



**European System of Evaluation  
of Veterinary Training  
(ESEVT)**

**Manual of Standard Operating Procedure**

**2019**

**EUROPEAN ASSOCIATION OF ESTABLISHMENTS  
FOR VETERINARY EDUCATION  
(EAEVE)**

**FEDERATION OF VETERINARIANS  
OF EUROPE  
(FVE)**

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## **Introduction**

This document sets out the Standard Operating Procedure (SOP) of the European System of Evaluation of Veterinary Training (ESEVT), which is managed by the European Association of Establishments for Veterinary Education (EAEVE) in association with the Federation of Veterinarians of Europe (FVE). Chapter 2 (ESEVT Evaluation process) and Chapter 3 (ESEVT Standards for accreditation) have been approved by the EAEVE General Assembly (30 May 2019) and by the FVE Board (8 April 2019). The annexes 4 and 6-18 have been approved by the EAEVE Executive Committee (29 May 2019).

Chapter 2 (ESEVT Evaluation process) and Annexes 12, 13 and 17 were amended in December 2020.

Chapter 2 (ESEVT Evaluation process) and Annexes 5, 6, 7, 9, 17 and 18 were further amended in September 2021.

The main objective of the ESEVT is to evaluate if the professional qualifications provided by the Veterinary Education Establishments (VEEs) are compliant with the relevant EU Directives and the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG).

The transitional procedures between the *SOP 2019 as amended in December 2020* and the *SOP 2019 as amended in September 2021* are described in Annex 17.

## **Chapter 1. Basic documents for the recognition of professional qualifications and for Quality Assurance in the EU**

The minimum training requirements for veterinarians relevant for the automatic recognition of their qualification throughout the EU are laid down in the EU Directive on the recognition of professional qualifications, i.e. article 38 of the Directive 2005/36/EC as amended by Directive 2013/55/EU (see Annex 1).

Further details are provided by the EU Directive 2005/36/EC Annex 5.4.1, which is currently being amended in the Directive 2013/55/EU by the EU Commission under the Delegated Act procedure (see Annex 2).

The Standards for Quality Assurance in the European Higher Education Area have been updated in September 2014 and have been approved by the Ministerial Conference in May 2015 (see Annex 3).

## **Chapter 2. ESEVT Evaluation process**

*(as approved by the EAEVE General Assembly on 30 May 2019 and amended on 30 September 2021)*

The ESEVT evaluation process is a fully transparent accreditation procedure of all EAEVE members as defined by the EAEVE Statutes. In the SOP, the term 'VEE' (Veterinary Education Establishment) refers to such a member. As stated in the EAEVE Statutes, the ESEVT is based on a compulsory system of Visitations together with periodic Interim Reports provided by the VEE.

To be accredited by the ESEVT, a VEE and each study programme it provides leading to the degree of veterinarian must be compliant with the EU Directives on the recognition of professional qualifications and the ESG. Therefore, they must meet all the Standards set out in Chapter 3.

If a VEE offers more than one study programme to become veterinarian, e.g. in different languages or in collaboration with other VEEs, all study programmes must be evaluated.

If a VEE delegates a significant part of the curriculum (except External Practical Training) to a different legal entity, e.g. another higher education institution or a corporate, it must provide, as an annex of the Self Evaluation Report (SER), a written contract describing how the VEE can exercise a real control over the quality of the training delivered. These additional entities must be visited and evaluated.

Four types of evaluation are organised by ESEVT, i.e.:

- ) Full Visitation (called Visitation in this document);
- ) Re-visitation;
- ) Preliminary Visitation;
- ) Interim Report.

### **1. Visitation**

#### **1.1. Agreement for a Visitation between the VEE and EAEVE**

A full Visitation may not be completed before the graduation of the first cohort of veterinary students. Not less than 14 months before the intended Visitation, the VEE (which must be an EAEVE member in good standing) must contact the EAEVE Office to ask for a Visitation.

Not less than 12 months before the intended Visitation, an official Visitation Agreement must be signed by the VEE's Head.

This agreement must mention:

- ) the date and type of Visitation;
- ) the name and contact details of the VEE's Head and of the Liaison Officer for the Visitation;
- ) the Visitation fee to be paid in agreement with Annex 5;
- ) the version and date of the ESEVT SOP which is valid for the Visitation;
- ) the commitment of the VEE to strictly respect the ESEVT SOP, with regard to the preparation and completion of the Visitation and the publication of the Self-Evaluation Report (SER) and the Visitation Report on its website as well as the websites of EAEVE and DEQAR (Database of the European Quality Assurance Register).

The Visitation must be carried out during a period of full academic activity, i.e. when most staff and students are present on site, and should be completed not later than 2 months before the ECOVE meeting preceding the end of granted status of the VEE.

The fees for the evaluation process are provided in Annex 5.

## **1.2. Identification of the Visitation Team**

Not less than 6 months before the Visitation, the European Committee of Veterinary Education (ECOVE), through the EAEVE Office, appoints the members of the Visitation Team and sends to the VEE the Visitation team list and the contact details of each Visitor.

The Visitation Team is composed of 8 Visitors:

- ) 1 expert in Basic Sciences (BS);
- ) 1 expert in Clinical Sciences in companion animals (including equine and exotic pets) (CS-CA);
- ) 1 expert in Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management) (CS-FPA);
- ) 1 practitioner (proposed by FVE) (P);
- ) 1 expert in Food Safety and Quality (including Veterinary Public Health) (FSQ);
- ) 1 expert in Quality Assurance (QA);
- ) 1 student (a minimum of 2 years before graduation as veterinarian or a maximum of 1 year after graduation at the time of the Visitation ) proposed by an association of veterinary students and being from a VEE which is a full member of EAEVE with the Accreditation status (*or Approval status under earlier versions of the SOP*) (ST);
- ) 1 ESEVT Coordinator (CO).

If a VEE offers more than one study programme to become veterinarian or delegates a significant part of the curriculum (except External Practical Training) to a different legal entity, one additional Visitor may be appointed by ECOVE.

One of the Visitors is designated by ECOVE as Chairperson on the basis of his/her experience as ESEVT Visitor and leadership.

All academic Visitors must be associated with a VEE with ESEVT Accreditation or Pending Accreditation status (in the latter case, the VEE must have previously held the status of Accreditation) (*or Approval status under earlier versions of the SOP*).

All Visitors (regardless of the type of Visitation) must:

- ) have successfully completed the E-learning course for ESEVT Visitors;
- ) be fluent in English, both speaking and writing;
- ) have been granted their university degree and work in a country other than the visited one;
- ) sign a declaration confirming that they have no conflict of interest with the visited VEE and a commitment to strictly follow the ESEVT SOP and the EAEVE Code of Conduct (see Annex 15).

If the visited VEE considers that there is a conflict of interest with one of the selected Visitors, it may inform ECOVE through the EAEVE Office 2 weeks after receiving the Visitation team list at the latest. If the conflict of interest is justified by the VEE, ECOVE decides to replace this Visitor.

Upon an official request from the visited VEE, ECOVE may accept an observer from another official body, in addition to the ESEVT Visitors (see Annex 18). The visited VEE is strongly

encouraged to consider inviting to the Visitation an observer from the relevant national accrediting agency.

Upon an official request from the visited VEE, ECOVE may accept to share Visitors with other veterinary accreditation bodies in case of joint Visitations within the International Accreditors Working Group (IAWG).

However, the Visitation programme must be fully compliant with the ESEVT SOP, e.g. specific ESEVT Visitation team, Self-Evaluation Report (SER), Visitation Report, Exit Presentation.

The main duties of the Visitors are to establish if the veterinary degree granted by the visited VEE is compliant with the ESEVT Standards (see Chapter 3).

More specifically, the duties of the Visitors are:

- ) before the Visitation, to read the Self Evaluation Report (SER), to write the draft report for their respective chapters (as allocated by the Chairperson and the Coordinator) and to send it together with a list of questions and issues to be clarified to the Coordinator 2.5 weeks before the Visitation at the latest;
- ) during the Visitation, to check the accuracy of the information provided in the SER, to visit the facilities, to consult the databases, to meet students, staff, representatives of the national veterinary associations and other stakeholders, to request any missing information and to finalise the writing of the draft Visitation Report for their respective chapters in collaboration with the other members of the team;
- ) immediately after the Visitation, to send their comments on the final draft of the Visitation Report to the Coordinator and the post-Visitation questionnaire (Annex 16a) to the EAEVE Office.

The main duties of the Chairperson are to chair all the meetings during the Visitation, to make decisions (after consulting the Visitation Team) when an unexpected problem occurs during the Visitation and, subsequently, to be available to ECOVE to discuss the Visitation Report and answer any questions that may arise.

The main duties of the Coordinator are to coordinate the preparation, completion and outcome of the Visitation process in close contact with the EAEVE Office, the Chairperson and the visited VEE, to train and supervise the new Visitors (i.e. Visitors who have successfully completed the ESEVT E-learning but who have not yet participated in an ESEVT Visitation), to supervise the writing of the Visitation Report and to edit it in order to help the experts in their duties, to facilitate contacts with the VEE, to ensure a strict implementation of the SOP, and to guarantee an equal level of all reports.

The main duties of the Liaison Officer are to facilitate the whole Visitation process in agreement with the ESEVT SOP and to be in close contact with the EAEVE Office, the Coordinator and the VEE's Head before, during and after the Visitation. The Liaison Officer must provide the Visitors with the information and documents requested before and during the Visitation, to address any technical problems and to organise the relevant meetings in the most efficient way.

The Liaison Officer (who may not be the VEE's Head) must be a senior member of the VEE who is:

- ) well aware of both the ESEVT SOP and the structure and functioning of the VEE;
- ) fluent in English;

-) easily accessible by e-mail and by phone and readily available at all times, particularly during the Visitation.

### **1.3. Travel arrangements and accommodation**

Not less than 4 months before the Visitation, the VEE must:

- ) contact each Visitor in order to make suitable travel arrangements (each Visitor must be present on site at least 1 hour before the start of the first team meeting and must be present until the end of the final presentation);
- ) buy the tickets – economy class, or business class for flights longer than 6 hours (i.e. single flight duration and not full travel time with stopovers) and send them to each Visitor or, in case of a specific agreement between the VEE and the Visitors, reimburse Visitors buying their own tickets under the same conditions.
- ) book rooms in a convenient 3\* or 4\* hotel with Wi-Fi, a restaurant and a meeting room fully dedicated to the use of the Visitation Team;
- ) pay the insurance for each Visitor purchased by the EAEVE Office in order to cover the risk of accidents occurring during the travels and the Visitation;
- ) pay the cost for Visa acquisition when requested by the visited country.

All transportation of the Visitors (e.g. between airport, train station, hotel, restaurant and visited sites) and catering must be organised and funded by the VEE.

### **1.4. Self Evaluation Report (SER)**

The SER must be the result of an objective, accurate and in-depth review of the VEE and the education it provides. It must contain accurate factual information together with a SWOT analysis, including the measures proposed to address the weaknesses and threats identified by the VEE.

The SER must demonstrate how the VEE meets the ESEVT Standards described in Chapter 3. The SER has to be written following the SOP which was valid at the time of signing of the agreement between the VEE and EAEVE. If the VEE wishes to do so, it may follow the most recent SOP. In any case, the VEE must state in the introduction of its SER which SOP it follows (version, date).

The SER must closely follow the template and guidelines provided in Annex 6.

It is strongly recommended that the preparation of the SER begins about one year before the Visitation at the latest, involves key members of staff in its process and is approved by the VEE's governing body.

Not less than 2 months before the Visitation, the SER (and the SER Appendices) must be sent by the VEE to all members of the Visitation Team and to the EAEVE Office, by e-mail (electronic version in PDF and Word format), and it is up to the Visitors to decide if they would like to receive a hard copy of the document in addition to the e-copy (it is the duty of the Liaison Officer to enquire about the Visitors' preference in this respect before the SER due date). The EAEVE Office does not need to receive a hard copy of the SER.

