension of the studies of a resident who is temporarily unable to continue their studies once during the period of their residency studies for no longer than one year.

22. The request for an academic leave of absence or a suspension of studies shall be submitted through the residency study administration information system and coordinated with the residency coordinator. An academic leave of absence or a suspension of studies shall be granted by an order of the Dean of the Faculty.

23. The duration of the residency studies may not be shortened as a result of an academic leave of absence or a suspension of studies, except in cases where the period of the academic leave of absence or the suspension of studies does not exceed three months.

24. An academic leave of absence or a suspension of studies shall be granted/carried out at the University and at the residency base at the same time.

25. In order to resume their residency studies, the resident must submit an application for permission to resume the residency studies agreed upon with the residency coordinator by means of the residency study administration information system, no later than three working days after the end of the academic leave of absence or the suspension of studies. The Dean of the Faculty shall issue an order on the resumption of residency studies after an academic leave of absence or a suspension of studies. In such a case, the resident shall retain the right to study at a State-funded student place in accordance with the procedure laid down by the legal acts of the Republic of Lithuania, provided that they were studying at a State-funded student place prior to the period of the academic leave of absence or the suspension of studies.

26. Studies prior to the academic leave of absence or the suspension of studies, provided that the period of the academic leave of absence and the suspension of studies combined does not exceed five years, shall be counted towards the total duration of the residency studies.

27. In the case of an academic leave of absence and a suspension of studies for more than five years, the decision on the crediting of studies prior to the academic leave of absence and the suspension of studies shall be taken by the relevant residency study programme committee, taking into account changes in the relevant residency study programme during this period.

28. Residency studies at the University shall be terminated in the cases and in accordance with the procedure for the termination of the residency studies agreement concluded between the University and the studying person (resident).

29. After the expiry or termination of the residency study agreement, a person wishing to study in the residency shall re-apply for admission to the residency studies in accordance with the procedure laid down (via a competition).

## **CHAPTER V ACADEMIC MOBILITY**

30. A resident may be allowed to undertake partial studies abroad to complete individual cycles of the residency study programme.

31. Residents may attend development training events (work placements, scientific/practical conferences, courses and other professional development events). Each resident is given no less than five working days per academic year for professional development.

32. A resident's request for partial studies or a trip to a development training event shall be agreed upon with the residency coordinator. The sending of a resident for partial studies or for a development training event shall be approved by an order of the Dean of the Faculty.

33. Partial studies and trips to development training events of residents may be funded in accordance with the procedure laid down by the legal acts of the University and the Council of the Faculty.

## **CHAPTER VI CHANGING THE RESIDENCY STUDY PROGRAMME**

34. The residency study programme may be changed (either by changing the qualification/specialisation to be acquired or without changing the qualification/specialisation to be acquired in the same study field group) in accordance with the procedure established by the Government of the Republic of Lithuania. The Dean of the Faculty shall make the decision on the change of the residency study programme.

## **CHAPTER VII THE PROCEDURE FOR THE ASSESSMENT OF RESIDENCY LEARNING OUTCOMES**

35. The methods, procedure, assessment criteria and requirements applicable to the assessment of a resident's learning outcomes shall be laid down in the Regulation and the descriptions of the residency study programme and cycles. The procedure for assessing a cycle's learning outcomes cannot be changed during the implementation of that cycle.

36. The assessment of a cycle's learning outcomes can be continuous, interim, and final.

37. Continuous assessment of a cycle's learning outcomes shall be carried out by assessing the cycle's learning outcomes during the study process. Interim assessment of the cycle shall be carried out by assessing the cycle's learning outcomes at the end of a particular stage of teaching and learning (upon completion of one of the topics of the cycle, etc.). Learning outcomes shall be demonstrated in clinical work, independent assignments, seminars, etc. Continuous and interim assessment of learning outcomes may be carried out by the resident's supervisor, mentor or residency coordinator (or, in the case of a non-speciality cycle, by the host coordinator). Interim learning outcomes of a cycle may be assessed by giving a grade in a ten-point system or by a pass/fail examination.

38. The final assessment of a cycle's learning outcomes shall be mandatory. It shall be carried out in no later than two weeks after the end of the cycle. The final assessment of the cycle's learning outcomes shall be carried out by the resident's supervisor or the residency coordinator (or, in the case of a non-speciality cycle, by the host coordinator). The final assessment of the cycle's learning outcomes shall be a pass/fail examination.

39. The final assessment of the cycle's learning outcomes may be conducted a) in writing, b) verbally and in writing, c) or verbally, and interim assessments may be conducted verbally. Computer-based assessment shall be considered a written assessment. The verbal part of the assessment of the cycle's learning outcomes conducted in writing and verbally or verbally must be recorded. The record and the assessment tasks completed in writing shall be kept in accordance with the procedure set out by the legal acts of the University. In the case of cumulative assessment of learning outcomes, the cumulative assessment tasks previously completed by the resident must be kept until the final assessment of learning outcomes (provided their nature allows for keeping).

