

**HEAD OFFICE**

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Statement on the  
Continuing Development  
of the **University Medicine  
Oldenburg**

including the

**European Medical School  
Oldenburg-Groningen  
(EMS)**



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# Preliminary Note

In November 2010, the Wissenschaftsrat (WR, German Council of Science and Humanities) had already issued a position statement on establishing the University Medicine Oldenburg based on the concept of a “European Medical School Oldenburg-Groningen”. At the beginning of the winter semester 2012/13, the model degree programme in medicine commenced at the University of Oldenburg.

The *Niedersächsisches Hochschulgesetz* (Lower Saxonian Higher Education Act) provides that all research and teaching activities at the University of Oldenburg Medical Faculty shall be evaluated by the WR up to the 1<sup>st</sup> of October 2019. The federal state government of Lower Saxony is supposed to submit the result of this evaluation to the Lower Saxony federal state parliament until the 30<sup>th</sup> of June 2020, accompanied by a statement on the continuing development of the University Medicine Oldenburg, with regard to the teaching capacity.

On January 2018, at the request of the federal state, the WR added the evaluation of EMS Oldenburg-Groningen to its agenda. The WR Medical Committee tasked a working group with the preparation of an evaluation report. This group visited both the Oldenburg and Groningen sites and – based on written self-evaluation reports of the Faculty of Medicine and Health Sciences and the federal state as well as on the consultations during their on-site visits – the group drafted the evaluation report on the continuing development of the University Medicine Oldenburg with regard to the EMS Oldenburg-Groningen. It was then adopted by circulation procedure. The WR would like to express a special thanks to the non-WR-member experts who contributed to the work of the evaluation group.

When the working group adopts the evaluation report, it can then no longer be modified during the course of these proceedings. On the 2<sup>nd</sup> of May 2019, the Medical Committee elaborated a statement based on this evaluation report. The WR discussed and adopted this statement in its July 10<sup>th</sup> to 12<sup>th</sup> 2019 meetings in Gießen.

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# A. Parameters

The University Medicine Oldenburg represents the third university medical site in Lower Saxony, next to Hannover Medical School and Göttingen University Medical Centre. In 2012, to this end, the Faculty of Medicine and Health Sciences was founded at the University of Oldenburg. To fulfil its mission in research and teaching, the faculty works closely with four legally autonomous hospitals in Oldenburg: Klinikum Oldenburg, Evangelisches Krankenhaus Oldenburg, Pius-Hospital Oldenburg and Karl-Jaspers-Klinik. This cooperation is regulated by a framework agreement between university, federal state and hospitals as well as by bilateral contracts. Special features of the founding concept of the University Medicine Oldenburg include the close teaching cooperation with Rijksuniversiteit Groningen, at 130 km from Oldenburg. In the framework of the jointly operated European Medical School Oldenburg-Groningen (EMS), both universities offer cross-border medical education. Since the winter semester 2012/13, 40 students per academic year begin their studies in the model degree programme in medicine. A one-year study period of Oldenburg students in Groningen is an obligatory part of their studies. In exchange, in their fifth year of studies, up to 40 students from Groningen can participate in four ten-week clinical rotations in Oldenburg hospitals. The federal state of Lower Saxony plans to gradually increase this number from 40 to 200 students of medicine in Oldenburg until the year 2024. In an amendment to the *Niedersächsisches Hochschulgesetz* (Lower Saxonian Higher Education Act), the yearly admission quota from the winter semester 2019/20 forward has already been raised to 80 students. |<sup>1</sup> Groningen University has pledged to commit to this growth up to 80 student places and to create the appropriate framework conditions for it.

In total, the University Medicine Oldenburg has around 1,526 full-time equivalents (Vollzeitäquivalente, VZÄ) at its disposal (including third-party personnel). On site, in the year 2017, 43 professors were employed, among them 14 on a part-time basis, with 25 % in employment at the cooperating hospitals. 20 professorships remained vacant by the final reporting date. Scientific personnel totals around 589 VZÄ, among them around 402 VZÄ in medical personnel. In the

|<sup>1</sup> NHG Section 72 Paragraph 11, version dated 18.12.2018, effective from 01.01.2019.

course of expanding the number of available study places, an increase by an additional 43 professorships is planned as well.