### **1.5. Programme of the Visitation**

The major aim of the Visitation is to establish whether the VEE complies with the ESEVT Standards described in Chapter 3. The Visitation Team must verify and supplement the information presented in the SER by visiting the facilities, consulting the databases and meeting the relevant persons.



A secondary objective is to propose, if appropriate, a few operational suggestions for improving the training. These suggestions must be relevant for the visited VEE and in compliance with the ESEVT SOP.

The programme of the Visitation must be in compliance with the timetable and guidelines proposed in Annex 7. Any modification proposed by the VEE must be accepted by the Chairperson and the Coordinator. When required, on-site changes must be possible in order to allow the Visitors to verify or complete the necessary information.

Interactions between the Visitation Team and the VEE should have a collegial tone, be based on mutual trust and a desire to arrive at a full understanding of the current status of the educational programme of the VEE.

Wherever possible, the Visitation Team will work as a group to enable all of the team members to see the relationships between the various parts of the curriculum and the degree of integration. If needed, the Visitation Team may split into smaller groups to retrieve as much information as possible during the Visitation.

The Visitation Team must meet groups of teaching staff who represent a broad range of disciplines and levels of experience, as well as support staff, students and external stakeholders. An opportunity is provided during the Visitation for any staff member or student to meet confidentially with the Visitation Team (during the open session in confidence for individuals on the fourth day of the Visitation) and/or to send confidential communications to the team by e-mail. The VEE must inform in advance via e-mail all academic and support staff, students and EPT providers about this opportunity and the time and place of the session in confidence.

### **1.6. Visitation Report**

The Visitation Report has to be written following the SOP which was valid at the time of signing of the agreement between the VEE and EA EVE unless the VEE has explicitly agreed to follow the most recent SOP (refer to point 1.4). In any case, the SOP used to write the Visitation Report must coincide with the SOP the VEE followed when preparing its SER. In the Visitation Report, the Visitation Team must state in the Introduction which SOP it follows (version, date).

Not less than 2.5 weeks before the Visitation, each Visitor must have read the full SER, completed the delegated chapters in the draft Visitation Report (at least the sections 'Findings' and 'Questions to be asked/issues to be clarified during the Visitation') and sent it to the other members of the Visitation Team. Then, the Coordinator puts them together as Draft A.

The Visitation Report must be completed in agreement with the template and guidelines provided in Annex 8.

All members of the Visitation Team are expected to contribute to all chapters but a principal writer is identified for each chapter by the Chairperson and Coordinator at least 2 months before the Visitation.

The draft A Visitation Report is based on the input of each Visitor. It must be assembled by the Coordinator and sent to all members of the Visitation Team 2 weeks before the start of the Visitation at the latest. At this stage, the draft A Visitation Report is solely based on the SER. A list of questions to be asked to the VEE and issues to be clarified during the Visitation must be added to the findings and comments. The final comprehensive list of questions and requests is sent by the Coordinator to the VEE 2 weeks before the start of the Visitation at the latest, in

order to allow the Liaison Officer sufficient time to collect the required data. The VEE must provide answers to these questions as soon as possible or at the start of the Visitation at the latest.

The draft B Visitation Report (based on findings, comments, suggestions and identification of potential deficiencies) must be completed before the end of the Visitation.

The Visitation Team is responsible for making an independent assessment and proposing an unambiguous statement on the adequacy of the VEE against each ESEVT Standard, i.e. compliant, partly compliant (one or more Minor Deficiencies that does/do not significantly affect the quality of education and the VEE's compliance with the ESEVT Standards) or not compliant (one or more Major Deficiencies that affect the quality of education and the VEE's compliance with the ESEVT Standards).

In the Visitation Report, each chapter is subdivided into 4 parts:

- ) findings;
- ) comments;
- ) suggestions of the Visitation Team (which must be strictly limited in number, agreed by the whole team i.e. not linked to personal opinions, relevant for the visited VEE, and in agreement with the ESEVT SOP).
- ) decision of the Visitation Team (in case of non-compliance, the Major Deficiencies must be clearly listed in agreement with a standardised terminology).

After a proofreading by the Chairperson and Coordinator and a final agreement by all members of the Visitation Team, the draft C Visitation Report is issued within 14 days after the end of the Visitation and sent to the VEE for identification of potential factual errors with a two weeks' notice.

In agreement with the Chairperson, the Coordinator corrects the relevant factual errors and sends the draft D to the EAEVE Office for a final proofreading before the EAEVE Office presents the Report for the next ECOVE meeting. The ECOVE members must receive the draft D Visitation Report not less than 1 month before their meeting.

The post-Visitation questionnaire (Annex16b) is sent by the EAEVE Office to the visited VEE after the Draft D Visitation Report has been finalised and submitted to the EAEVE Office. One month after the Visitation at the latest, the VEE must return the completed questionnaire to the EAEVE Office.

The Draft D Visitation Report is analysed by ECOVE. Any amendment decided by ECOVE must be explained. With the support of the EAEVE Office and the Coordinator, the Final Visitation Report is formally issued by ECOVE. It is communicated to the VEE's Head and to the Visitation Team prior to publication on the websites of EAEVE, the VEE and DEQAR.

### **1.7. ECOVE decision**

ECOVE must base its decision on the analysis of the Draft D Visitation Report and on the SOP which was valid at the time of signing of the agreement between the VEE and EAEVE unless the VEE has explicitly agreed to follow the most recent SOP (refer to points 1.4 and 1.6). In any case, the SOP on which ECOVE has based its decision must coincide with the SOP the VEE followed when preparing its SER. In its decision, ECOVE must state on which SOP it has based its decision (version, date).

For each visited VEE, ECOVE analyses and discusses the draft D Visitation Report and decides to confirm or amend the recommendations of the Visitation Team. The Chairperson and the

Coordinator must be available to ECOVE for discussing the Visitation Report and for answering any questions that may arise. The Major Deficiencies must be clearly listed in agreement with a standardised terminology and the VEE's status clearly identified, i.e.:

- ) Accreditation in case of no Major Deficiencies, or
- ) Pending Accreditation in case of 1 or several Major Deficiencies.

In case the Major Deficiency/ies is/are corrected within 2 years after the Visitation, which is to be confirmed through a Re-visitation that must be requested within 1 year after the Visitation, the VEE will be granted with the status of Accreditation.

In case the VEE does not meet the deadlines for requesting and/or undergoing the Re-visitation or if the Re-visitation confirms that the Major Deficiency/ies has/have not been corrected, the status of Pending Accreditation will automatically revert to Non-Accreditation, with validity period starting from the date of the Visitation.

When a VEE offers more than one study programme to become a veterinarian, e.g. in different languages or in collaboration with other VEEs, ECOVE may take a different decision for the different study programmes, e.g. Accreditation for one programme and Non-Accreditation for another one.

Accreditation is valid for 7 years from the date of the (full) Visitation. However, in case of major issues identified by the Interim Report, ECOVE may as a last resort decide to change the VEE's status (see Annex 14).

Pending Accreditation is valid for the period between the ECOVE decision after the (full) Visitation and the subsequent Re-visitation, which must be completed within 2 years after the (full) Visitation. When the validity period is exceeded, the VEE automatically reverts to 'Non-Accreditation status because of end of granted status exceeded'.

Within two working days after the meeting, the ECOVE Chairperson through the EAEVE Office informs the VEE's Head by e-mail about the granted status.

Within one month after the meeting, the ECOVE Chairperson through the EAEVE Office sends by e-mail the Final Visitation Report to the VEE's Head and informs him/her about:

- ) the appeal process;
- ) the obligation to make public the final Visitation Report issued by ECOVE on the websites of EAEVE and the VEE.

### **1.8. Appeal process**

If the VEE believes that the decision by ECOVE is not justified by the findings in the Visitation Report, it must inform the ECOVE Chairperson through the EAEVE Office of its intention to appeal the ECOVE decision within 10 working days after the receipt by mail of the ECOVE decision and final Visitation Report. That notification and the argued basis for the appeal must be made in writing 2 months, at the latest, after the receipt by mail of the ECOVE decision and final Visitation Report by the VEE.

The first stage of the appeal process involves reconsideration by the ECOVE during its next meeting. The Chairperson and the Coordinator of the relevant Visitation Team may be asked to participate in the reconsideration process. The appeal may be accepted or dismissed.

If ECOVE dismisses the appeal and if the VEE intends to continue the appeal process, it is then considered formally by an Appeal Panel. The panel will comprise three members, all of whom

should preferably have chaired a Visitation Team. The appointment of the panel is coordinated by the President of EAEVE or his/her nominee in the event that s/he is ineligible through other considerations. One member each is appointed by the EAEVE and the FVE, with the appealing VEE having the right to nominate a third member. At least one member must have expertise relating to the subject area(s) under dispute. The panel selects its own Chairperson. All three members must sign a declaration confirming that they have no conflict of interest with the visited VEE and a commitment to strictly follow the ESEVT SOP and the EAEVE Code of Conduct (see Annex 15). ExCom members, ECOVE members and ESEVT Coordinators cannot be member of Appeal Committees.

The appeal and its discussion is first to be carried out by correspondence. If a decision cannot be reached by these means, the Chairperson of the Appeal Panel may consider that a meeting is necessary, at the VEE or elsewhere, between the members of the panel, representatives of the VEE and the Chairperson and Coordinator of the Visitation Team. In this case all expenses must be paid by the VEE.

Once the Appeal Panel has reached a decision, by majority if necessary, its Chairperson will inform ECOVE of its decision by submitting an adjudicating statement. The EAEVE Office is responsible for informing the VEE of the appeal panel's decision in writing. The decision of the panel is final.

Until the end of the appeal process, the Visitation Report is not published and the appealing VEE holds its current status.

### **1.9. Complaint process**

If the VEE believes that procedural faults have been made during the ESEVT evaluation process, it must send by e-mail to the EAEVE Office the official complaint and its argued basis not later than two months after the last day of the Visitation.

The complaint is sent by the EAEVE Office to the EAEVE Committee on Internal Quality Assurance (CIQA) which analyses the documents and evidence, including seeking further information from all relevant parties.

CIQA informs the EAEVE ExCom about its conclusions as soon as possible and no later than two months after receiving the relevant information.

The ExCom decides to dismiss or to accept (totally or partially) the complaint and informs all concerned parties about its decision and subsequent actions.

## **2. Re-visitation**

### **2.1. Agreement for a Re-visitation between the VEE and EAEVE**

One year after the previous (full) Visitation at the latest, a VEE that considers that it has rectified its Major Deficiencies must ask ECOVE through the EAEVE Office for a Re-visitation.

If ECOVE agrees about the Re-visitation, it will be organised by the EAEVE Office at the expense of the VEE.

Not less than 3 months before the Re-visitation, an official Re-visitation agreement must be signed by the VEE's Head.

This agreement must mention:

- ) the date of the Re-visitation;
- ) the Re-visitation fee to be paid in agreement with Annex 5;
- ) the commitment of the VEE to strictly respect the ESEVT SOP, with regard to the preparation and completion of the Re-visitation and the publication of the Re-visitation SER (RSER) and the Re-visitation Report on its website as well as the websites of EAEVE and DEQAR (Database of the European Quality Assurance Register).

A Re-visitation must be performed 2 years after the previous Visitation at the latest and can only be performed once. If this interval is exceeded, only a (full) Visitation can be planned.

The Re-visitation must be carried out during a period of full academic activity, i.e. when most staff and students are present on site, and should be completed not later than 2 months before the ECOVE meeting preceding the end of granted status of the VEE.

## **2.2. Identification of the Re-visitation Team**

3 months before the Re-visitation at the latest, ECOVE through the EAEVE Office appoints the members of the Re-visitation Team and sends to the VEE the Visitation team list and the contact details of each Visitor.

The Re-visitation Team is composed of minimum 2 Visitors, i.e. 1 member of the previous Visitation Team (most often the Chairperson, who will chair the Re-visitation Team) and a Coordinator (who should be different from the Coordinator of the previous (full) Visitation to the same VEE). The number and specific expertise of Visitors are decided by ECOVE on the basis of the number, type and complexity of the Major Deficiencies identified during the (full) Visitation.