40. The assessment of the learning outcomes of the theory component of the cycle can only be carried out by the resident's supervisor with a scientific degree or by the residency coordinator (or, in the case of a non-speciality cycle, by the host coordinator).

41. If the resident is unable to attend the final assessment of the learning outcomes of the cycle due to illness or another important reason and has a document to prove it, the person referred to in Item 38 of the Regulation shall, in agreement with the resident, set a new time for the assessment no later than two weeks after the resident's return to the residency, and the resident shall be deemed to be attending the assessment for the first time for that cycle.

42. If a resident misses the final assessment of the cycle or the retake of the final assessment without a valid reason, the resident is deemed to have failed the assessment or the retake.

43. If the resident has not taken or passed the assessment in two weeks after the end of the cycle and has not appealed the result of the assessment in accordance with the procedure set out by the legal acts of the University, the first retake shall be held in two weeks from the date of the not taken/passed assessment (in the case of an appeal of the assessment result, this time limit shall be calculated from the end of the appeal procedure). The exact time of the retake shall be agreed upon individually by the resident with the person referred to in Item 38 of the Regulation.

44. In the event of failure to pass the first retake, a second retake shall be organised by an assessment board set up by the Dean within one month of the first retake.

45. In total, the assessment of a cycle can be taken once and retaken twice.

46. Failure to pass the second retake of the same cycle, failure to take or receiving negative assessments for two cycles of the residency programme in the same study year, shall result in the resident's expulsion from the residency programme for academic failures.

47. Accounting of residency studies at the University shall be carried out in the residency study administration information system. The study accounting documents in the residency study administration information system shall be filled in by the resident's supervisor who assesses the resident's learning outcomes, the residency coordinator (in the case of a non-speciality cycle, by the host coordinator). If the resident has been supervised by a mentor during the cycle, at the end of the cycle, the mentor shall make a record in the residency study administration information system of their remarks on the resident's performance of the practical component at the residency base that are necessary for the final assessment of the cycle. The final assessment of the cycle obtained by the resident must be recorded in the residency study administration information system no later than in five working days after the cycle assessment has been carried out.

48. The resident shall have the right to get acquainted with the assessment received for the cycle, the shortcomings, errors and remarks of the assessed task (work), and in case of disagreement with the assessment of the cycle, to apply to the dispute resolution commission of the Faculty in accordance with the procedure set out by the legal acts of the University. Until the dispute resolution commission of the Faculty (or, in the event of an appeal against its decision, the Central Dispute Resolution Commission of the University) has submitted its decision, no decision of the administration of the Faculty in relation to the assessment under consideration shall be taken in respect of the resident, and the implementation of the already-taken decisions in relation to the assessment under consideration shall be suspended.

## **CHAPTER VIII**

### **DEVELOPMENT AND ASSESSMENT OF TIERED COMPETENCIES. CERTIFICATE OF VALIDATION OF A TIERED COMPETENCY**

49. Residents enrolled from 1 September 2023 onwards shall be subject to tiered competency-based residency studies in the fields of medicine and dentistry.

50. Residents enrolled in tiered competency-based residency studies shall undertake to, in addition to the other programme requirements, develop and acquire all of the tiered competencies set out in the programme.

51. The development of the tiered competencies is carried out gradually. The following levels of resident supervision (autonomy) shall be applied in the development of tiered competencies:

51.1. **Level one (1)** – the resident is not allowed to carry out professional activities, only to observe the process;

51.2. **Level two (2)** – the resident is allowed to carry out professional practical activities/practical tasks within the limits of the defined competency under direct and continuous supervision of the resident's supervisor or resident's mentor (the resident's supervisor or resident's mentor working alongside the resident is proactive);

51.3. **Level three (3)** – the resident is allowed to carry out professional practical activities/practical tasks within the limits of the defined competency under indirect supervision of the resident's supervisor or resident's mentor (the resident's supervisor or resident's mentor is not present but is available when needed);

51.4. **Level four** – the resident is allowed to carry out professional practical activities/practical tasks within the limits of the defined competency without supervision of the resident's supervisor or resident's mentor. The fourth level of supervision is divided into intermediate levels:

51.4.1. **Level 4.1.** – the resident is allowed to work almost independently, with only some monitoring (e.g. by discussing important issues with the supervisor the next day). Once all the requirements of Level 4.1. have been fulfilled, the Competency Validation Committee shall decide on the issuance of a certificate of validation of a tiered competency to a resident;

51.4.2. **Level 4.2.** – the resident has already obtained a certificate of validation of the relevant tiered competency and is allowed to carry out professional practice activities within the limits of the defined tiered competency independently, without the supervision of the resident's supervisor or resident's mentor.