At the Faculty of Medicine and Health Sciences, two main research areas determine the faculty's scientific profile: Sensory Neuroscience and Hearing Research as well as Healthcare Research. Moreover, four potential areas of research expansion are being identified with the objective of linking the expertise from the main research areas with aspects of clinical research.

In addition to the on-site model medical degree programme, a physics, engineering and medicine bachelor's- and master's programme as well as neurocognitive psychology and neuroscience master's programmes are also offered. As of the 31<sup>st</sup> of December 2017, a total of 240 students were enrolled in the model medical degree programme and 244 students in the other degree programmes offered at the Faculty of Medicine and Health Sciences.

In 2017, the *Landeszuführungsbetrag* (amount allocated by the federal state) for ongoing purposes amounted to around EUR 21 million. It is composed of budgetary resources additionally provided by the federal state of Lower Saxony for the development of EMS Oldenburg-Groningen (EUR 17.2 million) as well as of funds out of the university's global budget (EUR 3.8 million) for professorships relocated from other university faculties to the Faculty of Medicine and Health Sciences. During the survey period of 2015-2017, the site disposed of an average annual third-party funding volume of EUR 12.2 million.

The cooperating hospitals are integrated in the Lower Saxonian hospital plan as *Plankrankenhäuser* (plan hospitals). In total, they dispose of 2,030 plan beds and 142 day-patient places.

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## B. Statement and Recommendations

The main distinguishing feature of the University Medicine Oldenburg is the cooperation with the *Rijksuniversiteit Groningen* respectively the *Universitair Medisch Centrum Groningen* (UMCG). Based on mutual cross-border student education within the framework of the EMS Oldenburg-Groningen, further development also aims at intensifying the cooperation in research, early career support, continuing education and healthcare. To this end, as an example, the binational graduate research training group *Translational Research: From Pathological Mechanisms to Therapy* was founded in 2017 to promote translational research. The WR sees the proposed expansion of this European cooperation as quite positive. The proposed expansion of the comparative healthcare systems research in close coordination with the newly founded Aletta Jacobs School of Public Health in Groningen appears especially promising. Furthermore, research offers a multitude of possibilities to link and connect which are not yet sufficiently made use of. A profiling feature of the University Medicine Oldenburg is the strong research activity in the area of Neurosensory Science and Hearing Research with continuously proven excellence. The model medical degree programme also ranks among the crucial founding features of the University Medicine Oldenburg. It has been implemented successfully through consistent vertical integration and the integration of modern teaching/learning methods. As a whole, the WR welcomes the fact that the University Medicine Oldenburg could continue to reinforce the strengths of its founding concept during its trial stage and further develop it into an attractive, site-specific profile. The researchers of the five departments of the Faculty of Medicine and Health Sciences deserve acknowledgement for their dedication and their willingness to integrate.

However, the WR notes with concern that crucial points in the first statement, which referred to the foundation of a university hospital as well as to personnel development in the clinical institutions, could so far not be addressed. In particular, neither a viable solution for a university hospital respectively a cooperative model with different hospital partners nor a sustainable governance have yet been developed. Personnel development in the clinical institutions is still quite rudimentary. There continue to be considerable vacancies and the conversion of

administrative professorships<sup>| 2</sup> into regular part-time professorships still raises questions concerning scientific quality assurance. The WR strongly insists that the administrative professorships be converted through open tendering procedure as promptly as possible.

The motivation of the federal state for the expansion of study places is understandable, but at this time there is a lack of concept for the structural, organisational and financial management of this expansion. This concerns mainly the student exchange between Oldenburg and Groningen.

In the face of these challenges, the WR sees a chance for further development and the assurance of future viability for the university medical site if the central critical points are addressed immediately. The strategic goal in the further development of the site should be to strengthen the cooperation with Groningen University and the UMCG not only in teaching, but also in research and medical care and to expand it more consistently than has been done so far. To assure a sustainably successful cooperation, the University Medicine Oldenburg should be developed into an equal partner and thus be elevated to a new level in the cooperation with Groningen University. This requires particular efforts and a strong commitment of the federal state to the Oldenburg site, to create the required framework conditions. Among these are, on the one hand, expansion of the information technology infrastructure and digitalisation. On the other hand, fundamental prerequisites for university-level research and medical care in the shape of appropriate governance structures, personnel resources and financing have to be created. This in particular leads to the following recommendations.