All Visitors must fulfil the criteria specified in point 1.2 and be experienced ESEVT Visitors. The duty of the Visitors is to evaluate whether the Major Deficiencies identified by ECOVE after the Visitation have been corrected. It is also to evaluate if an ongoing process to correct the Minor Deficiencies is in place.

More specifically, the duties of the Visitors are:

- ) before the Re-visitation, to read the RSER;
- ) during the Re-visitation, to check the accuracy of the information provided in the RSER and, when relevant for the correction of the Deficiencies, to visit facilities, consult databases, meet people and search for any missing information;
- ) within two weeks after the Re-visitation, to finalise the Re-visitation Report and to send the post-Visitation questionnaire (Annex 16) to the EAEVE Office.

## **2.3. Travel arrangements and accommodation**

Travel arrangements and accommodation are the same as for a Visitation (refer to point 1.3).

## **2.4. Re-visitation SER (RSER)**

The RSER must provide factual and accurate information providing evidence that the Major Deficiencies identified during the Visitation have been corrected and that an ongoing process to correct the Minor Deficiencies is in place.

Not less than 2 months before the Re-visitation, the RSER (and the RSER Appendices) must be sent by the VEE to the members of the Re-visitation Team and to the EAEVE Office by e-mail (electronic version in PDF and Word format), and it is up to the Visitors to decide if they would like to receive a hard copy of the document in addition to the e-copy (it is the duty of

the Liaison Officer to enquire about the Visitors' preference in this respect before the RSER due date). The EAEVE Office does not need to receive a hard copy of the RSER.

The RSER must be completed in agreement with the template and guidelines provided in Annex 9.

### **2.5. Programme of the Re-visitation**

The aim of a Re-visitation is to evaluate whether the Major Deficiencies identified during the previous Visitation have been fully corrected, whether an ongoing process to correct the Minor Deficiencies is in place, and whether the VEE is now fully compliant with the ESEVT Standards described in Chapter 3.

The Re-visitation Team will have to verify and supplement the information presented in the RSER by visiting the facilities, consulting the databases and meeting the relevant persons.

The programme of the Re-visitation must be in agreement with the timetable and guideline provided in Annex 10. Any modification proposed by the VEE must be agreed by the Chairperson and the Coordinator. When required, on-site changes in the Re-visitation programme must be possible in order to allow the Visitors to verify or complete the necessary information.

### **2.6. Re-visitation Report**

The Re-visitation Report must be completed in agreement with the template and guidelines provided in Annex 11.

A draft A Re-visitation Report is prepared before arrival and a draft B Re-visitation Report is written on site by the Re-visitation Team.

After a proofreading by the Coordinator, the draft C Re-visitation Report is issued two weeks after the end of the Re-visitation at the latest and sent to the VEE for the identification of potential factual errors with a two weeks' notice.

In agreement with the Chairperson, the Coordinator corrects the relevant factual errors and sends the draft D to the EAEVE Office for a final proofreading before the EAEVE Office presents the Report for the next ECOVE meeting. The ECOVE members must receive the draft D Re-visitation Report not less than 1 month before their meeting.

The post-Visitation questionnaire (Annex 16b) is sent by the EAEVE Office to the visited VEE after the Draft D Re-visitation Report has been finalised and submitted to the EAEVE Office. One month after the Re-visitation at the latest, the VEE must return the completed questionnaire to the EAEVE Office.

With the support of the EAEVE Office, the Final Re-visitation Report is formally issued by ECOVE. It is communicated to the VEE's Head prior to publication on the websites of EAEVE, the VEE and DEQAR.

One month after the Re-visitation at the latest, the VEE must return the post-Visitation questionnaire (Annex 16) to the EAEVE Office.

### **2.7. ECOVE decision**

For each revisited VEE, ECOVE analyses the Re-visitation Report and decides to confirm or amend the recommendations proposed by the Re-visitation Team. The Chairperson and the Coordinator must be available to ECOVE for discussing the Re-visitation Report and for

answering questions that may arise. The remaining Major Deficiencies after the Re-visitation must be clearly listed by ECOVE in agreement with a standardised terminology and the VEE's status clearly granted, i.e.:

- ) Accreditation if all Major Deficiencies have been corrected;
- ) Non-Accreditation if all Major Deficiencies have not been corrected.

Within two days after the meeting, the ECOVE Chairperson through the EAEVE Office informs the VEE's Head by e-mail about the granted status.

Within one month after the meeting, the ECOVE Chairperson through the EAEVE Office sends by e-mail the Final Re-visitation Report to the VEE's Head and informs him/her about:

- ) the appeal process;
- ) the obligation to make public the final Re-visitation Report issued by ECOVE on the websites of EAEVE and the VEE.

The new granted status lasts 7 years from the date of the (full) Visitation (and not from the date of the Re-visitation). However, in case of major issues identified by the Interim Report, ECOVE may as a last resort decide to reclassify the VEE to Pending Accreditation status (see Annex 14).

If the VEE is not granted with Accreditation status after the Re-visitation, another Re-visitation cannot be undertaken and Non-Accreditation status will be valid until the next (full) Visitation.

When the validity period of the status of Pending Accreditation is exceeded, the VEE is automatically reclassified to a Non-Accreditation status.

### **2.8. Appeal process**

The appeal process after an ECOVE decision based on a Re-visitation is identical to the one after a Visitation.

### **2.9. Complaint process**

The complaint process after a Re-visitation is identical to the one after a Visitation.

## **3. Preliminary Visitation**

The Preliminary Visitation is a prerequisite for granting membership in EAEVE, as stated in the EAEVE Statutes. The Preliminary Visitation is integrated with a (full) Visitation which must be completed within a 3-year period after the completion of the Preliminary Visitation for all candidate VEEs seeking membership of EAEVE.

The Preliminary Visitation is dedicated solely to new VEEs in Europe and VEEs from outside Europe, which are not aware of the ESG and the SOP requirements and should benefit from a two-step evaluation.

The primary objective of a Preliminary Visitation is to evaluate if the VEE is fully aware of the ESEVT SOP in general and the accreditation Standards in particular and if there is an ongoing process in place to achieve compliance with these Standards. This Preliminary Visitation process should ensure that the VEE is sufficiently informed, prepared and equipped for undergoing a (full) Visitation within the 3-year period. If this deadline is not respected, another Preliminary Visitation must be completed before the (full) Visitation can be planned.

The secondary objective of a Preliminary Visitation is to contribute to improving the quality of education provided by the VEE.

### **3.1. Agreement for a Preliminary Visitation between the VEE and EAEVE**

The Preliminary Visitation must be planned at the earliest 12 months before the graduation date of the first cohort of students. Not less than 12 months before the intended Preliminary Visitation, the VEE must contact the EAEVE Office to ask for a Preliminary Visitation.

Not less than 10 months before the intended Preliminary Visitation, an official Preliminary Visitation agreement must be signed by the VEE's Head.

This agreement must mention:

- ) the date of the Preliminary Visitation;
- ) the name and contact details of the VEE's Head and of the Liaison Officer for the Preliminary Visitation;
- ) the Preliminary Visitation fee to be paid in agreement with Annex 5;
- ) the commitment of the VEE to strictly respect the ESEVT SOP, both for the preparation and completion of the Preliminary Visitation.

### **3.2. Identification of the Preliminary Visitation Team**

Not less than 6 months before the Preliminary Visitation, ECOVE through the EAEVE Office appoints the members of the Preliminary Visitation Team and sends to the VEE the Visitation Team list and the contact details of each Visitor.

The Visitation Team is composed of one Visitor with high expertise level (designated as the Chairperson of the Preliminary Visitation) and one Coordinator. These Visitors should also be part of the Visitation Team for the (full) Visitation, which should follow the Preliminary Visitation within a 3-year period.

All Visitors must fulfil the criteria specified in point 1.2.

The main duties of the Visitors and the Liaison Officer are the same as for a Visitation.

### **3.3. Travel arrangements and accommodation**

Travel arrangements and accommodation are the same as for a Visitation (refer to point 1.3).

### **3.4. Preliminary SER (PSER)**

The PSER must be the result of a brief review of the VEE and the education it provides. It must provide factual and accurate information together with a SWOT analysis, including the measures proposed to address the weaknesses and threats identified by the VEE.

The PSER must also demonstrate how the VEE meets or plans to meet the ESEVT Standards described in Chapter 3.

The PSER must be completed in agreement with the template and guidelines provided for the SER (Annex 6), although it should be shorter and less detailed than for a (full) Visitation. The PSER must be concise (maximum 50 pages, without the appendices, written in Times New Roman font, size 12, single spacing), complete, accurate and written in English in agreement with the template and guidelines provided in Annex 6.

Not less than 2 months before the Preliminary Visitation, the PSER (and the PSER Appendices) must be sent by the VEE to the members of the Preliminary Visitation Team and to the EAEVE Office by e-mail (electronic version in PDF and Word format), and it is up to the Visitors to decide if they would like to receive a hard copy of the document in addition to the e-copy (it is



the duty of the Liaison Officer to enquire about the Visitors' preference in this respect before the PSER due date). The EAEVE Office does not need to receive a hard copy of the PSER.

### **3.5. Programme of the Preliminary Visitation**

The Preliminary Visitation Team has to verify and supplement the information presented in the PSER by visiting the facilities, consulting the databases and meeting the relevant persons.

The programme of the Preliminary Visitation must be in agreement with the timetable and guidelines proposed in Annex 12. The programme is scheduled to take 2 full days on site, the first one mainly dedicated to visiting the facilities and the second one to meeting the relevant persons. Any modification to the programme proposed by the VEE must be agreed by the Chairperson and the Coordinator.

When required, on-site changes must be possible in order to allow the Visitors to verify or complete the necessary information.

### **3.6. Preliminary Visitation Report**

The Preliminary Visitation Report must be completed in agreement with the template and guidelines provided in Annex 13.

A draft Preliminary Visitation Report (based on findings, comments, suggestions) is initiated by the Visitors (on the basis of the PSER) before the Preliminary Visitation, completed and sent to the VEE not later than two weeks after the Preliminary Visitation, corrected for factual errors by the VEE within two weeks of its receipt and finally proofread by the Coordinator and the EAEVE Office, before the EAEVE Office presents the Report at the next ECOVE meeting. The ECOVE members must receive the final draft Preliminary Visitation Report not less than 1 month before their meeting.

The final draft Preliminary Visitation Report is analysed by ECOVE. Any amendment decided by ECOVE must be explained. In exceptional cases, ECOVE may decide that a full Visitation cannot be requested by the VEE, because the Preliminary Visitation Report clearly demonstrates the impossibility of the VEE to be ready for a full Visitation within the 3-year period. In such a case, the VEE may re-apply for a Preliminary Visitation three years after the first one at the earliest.

The post-Visitation questionnaire (Annex 16b) is sent by the EAEVE Office to the visited VEE after the Draft D Preliminary Visitation Report has been finalised and submitted to the EAEVE Office. One month after the Preliminary Visitation at the latest, the VEE must return the completed questionnaire to the EAEVE Office.

With the support of the EAEVE Office and the Coordinator, the Final Preliminary Visitation Report is formally issued by ECOVE. It is communicated to the VEE's Head and to the Visitation Team prior to its mandatory publication on the websites of EAEVE, the VEE and DEQAR.

### **3.7. Appeal and complaint processes**

The appeal and complaint processes are similar to those after a Visitation and are described in sections 1.8 and 1.9.

## **4. Interim Report**

Three and a half years after the (full) Visitation, all VEEs that are members of EAEVE must send a concise Interim Report to the EAEVE Office.

It must include:

- ) the name and details of the current VEE's Head;
- ) any major changes in each ESEVT Standards since the previous SER;
- ) progress in the correction of Major Deficiencies (if any) and of Minor Deficiencies and plans for the near future;
- ) the expected date of the next evaluation;
- ) an updated list of Indicators.

After being reviewed by an ESEVT Coordinator designated by ECOVE, the Interim Report is sent by the EAEVE Office to ECOVE for consideration during its next meeting.

The Interim Report and its review by the Coordinator must be completed in agreement with the templates and guidelines provided in Annex 14.