52. During the development of the tiered competencies, the resident shall perform the technical skills of the tiered competencies and record the observation/performance of these skills in the residency study administration information system (in the internship log). Once the minimum amount of a technical skill at a lower level of autonomy has been collected, the resident may start collecting instances of the same technical skill at a higher level of autonomy.

53. The descriptions of the tiered competencies, the dynamics of the levels of autonomy and their links to the programme cycles, the technical skills required for the development of the relevant tiered competency and the learning outcomes expected of the resident that correspond to the established tiered competencies shall be specified in the descriptions of the residency study programmes.

54. Monitoring and assessment of the achievement of the tiered competencies shall involve the resident's supervisor, the residency coordinator, and the Competency Validation Committee.

55. At the end of the cycle during which the relevant tiered competencies are developed, the resident's supervisor shall assess the sub-competencies of the resident by completing a qualitative tiered competency assessment questionnaire in the residency study administration information system.

56. Once the resident has completed all the technical skills of level three, the residency coordinator, having reviewed the resident's completed internship log, shall make a decision on whether to allow the resident to perform the technical skills and develop the relevant tiered competency at the autonomy level 4.1. The residency coordinator shall have the right to decide on the crediting of the lower levels of autonomy (1, 2, 3) if the resident has not acquired the minimum technical skills required for these levels of autonomy due to valid reasons.

57. Once the resident has completed all the technical skills of level 4.1 of the tiered competency and has received assessments in all the cycles in which the relevant tiered competency has been developed, the Competency Validation Committee shall decide on issuing the resident with a certificate of validation of the relevant tiered competency. To make the decision, the Competency Validation Committee shall review the internship log completed by the resident and the qualitative tiered competency assessment questionnaires completed by the residents' supervisors.

58. Once the Competency Validation Committee has decided to award a tiered competency, a digital certificate of validation of the tiered competency shall be issued to the resident.

59. If the Competency Validation Committee, having taken into account the qualitative tiered competency assessment questionnaires, decides that the resident does not yet possess the abilities required for the tiered competency and cannot be issued with a certificate of validation of the tiered competency, it shall state the reasons for its decision and give the resident additional tasks (technical skills) and the time limit for their completion. Following the completion of the additional tasks assigned, the Competency Validation Committee shall re-determine whether to issue a certificate of validation of tiered competency to the resident.

## **CHAPTER IX INCENTIVES AND PENALTIES APPLICABLE TO RESIDENTS. THE PROCEDURE FOR EXPELLING A RESIDENT**

60. Residents who have distinguished themselves in the academic, creative, social and/or sports life of the University may, in accordance with the procedures established by the legal acts of the University, be awarded the following incentives by decision of the Dean or the Rector:

60.1. commendation;

60.2. letter of appreciation;

60.3. diploma attesting academic, creative, or sports achievements;



60.4. scholarship;

60.5. reduction of the residency tuition fee;

60.6. other incentives established by the legal acts of the Republic of Lithuania and the University.

61. Residents who violate the Regulation, the Code of Academic Ethics of the University or other legal acts of the University may be reprimanded or expelled from the University.

62. Residents shall be expelled from the University under the procedure established in the Regulation. Reprimands shall be imposed by the Dean or the Rector in accordance with the procedure laid down in the legal acts of the University.

63. In addition to the incentives and penalties set out in Items 60 to 61 of the Regulation, a resident shall be subject to the provisions of the legal acts governing employment relationships and internal procedures at the residency base where they are currently serving as a medical resident.

64. A resident shall be expelled from the University's residency studies:

64.1. for academic failures (failure to complete the study programme) – failure to take or receive a pass for two residency cycles in the same study year without a valid reason, or failure to pass the retake of the assessment of the same cycle twice;

64.2. for failure to pass (or not taking) the final examination;

64.3. for cases of dishonesty during their studies or the assessments of learning outcomes (copying, plagiarism, etc.), or other violation of the Code of Academic Ethics of the University;

64.4. for not complying with the residency study agreement and not fulfilling financial obligations to the University;

64.5. for not starting their residency studies within 15 days of the start of the residency studies without a valid reason;

64.6. for not submitting an application for permission to resume their residency studies in three working days after the expiry of the period of the academic leave of absence or the suspension of studies;

64.7. for more than one reprimand received in one calendar year;

64.8. for a gross violation of the Regulation, the Code of Academic Ethics of the University, other legal acts of the University and/or the internal procedure of the residency base or the legal acts regulating the professional activities of a medical/dentistry doctor.

65. A violation of medical professional ethics shall be considered a violation of the resident's duties, regardless of whether the violation has been recognised as a violation of employment duties at the residency base.