## **B.1 ON STRUCTURE AND GOVERNANCE**

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The governance of the University Medicine Oldenburg is characterised by the cooperation of the faculty with four different, legally independent responsible institutions of Oldenburg hospitals and the Karl-Jaspers-Klinik in Bad Zwischenahn as well as the UMCG. The WR considers the chosen construction – a framework agreement between federal state, University of Oldenburg and hospitals as well as bilateral contracts between the University of Oldenburg and the individual hospitals – not sustainable. The pertinent regulations are too non-committal and the required election procedures are too complex to establish a governance, which will allow for a strategic guidance of the University Medicine Oldenburg as a whole. Furthermore, the WR sees the risk, that the development and implementation of joint strategies with regard to the planned expansion may quickly encounter limitations with several cooperation partners of

<sup>| 2</sup> In accordance with Section 27 Paragraph 7 Clause 1, the presidential chair, without going through an appointment procedure, can appoint an appropriately qualified individual to administrate a professorship on a transitional basis in a sui generis public-law employment relationship.



different responsible institutions and that the division into several smaller units may result too expensive and disadvantageous with regard to organisation. To be able to develop high-level medical care that meet the demands of teaching and research both in an inpatient and outpatient setting, the WR sees the federal state's commitment to closely support the further development of the University Medicine Oldenburg as necessary.

The WR reiterates the recommendation to consider a model for further development of a cooperation with external hospital partners that is geared towards the structures of the Regensburg University department of medicine. |<sup>3</sup> This would encompass building one of the cooperation partners up to a university hospital, flanked by select services from the other hospitals. Transferring the respective hospital partner into state responsibility would be desirable but is not a necessity. |<sup>4</sup> Regardless of the future chosen model, the hospital partners are expected to commit adequate resources which are to be considered in an adequate and realistic cost calculation and should fulfil the following criteria in particular:

- \_ Personnel Resources: sufficient and adequate scientific and clinical personnel; a policy for professorship offers and appointments geared toward research and teaching; the principle of open tendering for all appointment procedures; providing more capacities for academic responsibilities by relieving head physicians in teaching and research from their duties in patient care through the provision of additional personnel; implementation of a professional teaching management with clear responsibilities at the respective hospitals.
- \_ Spatial Resources: adequate construction and technical provisions, supplying research and teaching surfaces, coordinating a building concept with the faculty.
- \_ Infrastructural Resources: Providing and developing informational infrastructures for the development of data-supported medicine (in particular development of medical data integration centres) as well as an active role in the digitalisation of patient care and research, e. g. as network partners in the BMBF-*Initiative Medizininformatik* (Federal Ministry for Education and Research-Initiative for Medical Informatics); building university outpatient departments.
  1. The special importance of research and teaching must as well be reflected in the respective governance structures, contracts, rules and regulations. Since cooperating with non-university hospitals (public, non-profit and

|<sup>3</sup> See WR: Stellungnahme zur Gründung einer Universitätsmedizin an der Carl von Ossietzky Universität Oldenburg nach dem Konzept einer „European Medical School Oldenburg-Groningen“ (Drs. 10345-10), Lübeck November 2010.

|<sup>4</sup> An organisational structure with a university hospital under communal responsibility is in existence at the Mannheim university medical site (see WR: Stellungnahme zur weiteren Entwicklung der Medizinischen Einrichtungen der Ruprecht-Karls-Universität Heidelberg in Mannheim, Drs. 3660-14, Berlin 2014).

private responsible institutions) has become more and more relevant to university medicine in light of financial framework conditions, the WR has in the past repeatedly issued general and case-related statements regarding the collaborative efforts with cooperating hospitals. Hereinafter, the WR reinforces the recommendations: |<sup>5</sup>