In case of the lack of an Interim Report or evidence in the Interim Report of the occurrence of potential major issues, ECOVE may ask for further information from the VEE.

If the VEE does not reply or does not provide a convincing plan for correcting these major issues, ECOVE may decide to send an ESEVT Coordinator on site (at the cost of the VEE), with the possibility that the VEE's Accreditation status may be changed.

The Interim Report must be published on the website of the VEE.

## **Chapter 3. ESEVT Standards for Accreditation**

*(as approved by the EAEVE General Assembly on 30 May 2019)*

### **Introduction**

ESEVT's principal aim in setting standards, and evaluating the VEE against them, is to ensure that the VEE:

- is well managed
- has adequate financing to sustain its educational, research and social commitments
- has appropriate resources of staff, facilities and animals
- provides an up-to-date professional curriculum
- provides an appropriate learning environment
- operates a fair and reliable assessment system
- operates permanent QA and quality enhancement mechanisms
- demonstrates compliance with all the ESEVT Standards which when taken together provide an assurance that the veterinary degree meets the requirements of the EU Directives and the ESG recommendations, as well as ensures that its graduates will have acquired the relevant knowledge, skills and competences required for the entry-level of a veterinarian.

### **Area 1. Objectives, Organisation and Quality Assurance Policy**

Standard 1.1: The VEE must have as its main objective the provision, in agreement with the EU Directives and ESG recommendations, of adequate, ethical, research-based, evidence-based veterinary training that enables the new graduate to perform as a veterinarian capable of entering all commonly recognised branches of the veterinary profession and to be aware of the importance of lifelong learning.

The VEE must develop and follow its mission statement which must embrace all the ESEVT Standards.

Standard 1.2: The VEE must be part of a university or a higher education institution providing training recognised as being of an equivalent level and formally recognised as such in the respective country.

The person responsible for the veterinary curriculum and the person(s) responsible for the professional, ethical, and academic affairs of the Veterinary Teaching Hospital (VTH) must hold a veterinary degree.

The decision-making process, organisation and management of the VEE must allow implementation of its strategic plan and of a cohesive study programme, in compliance with the ESEVT Standards.

Standard 1.3: The VEE must have a strategic plan, which includes a SWOT analysis of its current activities, a list of objectives, and an operating plan with a timeframe and indicators for its implementation.

Standard 1.4: The VEE must have a policy and associated written procedures for the assurance of the quality and standards of its programmes and awards. It must also commit itself explicitly to the development of a culture which recognises the importance of quality, and quality assurance, within their VEE. To achieve this, the VEE must develop and implement a strategy

for the continuous enhancement of quality. The development and implementation of the VEE's strategy must include a role for students and other stakeholders, both internal and external, and the strategy must have a formal status and be publicly available.

Standard 1.5: The VEE must provide evidence that it interacts with its stakeholders and the wider society. Such public information must be clear, objective and readily accessible; the information must include up-to-date information about the study programme, views and employment destinations of past students as well as the profile of the current student population.

The VEE's website must mention the ESEVT VEE's status and its last Self Evaluation Report and Visitation Report must be easily available for the public.

Standard 1.6: The VEE must monitor and periodically review its activities, both quantitative and qualitative, to ensure that they achieve the objectives set for them and respond to the needs of students and society. The VEE must make public how this analysis of information has been utilised in the further development of its activities and provide evidence as to the involvement of both students and staff in the provision, analysis and implementation of such data.

Any action planned or taken as a result of this data analysis must be communicated to all those concerned.

Standard 1.7: The VEE must undergo external review through the ESEVT on a cyclical basis. Evidence must be provided of such external evaluation with the assurance that the progress made since the last ESEVT evaluation was linked to a continuous quality assurance process.

## **Area 2. Finances**

Standard 2.1: Finances must be demonstrably adequate to sustain the requirements for the VEE to meet its mission and to achieve its objectives for education, research and services. The description must include both expenditures (separated into personnel costs, operating costs, maintenance costs and equipment) and revenues (separated into public funding, tuition fees, services, research grants and other sources).

Standard 2.2: Clinical and field services must function as instructional resources. Instructional integrity of these resources must take priority over financial self-sufficiency of clinical services operations.

The VEE must have sufficient autonomy in order to use the resources to implement its strategic plan and to meet the ESEVT Standards.

Standard 2.3: Resources allocation must be regularly reviewed to ensure that available resources meet the requirements.

## **Area 3. Curriculum**

Standard 3.1: The curriculum must be designed, resourced and managed to ensure all graduates have achieved the graduate attributes expected to be fully compliant with the EU Directive 2005/36/EC (as amended by directive 2013/55/EU) and its Annex V.4.1. The curriculum must include the subjects (input) and must allow the acquisition of the Day One Competences (output) listed in Annex 2.

This concerns:

- Basic Sciences
- Clinical Sciences in companion animals (including equine and exotic pets)
- Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management)
- Food Safety and Quality
- Professional Knowledge.

Standard 3.2: Each study programme provided by the VEE must be competency-based and designed so that it meets the objectives set for it, including the intended learning outcomes. The qualification resulting from a programme must be clearly specified and communicated and must refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.

The VEE must provide proof of a QA system that promotes and monitors the presence of an academic environment highly conducive to learning including self-learning. Details of the type, provision and updating of appropriate learning opportunities for the students must be clearly described, as well as the involvement of students.

The VEE must also describe how it encourages and prepares students for self-learning and lifelong learning.

Standard 3.3: Programme learning outcomes must:

- ensure the effective alignment of all content, teaching, learning and assessment activities of the degree programme to form a cohesive framework
- include a description of Day One Competences
- form the basis for explicit statements of the objectives and learning outcomes of individual units of study
- be communicated to staff and students
- be regularly reviewed, managed and updated to ensure they remain relevant, adequate and are effectively achieved.

Standard 3.4: The VEE must have a formally constituted committee structure (which includes effective student representation), with clear and empowered reporting lines, to oversee and manage the curriculum and its delivery. The committee(s) must:

- determine the pedagogical basis, design, delivery methods and assessment methods of the curriculum
- oversee QA of the curriculum, particularly gathering, evaluating, making change and responding to feedback from stakeholders, peer reviewers and external assessors, and data from examination/assessment outcomes
- perform ongoing and periodic review of the curriculum at least every seven years by involving staff, students and stakeholders; these reviews must lead to continuous improvement. Any action taken or planned as a result of such a review must be communicated to all those concerned
- identify and meet training needs for all types of staff, maintaining and enhancing their competence for the ongoing curriculum development.

Standard 3.5: External Practical Training (EPT) is compulsory training activities organised outside the VEE, the student being under the direct supervision of a non-academic person (e.g. a practitioner). EPT cannot replace the core intramural training nor the extramural training

under the close supervision of academic staff (e.g. ambulatory clinics, herd health management, practical training in FSQ and VPH).

Since the veterinary degree is a professional qualification with Day One Competences, EPT must complement and strengthen the academic education inter alia by enhancing student's professional knowledge.

Standard 3.6: The EPT providers must have an agreement with the VEE and the student (in order to state their respective rights and duties, including insurance matters), provide a standardised evaluation of the performance of the student during their EPT and be allowed to provide feedback to the VEE on the EPT programme.

There must be a member of the academic staff responsible for the overall supervision of the EPT, including liaison with EPT providers.

Standard 3.7: Students must take responsibility for their own learning during EPT. This includes preparing properly before each placement, keeping a proper record of their experience during EPT by using a logbook provided by the VEE and evaluating the EPT. Students must be allowed to complain officially and/or anonymously about issues occurring during EPT. The VEE must have a system of QA to monitor the implementation, progress and then feedback within the EPT activities.

## **Area 4. Facilities and equipment**

Standard 4.1: All aspects of the physical facilities must provide an environment conducive to learning, including internet access. The VEE must have a clear strategy and programme for maintaining and upgrading its buildings and equipment. Facilities must comply with all relevant legislation including health, safety, biosecurity, accessibility to people with reduced mobility, and EU animal welfare and care standards.

Standard 4.2: Lecture theatres, teaching laboratories, tutorial rooms, clinical facilities and other teaching spaces must be adequate in number, size and equipped for the instructional purposes and must be well maintained. The facilities must be adapted for the number of students enrolled. Students must have ready access to adequate and sufficient study, self-learning, recreation, locker, sanitary and food service facilities.

Offices, teaching preparation and research laboratories must be sufficient for the needs of the academic and support staff.

Standard 4.3: The livestock facilities, animal housing, core clinical teaching facilities and equipment used by the VEE for teaching purposes must:

- be sufficient in capacity and adapted for the number of students enrolled in order to allow safe hands-on training for all students
- be of a high standard, well maintained and fit for the purpose
- promote best husbandry, welfare and management practices
- ensure relevant biosecurity and bio-containment
- be designed to enhance learning.

Standard 4.4: Core clinical teaching facilities must be provided in a veterinary teaching hospital (VTH) with 24/7 emergency services at least for companion animals and equines. Within the VTH, the VEE must unequivocally demonstrate that standard of education and clinical research are compliant with all ESEVT Standards, e.g. research-based and evidence-based clinical

training supervised by academic staff trained to teach and to assess, availability for staff and students of facilities and patients for performing clinical research and relevant QA procedures. For ruminants, on-call service must be available if emergency services do not exist for those species in a VTH.

The VEE must ensure state-of-the-art standards of teaching clinics which remain comparable with or exceeding the best available in the private sector.

The VTH and any hospitals, practices and facilities (including EPT) which are involved with the curriculum must meet the relevant national Practice Standards.

Standard 4.5: The VEE must ensure that students have access to a broad range of diagnostic and therapeutic facilities, including but not limited to: diagnostic imaging, anaesthesia, clinical pathology, intensive/critical care, surgeries and treatment facilities, ambulatory services, pharmacy and necropsy facilities.

Standard 4.6: Appropriate isolation facilities must be provided to meet the need for the isolation and containment of animals with communicable diseases. Such isolation facilities must be properly constructed, ventilated, maintained and operated to provide for animal care and for prevention of spread of infectious agents. They must be adapted to all animal species commonly handled in the VTH.

Standard 4.7: The VEE must have an ambulatory clinic for production animals or equivalent facilities so that students can practise field veterinary medicine and Herd Health Management under academic supervision.

Standard 4.8: The transport of students, live animals, cadavers, materials from animal origin and other teaching materials must be done in agreement with national and EU standards, to ensure the safety of students and staff and to prevent the spread of infectious agents.

Standard 4.9: Operational policies and procedures (including e.g. biosecurity, good laboratory practice and good clinical practice) must be taught and posted for students, staff and visitors and a Biosafety manual must be available. The VEE must demonstrate a clear commitment for the delivery of biosafety and biosecurity, e.g. by a specific committee structure. The VEE must have a system of QA to monitor and assure clinical, laboratory and farm services, including a regular monitoring of the feedback from students, staff and clients.

## **Area 5. Animal resources and teaching material of animal origin**

Standard 5.1: The number and variety of healthy and diseased animals, cadavers, and material of animal origin must be adequate for providing the practical and safe hands-on training (in the areas of Basic Sciences, Clinical Sciences, Pathology, Animal Production, Food Safety and Quality) and adapted to the number of students enrolled.

Evidence must be provided that these data are regularly recorded and that procedures are in place for correcting any deficiencies.

Standard 5.2: In addition to the training provided in the VEE, experience can include practical training at external sites, provided this training is organised under direct academic supervision and following the same standards as those applied in the VEE.

Standard 5.3: The VTH must provide nursing care skills and instruction in nursing procedures. Under all situations students must be active participants in the clinical workup of patients, including problem-oriented diagnostic approach together with diagnostic decision-making.

Standard 5.4: Medical records must be comprehensive and maintained in an effective retrieval system (preferably an electronic patient record system) to efficiently support the teaching, research, and service programmes of the VEE.

## **Area 6. Learning resources**

Standard 6.1: State-of-the-art learning resources must be adequate and available to support veterinary education, research, services and continuing education. When the study programme is provided in several tracks/languages, the learning resources must be available in all used languages. Timely access to learning resources, whether through print, electronic media or other means, must be available to students and staff and, when appropriate, to stakeholders. State-of-the-art procedures for bibliographical search and for access to databases and learning resources must be taught to undergraduate students.