66. A resident who has committed a gross violation of employment duties at the residency base, or who has committed the same violation of their employment duties within the last 12 months, shall be deemed to have committed a gross violation of the resident's duties and of the Regulation.

67. If a resident is expelled from the residency base for violation of the requirements of the Labour Code of the Republic of Lithuania, the legal acts of the Republic of Lithuania regulating the professional activity of a medical/dentistry doctor or the internal procedure of the residency base, they shall also be expelled from the University's residency studies.

68. The decision on the expulsion of a resident from the University shall be taken by the Rector of the University or their authorised person upon proposal from the Dean of the Faculty. The resident shall be informed of this decision in accordance with the procedure laid down in the study agreement.

## **CHAPTER X FINAL EXAMINATION. COMPLETION OF RESIDENCY STUDIES**

69. Taking the final examination of the residency study programme shall be allowed only after the completion of all cycles of the residency study programme, receiving passes for all cycles, the completion of the research paper in accordance with the procedure laid down by the Council, and the fulfilment of the other requirements of the residency study programme and the obligations laid

down in the study agreement. Residents who start their studies from 2023 onwards must additionally acquire all the tiered competencies developed in the programme.

70. The structure, requirements and assessment methods of the final examination shall be specified in the residency study programme.

71. The final examination shall be organised and assessed by the final examination commission (hereinafter the 'examination commission'). The examination commission shall consist of at least five members. The Ministry of Health of the Republic of Lithuania and the Ministry of Education, Science and Sport of the Republic of Lithuania may delegate one member to the commission each. The right of initiative to nominate their representatives in writing shall also be open to the respective societies of specialist medical or dentistry practitioners. The examination commission shall be headed by a chairperson. The composition of the examination commission, the chairperson, and the time of the final examination shall be approved by the Dean of the Faculty.

72. Representatives of the University, the Faculty administration, and the Residents' Council may participate in the final examination in order to maintain order in the final examination and ensure a transparent examination procedure.

73. The final examination shall be conducted verbally and in writing. The verbal part of the examination shall be recorded and the recordings, together with the final examination papers, shall be kept in accordance with the procedure laid down by the legal acts of the University.

74. A resident shall be deemed to have passed the final examination if they obtain a grade of at least 5 in the final examination on a ten-point scale.

75. The resident shall have the right to get acquainted with the result (assessment) of their final examination, as well as the shortcomings, errors, and remarks of the assessed task (work).

76. The decision of the examination commission on the assessment of the final examination shall be final and not subject to appeal. The resident shall have the right to appeal to the dispute resolution commission of the Faculty in accordance with the procedure established by the legal acts of the University regarding procedural violations of the final examination.

77. After passing the final examination, the resident shall be issued with a certificate indicating the awarded professional qualification of a general practitioner, specialist medical doctor or specialist dentistry practitioner. The residency certificate shall be signed by the Rector of the University.

78. A resident shall be considered to have completed their residency studies when they have fulfilled all the requirements of the residency study programme. Completion of the residency studies shall be approved by an order of the Dean.

79. A resident who fails to pass the final examination shall be expelled from the residency, with the right to retake the examination no earlier than after six months. The final examination is allowed to be taken twice in total. Having failed the final examination a second time, no more subsequent retakes shall be allowed.

80. A resident who has not completed the entire residency study programme and is therefore not eligible to take the final examination may, on a proposal from the residency coordinator and by an order of the Dean of the Faculty, be granted the possibility of extending their residency studies for a period of up to one year. After the extension of the residency studies, the Committee shall approve the programme of the extended studies (establish the cycles the resident must complete to be considered as having completed the residency study programme). During the extended period of the residency, the resident shall study at their own expense. For the extended period of residency, the person's status shall be that of a resident (student).

## **CHAPTER XI RESIDENCY FUNDING**

81. The costs of the residency studies shall be funded from the appropriations from the State of the Republic of Lithuania budget allocated to the University and the Ministry of Health in accordance with the procedure established by the legal acts of the Republic of Lithuania.

82. A resident studying in a non-State-funded residency study place shall pay the cost of residency tuition determined by the legal acts of the Republic of Lithuania and the University.

83. The annual tuition fee for residency studies may be paid in one lump sum or in instalments; its payment may be postponed in accordance with the Description of the Procedure for Payment, Reimbursement, and Recovery of Tuition Fees at Vilnius University.

84. The annual residency tuition fee may be reduced in accordance with the Description of the Procedure for Payment, Reimbursement, and Recovery of Tuition Fees at Vilnius University and the Faculty's procedure for the reduction of tuition fees implementing thereof, approved by the Council of the Faculty. The application for a reduction of the residency tuition fee shall be submitted by the resident in the residency study administration information system.