- \_ The coordination and decision-making processes between faculty and cooperating hospitals shall be transparent and comprehensive in design. This includes determining regulations for conduct, consensus and cases of conflict.
- \_ In bilateral contracts, the services to be provided by the cooperating hospitals in research, teaching and translation as well as the necessary resources shall be determined in a sufficiently concrete manner. Moreover, sanctions for violations of contract as well as the option of terminating the cooperation due to poor services rendered shall be defined.
- \_ The interests of research and teaching shall be assured institutionally within the institutions and bodies of the university hospital. This means that research has to be re-recognised unequivocally as a declared corporate objective in the statutes of the cooperating hospitals. According to the decision of the German Federal Constitutional Court on the Hannover Medical School from the 24<sup>th</sup> of June 2014, universities and university medical institutions have to work toward ensuring academic freedom, i. e. the faculty and its bodies have to either be involved directly and adequately with the cooperating hospital governing bodies' major decisions regarding research and teaching, or the faculty and its bodies will be involved indirectly in corporate decision-making through their participation in electing and dismissing said governing bodies.
- \_ The role of the dean is of crucial relevance for an adequate consideration of the academic duties of the cooperating hospitals. The dean should be involved in the management of the cooperating hospitals, whereby the voting and decision-making processes should be designed to enable the dean to carry through matters of interest in research and teaching. Furthermore, the composition of supervisory or administrative boards should be such that expertise in medicine and science is represented there. Therefore, it is essential to appoint federal state representatives as well as persons with economic and scientific expertise to the supervisory boards.
- \_ In a joint structural and development plan, the faculty and the cooperating hospitals shall elaborate a common development perspective and define key topics in patient care, research and teaching.

|<sup>5</sup> See WR: Allgemeine Empfehlungen zur Universitätsmedizin, 2007, pp. 67-76; WR: Perspektiven der Universitätsmedizin, 2016, p. 66; WR: Eckpunkte zur nichtstaatlichen Mediziner Ausbildung in Deutschland, Positionspapier, 2016, p. 21; WR: Stellungnahme zur weiteren Entwicklung der medizinischen Einrichtungen der Ruprecht-Karls-Universität Heidelberg in Mannheim, Berlin 2014; WR: Stellungnahme zur weiteren Entwicklung der medizinischen Einrichtungen der Ruprecht-Karls-Universität Heidelberg in Mannheim, Köln 2003.

- \_ A common and totally transparent economic plan is as mandatory as the joint development plan of faculty and cooperating hospitals, as soon and as long as research and teaching are affected. Separate costing as well as aspects relating to value added tax in the exchange of services must be considered.
- \_ It is absolutely mandatory to have an independent scientific advisory body with external and at least partly international members accompany the clinical and scientific profiling and contributes in an advisory capacity to the strategic development of mid- and long-term objectives.

## **B.II ON PERSONNEL**

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The WR sees the appointment of adequate personnel as one of the greatest challenges for a successful and sustainable growth of university medicine in Oldenburg. The WR recognises the markedly increased appointment activities in the recent past which show the necessary prioritisation and therefore point to the right direction. However, these appointment activities are not yet sufficient and the personnel resources at the end of the trial phase remain insufficient quantitatively as well as qualitatively. Especially with regard to the planned expansion of the University Medicine Oldenburg, the WR sees the urgent need for improvement and development of personnel recruitment and resources, in particular the following:

- \_ The procedure practiced according to § 72 (10) NHG for the conversion of so called “*Verwaltungsprofessuren*” (administrative professorships) into part-time professorships does specify obtaining two external assessments but does not provide for an open tendering procedure. In the future, all appointment procedures must be carried out following the principle of open tender.
- \_ In light of the high level of part-time professorships and consequently also the high level of adjunct lecturers in clinical teaching, the future proportion of teaching carried out under professorial responsibility must be increased significantly.
- \_ Adequate equipment is mandatory to increase the attractiveness of professorships. This is particularly true for the Department of Human Medicine that still features substantial vacancies and that at the same time has to cope with the highest increase of professorships. Additionally, performance-focussed funding for research and teaching should be implemented as an additional incentive for the entire faculty.
- \_ The development of a joint structural and development plan for the Faculty of Medicine and Health Sciences is mandatory to be able to properly target appointments.

- \_ A strategic appointment policy is necessary to build adequate research structures and to avoid multiple appointments to clinical professorships with redundant orientations. In individual cases, an assessment should be made to see whether complementary orientations for professorships in the same subject area could make sense in that particular instance.
- \_ Medical researchers and teachers should not be placed at a disadvantage regarding tariffs compared to the clinicians working in patient care. In order to make scientific work attractive and to integrate clinicians, it is imperative to change the present dual-contract model and to consistently apply the TA-Clinicians (tariff agreement for clinicians) or at least compensate for the differences in tariff through extra pay.

### **B.III ON RESEARCH, TRANSLATION AND TRANSFER**

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The WR expressively acknowledges the excellent performance of the research focus Sensory Neuroscience and Hearing Research. The outstanding facilities as well as the great open and dynamic approach to unusual cooperations should be made use of to extend the cooperations with clinicians through new targeted appointments.