Standard 6.2: Staff and students must have full access on site to an academic library administered by a qualified librarian, an Information Technology (IT) unit managed by an IT expert, an e-learning platform, and all the relevant human and physical resources necessary for the development of instructional materials by the staff and their use by the students.

The relevant electronic information, database and other intranet resources must be easily available for students and staff both in the VEE's core facilities via wireless connection (Wi-Fi) and from outside the VEE through a hosted secured connection, e.g. Virtual Private Network (VPN).

Standard 6.3: The VEE must provide students with unimpeded access to learning resources, internet and internal study resources, and equipment for the development of procedural skills (e.g. models). The use of these resources must be aligned with the pedagogical environment and learning outcomes within the programme and have mechanisms in place to evaluate the teaching value of changes in learning resources.

## **Area 7. Student admission, progression and welfare**

Standard 7.1: The VEE must consistently apply pre-defined and published regulations covering all phases of the student "life cycle", e.g. student admission, progression and certification.

In relation to enrolment, the VEE must provide accurate and complete information regarding all aspects of the educational programme in all advertisements for prospective national and international students.

Formal cooperations with other VEEs must also be clearly advertised.

Standard 7.2: The number of students admitted must be consistent with the resources available at the VEE for staff, buildings, equipment, healthy and diseased animals, and materials of animal origin.

Standard 7.3: The selection and progression criteria must be clearly defined, consistent, and defensible, be free of discrimination or bias, and take into account the fact that students are admitted with a view to their entry to the veterinary profession in due course.



The VEE must regularly review and reflect on the selection processes to ensure they are appropriate for students to complete the programme successfully. If the selection processes are decided by another authority, the latter must regularly receive feedback from the VEE.

Adequate training (including periodic refresher training) must be provided for those involved in the selection process to ensure applicants are evaluated fairly and consistently.

Standard 7.4: There must be clear policies and procedures on how applicants with disabilities or illnesses are considered and, if appropriate, accommodated in the programme, taking into account the requirement that all students must be capable of meeting the ESEVT Day One Competences by the time they graduate.

Standard 7.5: The basis for decisions on progression (including academic progression and professional fitness to practise) must be explicit and readily available to the students. The VEE must provide evidence that it has mechanisms in place to identify and provide remediation and appropriate support (including termination) for students who are not performing adequately.

The VEE must have mechanisms in place to monitor attrition and progression and be able to respond and amend admission selection criteria (if permitted by national or university law) and student support if required.

Standard 7.6: Mechanisms for the exclusion of students from the programme for any reason must be explicit.

The VEE's policies for managing appeals against decisions, including admissions, academic and progression decisions and exclusion, must be transparent and publicly available.

Standard 7.7: Provisions must be made by the VEE to support the physical, emotional and welfare needs of students. This includes, but is not limited to, learning support and counselling services, career advice, and fair and transparent mechanisms for dealing with student illness, impairment and disability during the programme. This shall include provision of reasonable adjustments for disabled students, consistent with all relevant equality and/or human rights legislation.

There must be effective mechanisms for resolution of student grievances (e.g. interpersonal conflict or harassment).

Standard 7.8: Mechanisms must be in place by which students can convey their needs and wants to the VEE. The VEE must provide students with a mechanism, anonymously if they wish, to offer suggestions, comments and complaints regarding compliance of the VEE with national and international legislation and the ESEVT Standards.

## **Area 8. Student assessment**

Standard 8.1: The VEE must ensure that there is a clearly identified structure within the VEE showing lines of responsibility for the assessment strategy to ensure coherence of the overall assessment regime and to allow the demonstration of progressive development across the programme towards entry-level competence.

Standard 8.2: The assessment tasks and grading criteria for each unit of study in the programme must be published, applied consistently, clearly identified and available to students in a timely manner well in advance of the assessment. Requirements to pass must be explicit.

The VEE must properly document the results of assessment and provide the students with timely feedback on their assessments.

Mechanisms for students to appeal against assessment outcomes must be explicit.

Standard 8.3: The VEE must have a process in place to review assessment outcomes, to change assessment strategies and to ensure the accuracy of the procedures when required. Programme learning outcomes covering the full range of professional knowledge, skills, competences and attributes must form the basis for assessment design and underpin decisions on progression.

Standard 8.4: Assessment strategies must allow the VEE to certify student achievement of learning objectives at the level of the programme and individual units of study.

The VEE must ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.

Standard 8.5: Methods of formative and summative assessment must be valid and reliable and comprise a variety of approaches. Direct assessment of clinical skills and Day One Competences (some of which may be on simulated patients), must form a significant component of the overall process of assessment. It must also include the quality control of the student logbooks in order to ensure that all clinical procedures, practical and hands-on training planned in the study programme have been fully completed by each individual student.

## **Area 9. Academic and support staff**

Standard 9.1: The VEE must ensure that all staff are appropriately qualified and prepared for their roles, in agreement with national and EU regulations and must apply fair and transparent processes for the recruitment and development of staff.

A formal training (including good teaching and evaluation practices, learning and e-learning resources, biosecurity and QA procedures) must be in place for all staff involved with teaching. Most academic staff (calculated as FTE) involved in veterinary training must be veterinarians. It is expected that more than 2/3 of the instruction that the students receive, as determined by student teaching hours, is delivered by qualified veterinarians.

Standard 9.2: The total number, qualifications and skills of all staff involved with the programme, including teaching staff, 'adjunct' staff, technical, administrative and support staff, must be sufficient and appropriate to deliver the educational programme and fulfil the VEE's mission.

A procedure must be in place to assess if the staff involved with teaching display competence and effective teaching skills in all relevant aspects of the curriculum that they teach, regardless of whether they are full or part time, residents, interns or other postgraduate students, adjuncts or off-campus contracted teachers.

Standard 9.3: Staff must be given opportunities to develop and extend their teaching and assessment knowledge and must be encouraged to improve their skills. Opportunities for didactic and pedagogic training and specialisation must be available. The VEE must clearly define systems of reward for teaching excellence in operation.

Academic positions must offer the security and benefits necessary to maintain stability, continuity, and competence of the academic staff. Academic staff must have a balanced

workload of teaching, research and service depending on their role. They must have reasonable opportunities and resources for participation in scholarly activities.

Standard 9.4: The VEE must provide evidence that it utilises a well-defined, comprehensive and publicised programme for the professional growth and development of academic and support staff, including formal appraisal and informal mentoring procedures.

Staff must have the opportunity to contribute to the VEE's direction and decision-making processes.

Promotion criteria for academic and support staff must be clear and explicit. Promotions for teaching staff must recognise excellence in, and (if permitted by the national or university law) place equal emphasis on all aspects of teaching (including clinical teaching), research, service and other scholarly activities.

Standard 9.5: A system for assessment of teaching staff must be in operation and must include student participation. Results must be available to those undertaking external reviews and commented upon in reports.

## **Area 10. Research programmes, continuing and postgraduate education**

Standard 10.1: The VEE must demonstrate significant and broad research activities of staff that integrate with and strengthen the veterinary degree programme through research-based teaching.

Standard 10.2: All students must be trained in scientific method and research techniques relevant to evidence-based veterinary medicine and must have opportunities to participate in research programmes.

Standard 10.3: The VEE must provide advanced postgraduate degree programmes, e.g. PhD, internships, residencies and continuing education programmes that complement and strengthen the veterinary degree programme and are relevant to the needs of the profession and society.

Standard 10.4: The VEE must have a system of QA to evaluate how research activities provide opportunities for student training and staff promotion, and how research approaches, methods and results are integrated into the veterinary teaching programmes.

## **Annex 1. EU Directive on the recognition of professional qualifications (Directive 2013/55/EU)**

All professional veterinary degrees offered in the European Union are required to meet certain 'minimum training requirements'. These are set out in Article 38 of the EU Directive 2013/55/EU as follows:

'The training of veterinarians shall comprise a total of at least five years of full-time theoretical and practical study, which may in addition be expressed with the equivalent ECTS credits, at a university or at a higher institute providing training recognised as being of an equivalent level, or under the supervision of a university, covering at least the study programme referred to in point 5.4.1 of Annex V (of Directive 2005/36/EC).

Training as a veterinarian shall provide an assurance that the professional in question has acquired the following knowledge and skills:

- (a) adequate knowledge of the sciences on which the activities of a veterinarian are based and of the Union law relating to those activities;
- (b) adequate knowledge of the structure, functions, behaviour and physiological needs of animals, as well as the skills and competences needed for their husbandry, feeding, welfare, reproduction and hygiene in general;
- (c) the clinical, epidemiological and analytical skills and competences required for the prevention, diagnosis and treatment of the diseases of animals, including anaesthesia, aseptic surgery and painless death, whether considered individually or in groups, including specific knowledge of the diseases which may be transmitted to humans;
- (d) adequate knowledge, skills and competences for preventive medicine, including competences relating to inquiries and certification;
- (e) adequate knowledge of the hygiene and technology involved in the production, manufacture and putting into circulation of animal feedstuffs or foodstuffs of animal origin intended for human consumption, including the skills and competences required to understand and explain good practice in this regard;
- (f) the knowledge, skills and competences required for the responsible and sensible use of veterinary medicinal products, in order to treat the animals and to ensure the safety of the food chain and the protection of the environment.'

## **Annex 2. List of subjects and Day One Competences**

*(as approved by ECCVT on 17 January 2019)*

### **Forewords**

A. Competence is a concept that integrates knowledge, skills and attitudes. Competence requires acquisition of technical skills but further involves applying relevant knowledge, and having the confidence and ability to transfer what has been learnt to a variety of contexts.

B. In order to facilitate for VEEs to meet the requirements of the overall basic veterinary competence that the EU has established it needs to be broken down to more specific “Day One Competences”: Overall basic veterinary competence is currently laid down in different pieces of the EU legislation, namely

- ✓ Directive 2005/36/EC amended by Directive 2013/55/EU (on the recognition of professional qualifications);
- ✓ Directive 2010/63/EU (on the protection of animals used for scientific purposes);
- ✓ Regulation 852/2004/EC (on the hygiene of foodstuffs) ;
- ✓ Regulation 853/2004/EC (on specific hygiene rules for food of animal origin);
- ✓ Regulation 854/2004/EC (on specific rules for the organisation of official controls on products of animal origin intended for human consumption)
- ✓ Regulation (EU) 2017/625 (on official controls)
- ✓ Regulation 1099/2009/EU (on the protection of animals at the time of killing) as amended by Regulation (EU) 2017/625;
- ✓ Regulation (EU) 2016/429 (on transmissible animal diseases and amending and repealing certain acts in the area of animal health); and
- ✓ Proposal on Regulation on veterinary medicinal products

C. Overall basic competence ought to encompass all references in the different pieces of the EU legislation to ensure consistency on the recognition of professional qualifications in European Union and beyond.

D. ‘Day One Competences’ is the minimum standard required and is the starting point for a variety of roles in the veterinary profession. After graduation, ongoing professional development will be needed in whichever field the new graduate decides to enter, and some roles may require postgraduate training and further formal qualifications (e.g. Diplome of a European College, PhD).

E. A new graduate who has achieved Day One Competences should be capable to independently perform appropriate entry-level tasks and duties of the veterinary profession and confident enough to practise veterinary medicine at a primary care level on their own, while knowing when it is appropriate to seek direction from more experienced colleagues. New graduates are likely to need more time to perform some procedures. Support and direction from more senior colleagues should be available.

F. Veterinary Education Establishments (VEEs) are responsible for developing the Day One Competences of their students and ensuring that they have met the competences by the time they graduate. They are greatly assisted in this by the practising arm of the veterinary profession, which provides Extramural Practical Training so that students can practise applying these competences in the workplace.