85. In addition to the resident, other natural or legal persons may pay the cost of tuition or part of it for a resident studying in a non-State-funded study place. Such payment does not require a special agreement between the University and the other person paying the cost of tuition.

86. The cost of tuition or part of it, depending on the need for the specialists concerned, may be covered by a health care institution or using the budget funds of the Republic of Lithuania in accordance with the procedure established by the Government.

87. A person who has studied at a State-funded residency student place and who has been expelled from the University or has voluntarily terminated their studies must return to the State budget the funds allocated for the payment of studies at State-funded study places, except for the cases provided for by the legal acts of the Republic of Lithuania. The amount of the funds to be returned, the procedure for the repayment and its administration shall be determined by the Government.

88. A resident studying at a non-State-funded place who has terminated their study agreement shall be reimbursed the portion of the annual tuition fee paid for the remaining study period (after termination of the agreement). The tuition fee or part thereof shall not be reimbursed if the resident is expelled from the University for academic failure or gross violations of the Regulation, the Code of Academic Ethics of the University, or other legal acts of the University. The recovery of fees or parts thereof shall be carried out in accordance with the provisions of the residency study agreement, the legal acts of the University, and the legal acts of the Republic of Lithuania.

89. A resident, irrespective of whether they are studying at a State-funded or a non-State-funded residency study place, shall receive the base salary of a resident doctor, the amount of which shall be determined in accordance with the procedure laid down in the legal acts of the Republic of Lithuania, when performing their professional internship at the residency base.

## **CHAPTER XII RESIDENCY COORDINATOR**

90. The residency coordinator shall be appointed by a decision of the Council for each residency study programme upon proposal from the Dean of the Faculty. The same residency coordinator can be appointed for several (related) residency study programmes.

91. In order to achieve the objectives of the residency study programme, the residency coordinator shall be responsible for:

91.1. organising and coordinating the implementation of the residency study programme at the University and residency bases, as well as addressing current affairs related to the implementation of residency studies;

91.2. establishing the individual resident's schedule and entering it into the residency study administration information system, as well as assigning resident's supervisors for each speciality cycle;

91.3. assigning and coordinating the tasks of the residency programme to the resident;

91.4. assigning a resident to perform a cycle (or part thereof) at a residency base;

91.5. coordinating the acquisition of the resident's tiered competencies, making decisions on the authorisation of the resident to perform technical skills at autonomy level 4.1;

91.6. making decisions on the crediting of the lower levels of autonomy (1, 2, 3) if the resident has not acquired the minimum technical skills required for these levels of autonomy due to valid reasons;

91.7. assigning tasks related to the implementation of the residency study programme to residents' supervisors and mentors and monitoring the implementation thereof;

91.8. approving various applications of residents related to the implementation of residency studies;

91.9. making recommendations and proposals to the Committee:

91.9.1. on crediting the period of residency studies before an academic leave of absence and a suspension of studies if the period of the academic leave of absence and the suspension of studies exceeds five years;

91.9.2. on crediting the learning outcomes of previously studied residency studies, confirming tiered competencies, and shortening the duration of residency studies;

91.9.3. on other current matters related to the implementation of the residency study programme.

### **CHAPTER XIII HOST COORDINATOR**

92. The host coordinator shall coordinate the implementation of non-speciality cycles for residents from a different residency study programme than the one they coordinate.

93. The host coordinator shall be responsible for:

93.1. organising and coordinating the non-speciality cycle of their coordinated residency study programme for residents of other specialities at the University and residency bases;

93.2. appointing a resident's supervisor for the non-speciality cycle of their coordinated residency programme to a resident from a different residency programme than the one they coordinate;

93.3. assigning tasks related to the implementation of the non-speciality cycle to residents' supervisors and mentors and monitoring the implementation thereof;

93.4. establishing a plan for the non-speciality cycle, coordinating the implementation of the plan's tasks, monitoring the assessment of the cycle's learning outcomes, and entering the results into the residency study administration information system.

### **CHAPTER XIV RESIDENT'S SUPERVISOR AND RESIDENT'S MENTOR**

94. The functions of the resident's supervisor and mentor shall be defined in the Description of the Procedure for the Requirements and Monitoring of the Implementation of Medicine Residency and Odontology Residency Study Programmes.

95. In order to achieve the objectives of the residency study programme, the resident's supervisor shall be responsible for:

95.1. supervising a resident during a residency cycle (or part thereof) or several cycles;

95.2. organising sessions that meet the requirements of the description of the intended residency study cycle and providing the resident with theoretical knowledge and practical skills;

95.3. conducting the assessment of a resident's learning outcomes in accordance with the procedure set out in the Regulation;

95.4. assessing the resident in accordance with the procedure for the acquisition of tiered competencies laid down in the residency study programmes;

95.5. informing the residency coordinator about the progress of the residency, the resident's learning outcomes or committed violations, and the implementation of the tasks given by the residency coordinator related to the implementation of the residency programme.