The still young Healthcare Research does not, in contrast to Neurosensory Science and Hearing Research, fulfil the WR criteria for a main research area. Yet, the WR considers focusing on healthcare research strategically sound and capable of growth, especially since this field with its translational orientation integrates well into the faculty profile. Digital interconnectivity and a coordinated IT concept are vital requirements for the use of health service data in patient care and research (see B.IV).

The four Areas of Potential (Mobile Health (mHealth) and Participative Medicine; Pathophysiology of Cellular Differentiation and Cellular Communication in Rare Diseases; Immunology of Chronic Illnesses; Oncology – Innovative Diagnostics and Therapy) are still in an early phase of expansion. The WR recommends that the University Medicine Oldenburg initially limit itself to the two main research areas up until the consolidation of the site. The question which of the areas of potential should be further pursued and expanded in the future, should be answered through an evaluation carried out by a yet to be formed scientific advisory body with external experts. However, the WR points out that the Oncology Area of Potential will very likely not be able to compete with other main research areas in Germany.

The foremost objective should be the creation of framework conditions for research funding in the cooperating hospitals and to more strongly support young researchers. In particular, it is vital to determine how the already established

internal funding programme Clinician/Medical Scientist may be put to better use.

The Department of Psychology generates a convincing research performance and moreover has integrated into the new Faculty of Medicine and Health Services superbly. On the other hand, in the Department of Human Medicine, substantial weaknesses must still be noted in research. In particular, the limited availability of research infrastructure and the delayed filling of professorships have a marked negative impact here.

The WR sees great potential for development in the cooperation with Groningen University. Good key components are Hearing Research and Healthcare Research. The WR urgently recommends future further strategic expansion of cross-border cooperation and to anchor the research component more firmly within the cooperation with Groningen.

With the two main research areas Sensory Neuroscience and Hearing Research as well as Health Sciences Research the Faculty of Medicine and Health Sciences holds a strong focus on translation and transfer. The WR welcomes and supports the building and expansion of research and translational structures as one of the central strategies for further development of the Faculty of Medicine and Health Science. In particular, Hearing Research with its various affiliated institutes has a high innovative potential that should also have a positive regional impact.

#### **B.IV ON DEGREE PROGRAMMES AND TEACHING**

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With the model medical degree programme, the EMS Oldenburg-Groningen has established an impressive range of academic studies that already takes many aspects of the Masterplan for Medical Studies 2020 into account: in addition to vertical integration and integration of modern teaching/learning methods, the Longitudinal Research Curriculum deserves a special mention. It promotes the scientific education of students and contributes to connecting practice and theory. Among the special features of the Oldenburg curriculum is the early and comprehensive involvement of private teaching clinics. In addition, the WR sees high potential for medical education in the connection with the natural sciences, which could become another location-specific advantage of the University Medicine Oldenburg.

For continued success of the (Oldenburg) model medical degree programme, the degree of improvement to framework conditions for a qualified medical education and the preservation of the special features of EMS Oldenburg-Groningen's study programmes even after a substantial growth of student numbers, will be paramount. In addition to the spatial, infrastructural and professorial expansion of the University Medicine Oldenburg, expanding the cooperation with

Groningen University holds particular relevance. The integration of increasing numbers of students in the Groningen curriculum in the scope of the obligatory student exchange represents a major challenge and a concept for its resolution is not discernible yet. At this time, the further development of the University Medicine Oldenburg is unpredictable with an expansion surpassing the 80 study places already designated for the winter semester 2019/20. Depending on whether and in which way a new academic cooperation partner will have to be found for further expansion, this could have far-reaching consequences for the profile of the University Medicine Oldenburg and the status of the cooperation with Groningen University. The WR sees as absolutely necessary that, before increasing the number of study places further, the federal state in conjunction with the University of Oldenburg develop a sustainable concept that will, if necessary, consider involving an additional partner.

The WR also sees the need for improvement with regard to the coordination of academic degrees and the curricular design. In line with cross-border education, the WR would consider it necessary to conduct an in-depth analysis of the current coordination problems and to use all available means to remedy the situation. The aim should be to create more equitable cooperative relationships, to further expand the obligatory student exchange as well as to strengthen the students' identification with the border region. This could then possibly lead to an increase in student motivation to choose this region for their future medical practice.