G. These Day One Competences are in agreement with the above-mentioned EU Directives, Regulations and Proposals related to veterinary professional qualifications and the following references:

- OIE recommendations on the Competencies of graduating veterinarians ('Day 1 graduates') to assure National Veterinary Services of quality<sup>1</sup>
- European Commission: A working document on the development of a common education and training framework to fulfil the requirements under the Directive<sup>2</sup>
- FVE & EAEVE report on European Veterinary Education in Animal Welfare, Science, Ethics and Law<sup>3</sup>
- Standards and Guidelines for Quality Assurance in the European Higher Education Area (2015)<sup>4</sup>
- Final Recommendations of the 4<sup>th</sup> OIE Global Conference on Veterinary Education<sup>5</sup>
- One Health approach as recognised by WHO<sup>6</sup> and OIE<sup>7</sup>

## 1. Day One Competences

1.1 Understand the ethical and legal responsibilities of the veterinarian in relation to animals under his/her care, the environment, clients, policies and society.

1.2 Demonstrate knowledge of the organisation, management and legislation related to a veterinary business economics and employment rights.

1.3 Promote, monitor and maintain health and safety in the veterinary setting; demonstrate knowledge of systems of quality assurance; apply principles of risk management to their practice.

1.4 Communicate effectively with clients, the public, professional colleagues and responsible authorities, using language appropriate to the audience concerned and in full respect of confidentiality and privacy.

1.5 Prepare accurate clinical and client records, and case reports when necessary, in a form satisfactory to colleagues and understandable by the public.

1.6 Work effectively as a member of a multi-disciplinary team in the delivery of services.

1.7 Understand the economic and emotional context in which the veterinary surgeon operates.

1.8 Be able to review and evaluate literature and presentations critically.

1.9 Understand and apply principles of clinical governance, and practise evidence-based veterinary medicine.

1.10 Use their professional capabilities to contribute to the advancement of veterinary knowledge and One Health concept, in order to improve animal health and welfare, the quality of animal care and veterinary public health.

1.11 Demonstrate ability to cope with incomplete information, deal with contingencies, and adapt to change.

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<sup>1</sup> [http://www.oie.int/fileadmin/Home/eng/Support\\_to\\_OIE\\_Members/Vet\\_Edu\\_AHG/DAY\\_1/DAYONE-B-ang-vC.pdf](http://www.oie.int/fileadmin/Home/eng/Support_to_OIE_Members/Vet_Edu_AHG/DAY_1/DAYONE-B-ang-vC.pdf)

<sup>2</sup> [http://ec.europa.eu/environment/chemicals/lab\\_animals/pdf/guidance/education\\_training/en.pdf](http://ec.europa.eu/environment/chemicals/lab_animals/pdf/guidance/education_training/en.pdf)

<sup>3</sup> [http://www.carodog.eu/wp-content/uploads/2014/10/full\\_report\\_aw\\_curriculum\\_adopted3.pdf](http://www.carodog.eu/wp-content/uploads/2014/10/full_report_aw_curriculum_adopted3.pdf)

<sup>4</sup> [http://www.enqa.eu/wp-content/uploads/2013/06/ESG\\_3edition-2.pdf](http://www.enqa.eu/wp-content/uploads/2013/06/ESG_3edition-2.pdf)

<sup>5</sup> [http://www.oie.int/eng/vet-education-conf2016/recommendations/A\\_Final\\_recommendations\\_Thailand\\_education.pdf](http://www.oie.int/eng/vet-education-conf2016/recommendations/A_Final_recommendations_Thailand_education.pdf)

<sup>6</sup> <http://www.who.int/features/qa/one-health/en/>

<sup>7</sup> <http://www.oie.int/en/for-the-media/onehealth/>

- 1.12 Demonstrate that they recognise personal and professional limits, and know how to seek professional advice, assistance and support when necessary.
- 1.13 Demonstrate an ability of lifelong learning and a commitment to learning and professional development. This includes recording and reflecting on professional experience and taking measures to improve performance and competence.
- 1.14 Take part in self-audit and peer-group review processes in order to improve performance.
- 1.15 Obtain an accurate and relevant history of the individual animal or animal group, and its/their environment.
- 1.16 Handle and restrain animal patients safely and with respect of the animal, and instruct others in helping the veterinarian perform these techniques.
- 1.17 Perform a complete clinical examination and demonstrate ability in clinical decision-making.
- 1.18 Develop appropriate treatment plans and administer treatment in the interests of the animals under their care with regard to the resources available.
- 1.19 Attend in an emergency and perform first aid in common animal species\*.
- 1.20 Assess the physical condition, welfare and nutritional status of an animal or group of animals and advise the client on principles of husbandry and feeding.
- 1.21 Collect, preserve and transport samples, select appropriate diagnostic tests, interpret and understand the limitations of the test results.
- 1.22 Communicate clearly and collaborate with referral and diagnostic services, including providing an appropriate history.
- 1.23 Understand the contribution that imaging and other diagnostic techniques can make in achieving a diagnosis. Use basic imaging equipment and carry out an examination effectively as appropriate to the case, in accordance with good health and safety practice and current regulations.
- 1.24 Recognise signs of possible notifiable, reportable and zoonotic diseases as well as abuse and take appropriate action, including notifying the relevant authorities.
- 1.25 Access the appropriate sources of data on licensed medicines.
- 1.26 Prescribe and dispense medicines correctly and responsibly in accordance with legislation and latest guidance.
- 1.27 Report suspected adverse reactions through the appropriate channel.
- 1.28 Apply principles of bio-security correctly.
- 1.29 Perform aseptic procedures appropriately.
- 1.30 Safely perform sedation, and general and regional anaesthesia; implement chemical methods of restraint.
- 1.31 Assess and manage pain.
- 1.32 Recognise when euthanasia is appropriate and perform it with respect of the animal, using an appropriate method, whilst showing sensitivity to the feelings of owners and others, with due regard to the safety of those present; advise on disposal of the carcass.
- 1.33 Perform a systematic gross post-mortem examination, record observations, sample tissues, store and transport them.
- 1.34 Perform ante-mortem inspection of animals destined for the food-chain, including paying attention to welfare aspects; correctly identify conditions affecting the quality and safety of products of animal origin, to exclude those animals whose condition means their products are unsuitable for the food-chain.
- 1.35 Perform inspection of food and feed including post-mortem inspection of food producing animals and inspection in the field of related food technology.
- 1.36 Advise on, and implement, preventive and eradication programmes appropriate to the species and in line with accepted animal health, welfare and public health standards.

## **2. Underpinning knowledge and understanding**

In order to be able to undertake their professional duties effectively, new veterinary graduates will need a breadth of underpinning knowledge and understanding of the biological, animal and social sciences and laws related to the animal industries. This will include, but is not restricted to, the following:

- 2.1 Understanding of, and competence in, the logical approaches to both scientific and clinical reasoning, the distinction between the two, and the strengths and limitations of each.
- 2.2 Research methods, the contribution of basic and applied research to veterinary science and implementation of 3Rs (Replacement, Reduction, Refinement).
- 2.3 The structure, function and behaviour of animals and their physiological and welfare needs.
- 2.4 A knowledge of the businesses related to animal breeding, production and keeping.
- 2.5 The aetiology, pathogenesis, clinical signs, diagnosis and treatment of the common diseases and disorders that occur in the common animal species\*.
- 2.6 Awareness of other diseases of international importance that pose a risk to national and international biosecurity and trade.
- 2.7 Legislation relating to animal care and welfare, animal movement, and notifiable and reportable diseases.
- 2.8 Medicines legislation and guidelines on responsible use of medicines, including responsible use of antimicrobials and antiparasitics.
- 2.9 The principles of disease prevention and the promotion of health and welfare.
- 2.10 Veterinary public health issues, e.g. epidemiology, transboundary epizootic diseases, zoonotic and food-borne diseases, emerging and re-emerging diseases, food hygiene and technology.
- 2.11 Principles of effective interpersonal interaction, including communication, leadership, management and team working.
- 2.12 The ethical framework within which veterinary surgeons should work, including important ethical theories that inform decision-making in professional and animal welfare-related ethics.

## **3. List of subjects**

The programme of studies leading to the evidence of formal qualifications in veterinary medicine shall include at least the subjects listed below.

Instruction in one or more of these subjects may be given as part of, or in association with, other courses.

Although all subjects are listed into one category, some of them relate to more than one category. The subjects linked to Professional Knowledge are included in the listed categories.

### **A. Basic Subjects**

- Medical physics
- Chemistry (inorganic and organic sections)
- Animal biology, zoology and cell biology
- Feed plant biology and toxic plants
- Biomedical statistics



## **B. Specific veterinary subjects**

### ***a. Basic Sciences:***

- Anatomy, histology and embryology
- Physiology
- Biochemistry
- General and molecular genetics
- Pharmacology, pharmacy and pharmacotherapy
- Pathology
- Toxicology
- Parasitology
- Microbiology
- Immunology
- Epidemiology
- Information literacy and data management
- Professional ethics and communication
- Animal health economics and practice management
- Animal ethology
- Animal welfare
- Animal nutrition

### ***b. Clinical Sciences:***

- Obstetrics, reproduction and reproductive disorders
- Diagnostic pathology
- Medicine
- Surgery
- Anaesthesiology
- Clinical practical training in common animal species\*
- Preventive medicine
- Diagnostic imaging
- Therapy in common animal species\*
- Propaedeutics of common animal species\*

### ***c. Animal production:***

- Animal production, including breeding, husbandry and economics
- Herd health management

### ***d. Food Safety and Quality, Veterinary Public Health and One Health Concept:***

- Veterinary legislation including official controls, regulatory veterinary services, forensic veterinary medicine and certification
- Control of food, feed and animal by-products
- Zoonoses
- Food hygiene and food microbiology
- Food technology

\*Common animal species as described in the list of Indicators of the ESEVT SOP.

The content and distribution of the theoretical and practical training among the various groups of subjects must be balanced and coordinated in such a way that the knowledge and experience may be acquired in a manner which will enable the veterinarian to perform all their duties.

## **Annex 3. List of European Standards for Quality Assurance in the European Higher Education Area**

*(as approved by the European Ministerial Conference on 15 May 2015)*

### **Part 1: European standards and guidelines for internal quality assurance within higher education institutions**

1.1 Policy and procedures for quality assurance: Institutions should have a policy and associated procedures for the assurance of the quality and standards of their programmes and awards. They should also commit themselves explicitly to the development of a culture, which recognises the importance of quality, and quality assurance, in their work. To achieve this, institutions should develop and implement a strategy for the continuous enhancement of quality. The strategy, policy and procedures should have a formal status and be publicly available. They should also include a role for students and other stakeholders.

1.2 Approval, monitoring and periodic review of programmes and awards: Institutions should have formal mechanisms for the approval, periodic review and monitoring of their programmes and awards.

1.3 Assessment of students: Students should be assessed using published criteria, regulations and procedures which are applied consistently.

1.4 Quality assurance of teaching staff: Institutions should have ways of satisfying themselves that staff involved with the teaching of students are qualified and competent to do so. They should be available to those undertaking external reviews, and commented upon in reports.

1.5 Learning resources and student support: Institutions should ensure that the resources available for the support of student learning are adequate and appropriate for each programme offered.

1.6 Information systems: Institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes of study and other activities.

1.7 Public information: Institutions should regularly make public up to date, impartial and objective information, both quantitative and qualitative, about the programmes and awards they are offering.

### **Part 2: European standards for the external quality assurance of higher education**

2.1 Use of internal quality assurance procedures: External quality assurance procedures should take into account the effectiveness of the internal quality assurance processes described in Part 1 of the European Standards and Guidelines.

2.2 Development of external quality assurance processes: The aims and objectives of quality assurance processes should be determined before the processes themselves are developed, by all those responsible (including higher education institutions) and should be published with a description of the procedures to be used.

2.3 Criteria for decisions: Any formal decisions made as a result of an external quality assurance activity should be based on explicit published criteria that are applied consistently.

2.4 Processes fit for purpose: All external quality assurance processes should be designed specifically to ensure their fitness to achieve the aims and objectives set for them.

2.5 Reporting: Reports should be published and should be written in a style, which is clear and readily accessible to its intended readership. Any decisions, commendations or recommendations contained in reports should be easy for a reader to find.

2.6 Follow-up procedures: Quality assurance processes which contain recommendations for action or which require a subsequent action plan, should have a predetermined follow-up procedure which is implemented consistently.