96. If there is no person at the residency base who meets the requirements for a resident's supervisor, a resident's mentor shall be assigned who:

96.1. shall enable the resident to acquire practical skills;

96.2. shall inform the resident's supervisor, residency coordinator about the progress of the residency and the resident's violations of medical ethics (if any);

96.3. shall assess the practical skills acquired by the resident and record the assessment in the residency study administration information system.

97. The resident's supervisor and the resident's mentor shall be responsible for instructing the healthcare resident to carry out tasks or actions independently, except when the resident has been issued with a certificate of validation of tiered competencies.

98. The resident's supervisor and the resident's mentor may supervise a maximum of four residents at a time.

99. The educational competencies of the resident's supervisor and the resident's mentor shall be updated in accordance with the procedure established by the Minister of Health.

100. When the resident is on duty at the residency base, the on-duty medical doctor/dentist shall act as the resident's supervisor or resident's mentor.

## **CHAPTER XV RESIDENCY STUDY PROGRAMME COMMITTEE**

101. The objectives, tasks, and functions of the Committee as well as the organisation of work therein shall be regulated by the Regulations of the Study Programme Committee approved by the Senate of the University.

102. The Committee shall be composed of at least five members, whereas a joint Committee of several programmes – of at least seven members, including:

102.1. at least three lecturers certified by the University for academic positions who are implementing a programme in the residency study field;

102.2. at least one member of the teaching staff holding the position of a professor whose research activities correspond to the study field of the residency study programme;

102.3. the residency study programme coordinator, or, in the case of a joint Committee, the coordinators of at least two residency programmes;

102.4. at least one representative of the social partners (stakeholders, such as current or prospective employers, healthcare institutions or societies of the specialities concerned);

102.5. one representative of the residents. In the case of a joint Committee, two residents from different residency programmes for two residency programmes, three residents from different residency programmes for three to five residency programmes, and four residents from different residency programmes for six or more residency programmes.

103. In addition to the functions set out in the Regulations of the Study Programme Committee of the University, the Committee shall also be responsible for:

103.1. self-assessment of the residency programme when preparing its summary for the purposes of both internal and external evaluation and accreditation of the residency study field, as well as the presentation and discussion of the results of the self-assessment with the academic staff implementing the residency programme, residents, and representatives of the stakeholders;

103.2. assessing the compliance of institutions with the requirements for residency bases, submitting recommendations on residency bases and the cycles to be carried out therein to the residency base assessment and selection commission of the University;

103.3. making decisions on crediting the learning outcomes of previously studied residency studies and submitting recommendations to the Dean on shortening the duration of residency studies;

103.4. submitting recommendations to the Competency Validation Committee on the awarding of tiered competencies to the resident, taking into account the content of the previously studied residency programme and/or the previously acquired tiered competencies;

103.5. performing other functions related to the implementation of the residency study programmes in a quality manner as set out by the legal acts of the University and the related tasks given by the Dean and the Vice-Dean of Postgraduate Studies of the Faculty.

104. The Committee's activities shall take the form of meetings convened as required, but no less than once a year.

## **CHAPTER XVI COMPETENCY VALIDATION COMMITTEE**

105. The Competency Validation Committee shall be established by a decision of the Council for each residency study programme upon proposal from the Dean of the Faculty.

106. The Competency Validation Committee shall be composed of at least three members, one of whom shall be the residency coordinator.

107. The Competency Validation Committee shall be responsible for:

107.1. assessing the learning outcomes of the tiered competencies of the residency study programme and making decisions on issuing residents with the certificates of validation of tiered competencies;

107.2. assigning additional tasks to the resident when it is decided that the resident is not yet eligible for a certificate of validation of a tiered competency;

107.3. reassessment of the resident's learning outcomes after they complete the additional tasks assigned to them.

108. The Competency Validation Committee shall assess the resident's tiered competencies in the residency study administration information system. Upon a system notification that a resident has met all the requirements for the tiered competency, each member of the Competency Validation Committee shall decide whether to approve the issuance of a certificate of validation of the tiered competency to the resident.

109. After taking into account the assessments of all the members of the Competency Validation Committee, the final decision on the issuance of a certificate of validation of a tiered competency shall be taken by the chairperson of the Competency Validation Committee, who shall draw up the minutes of the Competency Validation Committee meeting and initiate the issuance of the digital certificate of validation of a tiered competency.