#### **B.V ON MEDICAL CARE**

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The WR acknowledges the important role that the following hospitals, Klinikum Oldenburg, Evangelisches Krankenhaus Oldenburg, and Pius-Hospital, take on inpatient care for the Weser-Ems-Region. At the same time, the WR states that these institutions are not comparable to most university hospitals in Germany with regard to the gravity of in-patient cases treated, that they do not dispose of academic structures and that the university site lacks an organising principle for focus formation. The WR insists on advancing high-level patient care, that will respond to the issues in teaching and research in in- and outpatient settings. The following measures are deemed necessary:

- \_ Create adequate governance and personnel structures (see B.I);
- \_ Establish structures for research-based patient care such as the formation of university healthcare focus areas in coordination with university medical sites in Hannover and Göttingen;
- \_ Expand teaching- and educational spaces as well as research spaces at the hospitals and for patient-oriented research;

\_ Establish university outpatient departments and coordination centres for clinical studies.

## **B.VI ON INFRASTRUCTURE**

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### *Information Infrastructures*

With regard to digitalisation and information-technological infrastructure for research, teaching, and patient care as well as the management of research data, grave deficits must be noted. They encompass a lack of basic IT prerequisites such as Wi-Fi and electronic medical records as well as the lack of digitalisation concepts and superordinate structures of data integration. In light of the growing relevance of databased interlinking of research and care in University Medicine, the WR strongly urges the faculty and cooperating hospitals to create suitable technical, financial and legal framework conditions to be able to link data from patient care and research. This absolutely requires the cooperating hospitals to find a common system for the electronically managed medical record. Additionally, this must immediately be associated with a project from the BMBF-*Initiative Medizininformatik* and the development of data integration centres in cooperating hospitals must be promoted. In this context, establishment of an interface with the partner in Groningen should be aimed at to ensure the necessary ability to connect in and adapt to joint research and patient care projects.

### *Physical Infrastructure*

Even though the available physical infrastructure was still sufficient for the trial phase, in the planned expansion of the University Medicine Oldenburg, a considerable number of additional surfaces will be needed to accommodate students and ensure teaching and research activities. The WR welcomes the fact that adequate facilities for an additional skills-lab as well as for the expansion of the research focus Neurosensory Science and Hearing Research are already available. As the assessment by the HIS-HE shows, additional teaching and research facilities with a surface requirement of 24,200 m<sup>2</sup> and with an investment requirement of EUR 226 million must be built. In addition, urgent investment measures are needed for research and teaching at the cooperating hospitals, for which the Lower Saxony Ministry for Social Affairs, Health and Equality is responsible. The WR strongly urges the federal state to coordinate the construction activities among the individual hospitals and to elaborate a plan for the creation of an integrated building concept.

The WR acknowledges that the federal state has already strengthened its financial commitment during the trial phase and that it also shows noticeable readiness to provide funds for the expansion of study places. In the scope of the development process, the *Landeszuführungsbetrag* (amount allocated by the federal state) shall gradually be increased from the current EUR 21 million to a yearly EUR 50 million until the year 2024. It must still be noted that even though this covers teaching adequately, it leaves little leeway for the urgently needed development of clinical research.

In addition to the increase in the *Landeszuführungsbetrag*, the planned expansion of the University Medicine Oldenburg mandates larger investments and their funding. These will in particular be needed for the construction of teaching and research facilities, the expansion and structural refurbishment of the cooperating hospitals as well as for the expansion of the IT infrastructure and for digitalisation measures. The latter aim at improving workflow in patient care and promoting medical care structures as well as linking research and care and the education of clinicians. In the light of the impending high investment needs in research, teaching and patient care, the WR, with great concern, takes notice of the fact that, so far, a clear investment strategy with a corresponding funding concept cannot be discerned. The WR strongly emphasises that a successful and sustainable development and expansion of the University Medicine Oldenburg depends on a clear commitment of the federal state to the site in conjunction with a strong financial engagement. With regard to the investment resources, the science side as well as the health side are called upon. This is due to the current design of the University Medicine Oldenburg as a cooperative model with the four Oldenburg hospitals which fall under the responsibility of the Lower Saxony Ministry for Social Affairs, Health and Equality. The WR sees the development of an investment and finance plan – coordinated with all participating institutions – as a top priority.

For a more in-depth analysis and evaluation please refer to the evaluation report on the University Medicine Oldenburg.