2.7 Periodic reviews: External quality assurance of institutions and/or programmes should be undertaken on a cyclical basis. The length of the cycle and the review procedures to be used should be clearly defined and published in advance.

2.8 System-wide analyses: Quality assurance agencies should produce from time to time summary reports describing and analysing the general findings of their reviews, evaluations, assessments etc.

### **Part 3: European standards for external quality assurance agencies**

3.1 Use of external quality assurance procedures for higher education: The external quality assurance of agencies should take into account the presence and effectiveness of the external quality assurance processes described in Part 2 of the European Standards and Guidelines.

3.2 Official status: Agencies should be formally recognised by competent public authorities in the European Higher Education Area as agencies with responsibilities for external quality assurance and should have an established legal basis. They should comply with any requirements of the legislative jurisdictions within which they operate.

3.3 Activities: Agencies should undertake external quality assurance activities (at institutional or programme level) on a regular basis.

3.4 Resources: Agencies should have adequate and proportional resources, both human and financial, to enable them to organise and run their external quality assurance process(es) in an effective and efficient manner, with appropriate provision for the development of their processes and procedures.

3.5 Mission statement: Agencies should have clear and explicit goals and objectives for their work, contained in a publicly available statement.

3.6 Independence: Agencies should be independent to the extent both that they have autonomous responsibility for their operations and that the conclusions and recommendations made in their reports cannot be influenced by third parties such as higher education institutions, ministries or other stakeholders.

3.7 External quality assurance criteria and processes used by the agencies: The processes, criteria and procedures used by agencies should be pre-defined and publicly available. These processes will normally be expected to include:

- ) a self-assessment or equivalent procedure by the subject of the quality assurance process;
- ) an external assessment by a group of experts, including, as appropriate, (a) student

member(s), and site visits as decided by the agency;

- ) publication of a report, including any decisions, recommendations or other formal outcomes;
- ) a follow-up procedure to review actions taken by the subject of the quality assurance process in the light of any recommendations contained in the report.

3.8 Accountability procedures: Agencies should have in place procedures for their own accountability.

## **Annex 4. ESEVT Indicators**

*(as approved by the EAEVE Executive Committee on 29 May 2019)*

### **Introduction**

1. Indicators are to be used in a non-prescriptive way in the evaluation of a VEE. They reflect its given situation at the time of the Visitation, allowing for EAEVE to compare between VEEs and to recognise trends.
2. The Indicators are calculated from data which are the means of the last three complete academic years, in order to smooth the annual variations and to avoid temporary improvements restricted to the period of the Visitation.
3. In case of tracking (options), the relevant Indicators (I4 to I7) are calculated on the basis of the teaching provided to all undergraduate students, independently of their track. The specific values for each track are provided as an annex.
4. A specific Indicator must not be interpreted in a strictly mathematical and isolated sense, but in the light of all other Indicators and data. For instance, for a specific species, a low number of intra-mural patients may be compensated by a high number of extra-mural patients seen by students under the supervision of a staff member or otherwise qualified and quality assured veterinarians.
5. The recommended minimal values established by ECOVE are equal to the 20<sup>th</sup> percentile, i.e. the value below which 20% of the values from VEEs with Accreditation status are currently found. These minimal values do not serve as lower threshold levels but are interpreted as a complex set of data in the light of all other observations made.
6. The Indicators are calculated by using the relevant Excel file available on the EAEVE website. The completed Excel file must be sent to the Coordinator and to the EAEVE Office.
7. The complete list of Indicators is also provided by the VEE on this standardised format at the end of the SER. These proposed Indicators are reviewed by the Coordinator during the site Visitation and the copy validated by the Visitation Team is incorporated in the Visitation Report.

### **List of Indicators**

#### **Staff and students**

I1: n° of FTE academic staff involved in veterinary training<sup>1</sup> / n° of undergraduate students<sup>2</sup>

I2: n° of FTE veterinarians involved in veterinary training<sup>3</sup> / n° of students graduating annually<sup>4</sup>

I3: n° of FTE support staff involved in veterinary training<sup>5</sup> / n° of students graduating annually<sup>4</sup>

#### **Types of training**

I4: n° of hours of practical (non-clinical) training<sup>6</sup>

I5: n° of hours of clinical training<sup>7</sup>

I6: n° of hours of FSQ and VPH training<sup>8</sup>

I7: n° of hours of extra-mural practical training in FSQ and VPH<sup>9</sup>

**Patients available for intra-mural clinical training**

I8: n° of companion animal patients seen intra-murally<sup>10</sup> / n° of students graduating annually<sup>4</sup>

I9: n° of ruminant and pig patients seen intra-murally<sup>11</sup> / n° of students graduating annually<sup>4</sup>

I10: n° of equine patients seen intra-murally<sup>12</sup> / n° of students graduating annually<sup>4</sup>

I11: n° of rabbit, rodent, bird and exotic patients seen intra-murally<sup>13</sup> / n° of students graduating annually<sup>4</sup>

**Animals/herds/units available for extra-mural clinical training**

I12: n° of companion animal patients seen extra-murally<sup>14</sup> / n° of students graduating annually<sup>4</sup>

I13: n° of individual ruminants and pig patients seen extra-murally<sup>15</sup> / n° of students graduating annually<sup>4</sup>

I14: n° of equine patients seen extra-murally<sup>16</sup> / n° of students graduating annually<sup>4</sup>

I15: n° of visits to ruminant and pig herds<sup>17</sup> / n° of students graduating annually<sup>4</sup>

I16: n° of visits to poultry, rabbit, fish and bee units<sup>18</sup> / n° of students graduating annually<sup>4</sup>

**Necropsies available for clinical training**

I17: n° of companion animal necropsies<sup>19</sup> / n° of students graduating annually<sup>4</sup>

I18: n° of ruminant and pig necropsies<sup>20</sup> / n° of students graduating annually<sup>4</sup>

I19: n° of equine necropsies<sup>21</sup> / n° of students graduating annually<sup>4</sup>

I20: n° of rabbit, rodent, bird and exotic pet necropsies<sup>22</sup> / n° of students graduating annually<sup>4</sup>

**Post-graduate degrees**

I21: n° of FTE specialised veterinarians involved in veterinary training<sup>23</sup> / n° of students graduating annually<sup>4</sup>

I22: n° of PhD-students graduating annually<sup>24</sup> / n° of students graduating annually<sup>4</sup>

## Appendix explaining the calculation of the indicators

**All values represent an annual average calculated from the last 3 complete academic years. All values (except I22) concern the training of undergraduate veterinary students.**

<sup>1</sup> Total number of full-time equivalent (FTE) academic staff in veterinary training (e.g. 100 persons employed full-time (100%) + 50 persons employed half-time (50%) + 10 persons employed quarter-time (25%) = 127.5 FTEs).

Post-graduate students who are registered for a specialised or doctoral degree (i.e. interns, residents, PhD students or equivalent postgraduate students) are not included in these figures unless they are paid and trained to regularly perform structured practical and/or clinical training (for a minimal of 10% and for a maximum of 50% of their annual workload) and are supervised by permanent academic staff (e.g. 10 residents employed half-time (50%) for clinical training of undergraduate students + 8 PhD students employed quarter-time (25%) for practical training of undergraduate students = 7 FTEs).

Researchers, invited speakers, unpaid lecturers, practitioners supervising EPT and other persons who only occasionally contribute to the training of undergraduate students are not included in these figures but should be reported for information in the SER.

<sup>2</sup> Total number of undergraduate veterinary students. These students have to be officially registered in the database of the VEE.

<sup>3</sup> Total number of FTE veterinarians (DVM or equivalent degree) in veterinary training.

<sup>4</sup> Total number of graduate veterinary students. These students have to be officially granted the veterinary degree (i.e. at least five years of full-time theoretical and practical study in agreement with the EU Directives) provided by the VEE being evaluated.

<sup>5</sup> Total number of FTE support staff involved in veterinary training. Only support staff who are dedicated to administrative, teaching or research tasks related to students and to care of facilities, equipment or animals in the VEE are taken into account in the Indicators.

<sup>6\*</sup> Total number of hours of supervised practical (non-clinical) training. It includes inter alia laboratory experiments, microscopic examination of histological and pathological specimens, work on documents and idea-formulation without the handling of animals (e.g. assay work, clinical case studies, handling of herd-health monitoring programmes, risk assessment for VPH, computer-aided exercises), work on normal animals (e.g. physiology, ante mortem inspection), work on cadavers, carcasses and organs (e.g. dissection, post mortem inspection, Food Safety and Quality).

<sup>7\*</sup> Total number of hours of supervised clinical training. This training strictly focuses on hands-on procedures by students, which include the relevant diagnostic, preventive and therapeutic activities in the different species. It concerns individual patients, herds and production units and normal animals in a clinical environment.

Propaedeutic, diagnostic necropsies, therapeutic and surgical hands-on activities on cadavers, organs and animal dummies are also classified as clinical training but may not replace the hands-on training on live patients. Simply observing the teacher doing clinical tasks is not considered as clinical training.

<sup>8\*</sup> Total number of hours of theoretical and practical training in Food Safety and Quality (FSQ) and Veterinary Public Health (VPH).

<sup>9\*</sup> Total number of hours of extra-mural practical training in FSQ and VPH (e.g. slaughterhouses, meat inspections, VPH institutes).

<sup>10\*\*</sup> Total number of companion animal (dogs and cats) patients seen at the VTH. Each patient has to be officially recorded in the electronic patient record system of the VEE and has to be individually examined/treated by at least 1 student under the supervision of at least 1 member of staff.

<sup>11\*\*</sup> Total number of ruminant and pig patients seen at the teaching hospital/clinic. Each patient has to be officially recorded in the electronic patient record system of the VEE and has to be individually examined/treated by at least 1 student under the supervision of at least 1 member of staff.

<sup>12\*\*</sup> Total number of equine patients seen at the teaching hospital/clinic. Each patient has to be officially recorded in the electronic patient record system of the VEE and has to be individually examined/treated by at least 1 student under the supervision of at least 1 member of staff.

<sup>13\*\*</sup> Total number of rabbit, rodent, bird and exotic pet patients seen at the VTH. Each patient has to be officially recorded in the electronic patient record system of the VEE and has to be individually examined/treated by at least 1 student under the supervision of at least 1 member of staff.

<sup>14\*\*</sup> Total number of companion animal (dogs and cats) patients seen extra-murally (e.g. dispensaries). Each patient has to be officially recorded and has to be individually examined/treated by at least 1 student under the supervision of at least 1 member of staff. Patients seen during EPT are not taken into account in the Indicators.

<sup>15\*\*</sup> Total number of individual ruminant and pig patients seen extra-murally (e.g. ambulatory clinics). Each patient has to be officially recorded and has to be individually examined/treated by at least 1 student under the supervision of at least 1 member of staff. Patients seen during EPT are not taken into account in the Indicators.

<sup>16\*\*</sup> Total number of equine patients seen extra-murally (e.g. training centres). Each patient has to be officially recorded and has to be individually examined/treated by at least 1 student under the supervision of at least 1 member of staff. Patients seen during EPT are not taken into account in the Indicators.

<sup>17</sup> Total number of visits to ruminant and pig herds under the close supervision of academic staff.

<sup>18</sup> Total number of visits to poultry, farmed rabbit, fish and bee units under the close supervision of academic staff.

<sup>19</sup> Total number of post-mortem examinations carried out on whole carcasses of companion animals (dogs and cats).



<sup>20</sup> Total number of post-mortem examinations carried out on whole carcasses of ruminants and pigs.

<sup>21</sup> Total number of post-mortem examinations carried out on whole carcasses of equines.

<sup>22</sup> Total number of post-mortem examinations carried out on whole carcasses of rabbits, rodents, birds and exotic pets. Necropsies of other animals (e.g. sea mammals, wild animals) must be mentioned in the SER in table 5.1.6. in the item 'others'.

<sup>23</sup> Total number of FTE specialised veterinarians in veterinary training. The specialised veterinary status must be officially recognised by the relevant National Accreditation body for national specialisations and/or by the European and/or American Board of Veterinary Specialisation (EBVS/ABVS).