## **CHAPTER XVII RESIDENCY STUDIES AND THE POSTGRADUATE STUDIES DIVISION OF THE FACULTY OF MEDICINE**

110. In the implementation of residency studies at the University, the Postgraduate Studies Division shall be responsible for:

110.1. drafting, improving and submitting for approval the Regulation and other legal acts of the University regulating the residency studies in accordance with the procedure established by the University;

110.2. organising and administering admissions to residency studies at the University, drafting, improving, coordinating and publicising documents regulating admissions;

110.3. organising, coordinating and administering the residency study process at the University:

110.3.1. drafting orders of the Dean of the Faculty on issues related to the organisation and implementation of residency studies;

110.3.2. administering the residency study administration information system;

110.3.3. preparing various certificates for residents;

110.3.4. coordinating and administering the residency base assessment and selection processes;

110.3.5. publicising and providing information and statistical data on the implementation of residency studies at the University to institutions and natural and legal persons;

110.3.6. storing documents related to the organisation of residency studies in accordance with the procedure established by the legal acts of the Republic of Lithuania and the University;

110.4. assessing and optimising the quality of residency studies:

110.4.1. coordinating and administering the processes of drafting, updating, coordinating and approving residency study programmes;

110.4.2. collecting and submitting to the Committee the data needed to assess the quality and effectiveness of the implementation of the residency study programmes;

110.4.3. introducing, implementing, and analysing feedback between participants in the residency study processes;

110.4.4. organising and administering the internal and external evaluation of residency study programmes (fields) implemented at the University;

110.5. organising and administering processes related to the completion of residency studies, managing residency completion documents, and issuing certificates;

110.6. performing other functions related to the administration and organisation of residency studies.

## **CHAPTER XVIII RESIDENCY BASE**

111. The cycles of a residency study programme shall be carried out in the residency bases that meet the requirements for carrying out the residency programme or cycle(s) as laid down in the legal acts of the Republic of Lithuania and the University.

112. The assessment and selection of institutions seeking to become the University's residency bases shall be carried out following the procedure set out in the legal acts of the Republic of Lithuania and the University by the residency base assessment and selection commission established by an order of the Dean of the Faculty.

113. Contracts with the selected residency bases shall be concluded in accordance with the procedure laid down by the legal acts.

114. The resident, in agreement with the residency coordinator, may choose a residency base for the implementation of the cycle from a list of residency bases selected by the University, unless only one specific residency base is provided for a particular cycle.

115. The head of the residency base shall conclude a fixed-term employment contract with the resident in accordance with the procedure established by the legal acts of the Republic of Lithuania and the University, appointing them to the position of a medical/dentistry resident. The rights and obligations of the resident and the residency base during the implementation of the residency programme or cycle at the residency base shall be defined by the concluded fixed-term employment contract, the model job description for the position of a medical resident and the rules of internal procedure of the residency base.

116. The residency base must ensure that the theory component and the practical component of the residency study programme are taught. If the facilities for theory sessions are not available at the residency base, the resident must be enabled to attend theory sessions at the University or remotely. The residency coordinator shall decide on the place of training for the theory component of the studies.

117. If the head of the residency base makes a decision to expel a resident from the residency base for violating the internal procedure of the residency base, the requirements of the Labour Code of the Republic of Lithuania and/or the legal acts regulating the professional activity of a medical/dentistry doctor, a copy of the decision shall be sent to the University.

118. The residency base must provide the resident with all the necessary work equipment to carry out their work tasks, as well as to fulfil the employer's obligations under the Labour Code of the Republic of Lithuania and other legal acts.

**CHAPTER XIX  
RESIDENT'S PROFESSIONAL INTERNSHIP AT THE RESIDENCY BASE**

119. The resident shall be employed as a medical/dental resident for the purpose of professional internship at the residency base.

120. The fixed-term employment contract between the resident and the residency base for the employment of the resident as a medical/dental resident at the residency base shall specify the full working time of the resident's professional internship.

121. The resident shall be subject to a working week of no more than 38 hours. The resident shall work under a work schedule proportionate to their workload, with a maximum accounting period of three months using annualised hours.

122. A resident shall be on duty if, during the current cycle of the residency programme, healthcare services are provided 24 hours a day at the structural unit (centre, division) of the residency base, but no more than 0.3 full-time position per accounting period. The following shall be considered on-call time at the residency base:

122.1. 17:00–07:00 or 18:00–08:00 on weekdays, depending on the working arrangements at the structural unit (centre, division) of the residency base;

122.2. 07:00–07:00 or 08:00–08:00 on weekends and public holidays, depending on the working arrangements at the structural unit (centre, division) of the residency base.

123. The minimum duration of a normal working day (during time other than on-call) shall be six hours.

124. The full-time workload of a resident undertaking a professional internship at emergency departments as part of a residency study programme shall not be subdivided in accordance with the provisions of Item 122.

125. The resident's standard working time at the residency base, including on-call time, shall be reduced in proportion to the duration of the resident's absence due to leave or other legitimate reasons for absence. Leave shall be granted in accordance with the procedure laid down in the description of the procedure for granting leave to the staff of the residency base, in proportion to the time worked.

126. The resident's standard working time shall be reduced in proportion to the duration of the resident's absence due to leave or other legitimate reasons for absence.

127. Residents shall be paid for overtime work in accordance with the procedure laid down in the Labour Code of the Republic of Lithuania and the legal acts implementing it.

128. Medical/dental residents shall not be assigned to passive on-call duty and passive on-call duty at home. For pregnant women and those actually raising a child under three years of age, night duty shall be changed, at their request, to daytime professional internship. The occupational safety and health requirements for pregnant residents and residents who have recently given birth are defined in the Republic of Lithuania Law on Safety and Health at Work.

129. During the period of professional internship at the residency base, the resident shall be covered by the guarantees provided for in the Labour Code of the Republic of Lithuania and other legal acts. The residency base must ensure proper implementation of these legal acts and provide appropriate conditions for the implementation of the residency study programme.

**CHAPTER XX  
RIGHTS AND OBLIGATIONS OF A RESIDENT**

130. As a student of the University, a resident shall have the following rights:



130.1. to receive education under the study programme specified in the study agreement, which meets the standards of scope and quality defined by the legal acts of the Republic of Lithuania and of the University;

130.2. to use the methodological and scientific literature as well as material and information resources needed for the implementation of the study programme that is available at the University as well as the University premises, libraries, scientific equipment, and cultural, sports, and recreational facilities intended for studies, cultural life, health care and recreational activities;

130.3. to participate in academic exchanges, take an academic leave of absence, suspend their studies, resume and terminate their studies, change the study programme and study schedule in accordance with the Regulation and other legal acts of the University and of the Republic of Lithuania;

130.4. to account for study works using flexible forms of assessment of the learning outcomes in accordance with the legal acts of the University (if they have a disability or a temporary health impairment preventing them from accounting under the usual procedure);

130.5. to exercise the freedom of academic thought and speech to freely express their academic ideas and attitudes towards all scientific, societal, and cultural issues to the extent compatible with the legal acts of the Republic of Lithuania and of the University;

130.6. to receive information related to their studies, rate study programmes, the study process, and the teaching staff's work under the procedure established by the legal acts of the University;

130.7. to appeal the final assessments of the learning outcomes (except for assessments of the final examinations) and the decisions of the University employees to respective dispute resolution commissions under the procedure established by the Regulation and other legal acts of the University;

130.8. to join the Students' Representation and form other student organisations, be elected to their governing bodies, as well as take part in the activities of other societal, cultural, and political organisations the objectives of which are compatible with the legal acts of the Republic of Lithuania and the Statute of the University;

130.9. to participate in the governance of the University and the self-governance of the Faculty in accordance with the procedure established by the legal acts of the University;

130.10. to take the final residency examination after completing the residency study programme, and receive a certificate of completion of the residency upon passing it;

130.11. to exercise other rights established by the legal acts of the Republic of Lithuania and of the University.

131. As a student of the University, the Resident shall have the following obligations:

131.1. to fulfil the requirements of the residency study agreement and the residency study programme;

131.2. to take the final examination;

131.3. to comply with the provisions of the Regulation, the internal rules of procedure of the residency base, the legal acts of the University and of the Republic of Lithuania;

131.4. to carry out the decisions adopted by the University in accordance with the legal acts;

131.5. to comply with the Code of Academic Ethics;

131.6. to fulfil other obligations established in the legal acts of the Republic of Lithuania and of the University.

132. The rights, obligations, and responsibilities of a resident as a medical doctor/dentist are defined by the Republic of Lithuania Law on Medical Practice of Physicians (the Republic of Lithuania Law on the Dental Care and Oral Care Practice for dentistry residents), the Model Job Description for the Position of a Medical Resident, the Description of the Procedure for the Requirements and Monitoring of the Implementation of Medicine Residency and Odontology Residency Study Programmes, and other legal acts of the Republic of Lithuania.

**CHAPTER XXI**  
**MANAGEMENT AND SUPERVISION OF RESIDENCY STUDY PROGRAMMES**

133. The management and supervision of residency study programmes shall include monitoring the implementation of residency studies, internal quality assurance, external evaluation and accreditation of study programmes, and continuous improvement of studies.

134. Internal evaluation and assurance of the quality of residency studies shall be carried out in accordance with the procedure established by the University. The Committee and the Postgraduate Studies Division shall be responsible for the quality assurance and continuous improvement of the residency study programme.

135. The external evaluation and accreditation of ongoing and planned residency study programmes shall be carried out in accordance with the procedure established by the legal acts of the Republic of Lithuania.

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