<sup>24</sup> Total number of graduate students who are officially granted a third cycle degree (PhD or equivalent doctoral degrees in agreement with the relevant EU directives).

\* The number of hours given in items 6 to 9 must apply to ALL undergraduate veterinary students, independently of electives/tracking. Specific data for each track (i.e. pre-specialisation) may be given in an annex.

\*\* Each live animal having received a given procedure (e.g. vaccination, surgery) or treated for one specific clinical episode during a year is counted as 1 single patient, even if it has been examined/treated by several departments/units/clinics (including revisions). Only other visits of the same animal with a different condition would be considered as a different patient in the given year.

## **Annex 5. Fees for the ESEVT**

*(as approved by the EAEVE General Assembly on 30 September 2021)*

### **1. Merged Evaluation and Membership Fee (MEF)**

The merged evaluation fee covers the EAEVE membership fee and the ESEVT evaluation fees, i.e. costs related to the VEE's ESEVT evaluation during the 7-year cycle (including the Interim Report and the Appeal/complaint process).

The merged evaluation fee is 4.200 €/year for Full members and 2.700 € for Candidate and Associate members and must be paid by the first of April of each year at the latest.

VEEs not in order of payment are neither allowed to vote at the General Assembly nor to be evaluated by the ESEVT.

### **2. Evaluation fees separate from the Merged Evaluation Fee (MEF)**

- ) Re-visitation fee: 3000 €
- ) Preliminary Visitation fee: 5000 €

## **Annex 6. Template and guidelines for the writing of the SER**

*(as approved by the EAEVE Executive Committee on 29 September 2021)*

### ***Forewords (to be read before the writing of the SER)***

*The SER is the cornerstone of the evaluation process. It must be the result of an in-depth review of the VEE and the education and training it provides to prepare its students to qualify to join the veterinary profession.*

*It is strongly recommended that the preparation of the SER begins about one year before the Visitation at the latest, involves key members of staff in its preparation and is approved by the VEE's governing body. **Not less than 2 months before the Visitation, the SER (and the SER Appendices) must be sent by the VEE to all members of the Visitation Team and to the EAEVE Office by e-mail (electronic version in PDF and Word format), and it is up to the Visitors to decide whether they would like to receive a hard copy of the document in addition to the e-copy (it is the duty of the Liaison Officer to enquire about the Visitors' preference in this respect before the SER due date). The EAEVE Office does not need to receive a hard copy of the SER.***

*The SER must be concise (**maximum 100 pages, without the appendices, written in Times New Roman font, size 12, single spacing**), complete, accurate and written in English in agreement with the ESEVT template. An inadequate SER may be considered by ECOVE as a Major Deficiency, e.g. non-compliance with Standard 1.5.*

*All Standards must be addressed with Factual Information, Comments (e.g. subjective information, current limiting factors of improvement) and Suggestions for Improvement (e.g. list of desired/planned/ongoing changes in descending order of importance). All the questions in the template must be answered. If there is no activity in the VEE which corresponds to the question, 'not applicable' must be stated. **The term 'student' used alone means undergraduate student.***

***The texts in italic in this template must be deleted in the final copy of the SER.***

*Long lists of explanatory material and extracts of official texts must be excluded from the core SER and provided as appendices (with cross-reference in the core SER) or provided during the Visitation in the Team room.*

*The SER and the Visitation Report, which are considered confidential until the final decision of ECOVE, are eventually published on the websites of the VEE, EAEVE and DEQAR.*

### **Contents of the SER**

Introduction

Area 1. Objectives, Organisation and QA Policy

Area 2. Finances

Area 3. Curriculum

Area 4. Facilities and equipment

Area 5. Animal resources and teaching material of animal origin

Area 6. Learning resources  
Area 7. Student admission, progression and welfare  
Area 8. Student assessment  
Area 9. Academic and support staff  
Area 10. Research programmes, continuing and postgraduate education  
List of ESEVT Indicators  
Glossary  
List of appendices

## **Introduction**

*Brief history of the VEE and of its previous ESEVT Visitations (if any)*

*Main features of the VEE*

*Brief summary of the main developments since the last Visitation (or, if there has not been a previous one, in the period since the veterinary degree programme began)*

*Major problems encountered by the VEE (whether resolved or not)*

*Version and date of the ESEVT SOP which is valid for the Visitation*

## **Area 1. Objectives, Organisation and QA Policy**

**Standard 1.1: The VEE must have as its main objective the provision, in agreement with the EU Directives and ESG recommendations, of adequate, ethical, research-based, evidence-based veterinary training that enables the new graduate to perform as a veterinarian capable of entering all commonly recognised branches of the veterinary profession and to be aware of the importance of lifelong learning.**

**The VEE must develop and follow its mission statement which must embrace all the ESEVT Standards.**

*Description of the mission statement and the objectives*

*Description of how the VEE ensures that the provided core curriculum enables all new graduates to perform as a veterinarian capable of entering all commonly recognised branches of the veterinary profession*

**Standard 1.2: The VEE must be part of a university or a higher education institution providing training recognised as being of an equivalent level and formally recognised as such in the respective country.**

**The person responsible for the veterinary curriculum and the person(s) responsible for the professional, ethical, and academic affairs of the Veterinary Teaching Hospital (VTH) must hold a veterinary degree.**

**The decision-making process, organisation and management of the VEE must allow implementation of its strategic plan and of a cohesive study programme, in compliance**

**with the ESEVT Standards.**

*Details of the VEE, i.e. official name, address, phone number, E-mail and website addresses, VEE's Head, official authority overseeing the VEE*

*Organisational chart (diagram) of the VEE with a brief description of the decision-making process*

*List of departments/units/clinics with a very brief description of their composition and management (further information may be provided in the appendices)*

*List of the councils/boards/committees with a very brief description of their composition/function/responsibilities and implication of staff, students and stakeholders (further information may be provided in the appendices)*

*Description of the formal collaborations with other VEEs*

*Name and degrees of the person(s) responsible for the veterinary curriculum and for the professional, ethical, and academic affairs of the VTH*

**Standard 1.3: The VEE must have a strategic plan, which includes a SWOT analysis of its current activities, a list of objectives, and an operating plan with a timeframe and indicators for its implementation.**

*Summary of the VEE's strategic plan with an updated SWOT analysis (Strengths, Weaknesses, Opportunities and Threats) (the full Strategic Plan may be provided in the appendices)*

*Summary of the VEE Operating Plan with timeframe and indicators of achievement of its objectives*

**Standard 1.4: The VEE must have a policy and associated written procedures for the assurance of the quality and standards of its programmes and awards. It must also commit itself explicitly to the development of a culture which recognises the importance of quality, and quality assurance, within their VEE. To achieve this, the VEE must develop and implement a strategy for the continuous enhancement of quality. The development and implementation of the VEE's strategy must include a role for students and other stakeholders, both internal and external, and the strategy must have a formal status and be publicly available.**

*Description of the global policy and strategy of the VEE for outcome assessment and Quality Assurance (QA), in order to demonstrate that the VEE:*

- ) has a culture of QA and continued enhancement of quality;*
- ) operates cyclical, sustainable and transparent outcome assessment, QA and quality enhancement mechanisms;*
- ) collect, analyse and use relevant information from internal and external sources for the effective management of their programmes and activities (teaching, research, services);*
- ) informs regularly staff, students and stakeholders and involves them in the QA processes;*
- ) closes the loop of any QA Plan-Do-Check-Adjust (PDCA) cycles;*
- ) is compliant with ESG Standards.*

**Standard 1.5: The VEE must provide evidence that it interacts with its stakeholders and the wider society. Such public information must be clear, objective and readily accessible; the information must include up-to-date information about the study programme, views and employment destinations of past students as well as the profile of the current student population.**

**The VEE's website must mention the ESEVT VEE's status and its last Self Evaluation Report and Visitation Report must be easily available for the public.**

*Description of how the VEE informs stakeholders and the public on:*

- ) its objectives,
- ) its education, research and teaching activities,
- ) employment destinations of past students
- ) profile of the current student population

*Description of how to access to the ESEVT VEE's status and to the last ESEVT Self Evaluation Report and Visitation Report on the VEE's website*

**Standard 1.6: The VEE must monitor and periodically review its activities, both quantitative and qualitative, to ensure that they achieve the objectives set for them and respond to the needs of students and society. The VEE must make public how this analysis of information has been utilised in the further development of its activities and provide evidence as to the involvement of both students and staff in the provision, analysis and implementation of such data.**

**Any action planned or taken as a result of this data analysis must be communicated to all those concerned.**

*Description of how (procedures) and by who (description of the committee structure) the strategic plan, the organisation, the activities and the QA policy are decided, communicated to staff, students and stakeholders, implemented, assessed and revised*

**Standard 1.7: The VEE must undergo external review through the ESEVT on a cyclical basis. Evidence must be provided of such external evaluation with the assurance that the progress made since the last ESEVT evaluation was linked to a continuous quality assurance process.**

*Date of the last ESEVT Visitation and description on how the deficiencies have been corrected and how it has been used to enhance quality*

Comments on Area 1

Suggestions for improvement in Area 1

## **Area 2. Finances**

**Standard 2.1: Finances must be demonstrably adequate to sustain the requirements for the VEE to meet its mission and to achieve its objectives for education, research and**

**services. The description must include both expenditures (separated into personnel costs, operating costs, maintenance costs and equipment) and revenues (separated into public funding, tuition fees, services, research grants and other sources).**

*Description of the global financial process of the VEE*

*% of margin paid as overhead to the official authority overseeing the VEE on revenues from services and research grants*

*Annual tuition fee for national and international students*

Table 2.1.1. Annual expenditures during the last 3 academic years (in Euros)

| <i>Area of expenditure</i> | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|----------------------------|------------|-------------|-------------|-------------|
| <i>Personnel</i>           |            |             |             |             |
| <i>Operating costs</i>     |            |             |             |             |
| <i>Maintenance costs</i>   |            |             |             |             |
| <i>Equipment</i>           |            |             |             |             |
| <i>Total expenditure</i>   |            |             |             |             |

*\* The last full academic year prior to the Visitation*

Table 2.1.2. Annual revenues during the last 3 academic years (in Euros)

| <i>Revenues source</i>                 | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|--|------------|-------------|-------------|-------------|
| <i>Public authorities</i>              |            |             |             |             |
| <i>Tuition fee (standard students)</i> |            |             |             |             |
| <i>Tuition fee (full fee students)</i> |            |             |             |             |
| <i>Clinical services</i>               |            |             |             |             |
| <i>Diagnostic services</i>             |            |             |             |             |
| <i>Other services</i>                  |            |             |             |             |
| <i>Research grants</i>                 |            |             |             |             |
| <i>Continuing Education</i>            |            |             |             |             |
| <i>Donations</i>                       |            |             |             |             |
| <i>Other sources**</i>                 |            |             |             |             |
| <i>Total revenues</i>                  |            |             |             |             |

*\*\* Please specify*

Table 2.1.3. Annual balance between expenditures and revenues (in Euros)

| <i>Academic year</i> | <i>Total expenditures</i> | <i>Total revenues</i> | <i>Balance***</i> |
|----------------------|---------------------------|-----------------------|-------------------|
| <i>AY-2</i>          |                           |                       |                   |
| <i>AY-1</i>          |                           |                       |                   |
| <i>AY*</i>           |                           |                       |                   |

*\*\*\* Total revenues minus total expenditures*

*PS Tables 2.1.1., 2.1.2. and 2.1.3. may be replaced by the official financial reports of the VEE (translated in English) for the last three academic years*

*Estimation of the utilities (e.g. water, electricity, gas, fuel) and other expenditures directly paid by the official authority and not included in the expenditure tables*

**Standard 2.2: Clinical and field services must function as instructional resources. Instructional integrity of these resources must take priority over financial self-sufficiency of clinical services operations.**

**The VEE must have sufficient autonomy in order to use the resources to implement its strategic plan and to meet the ESEVT Standards.**

*Description of the modus operandi for the financial management of the clinical and field services*

*Degree of autonomy of the VEE on the financial process*

**Standard 2.3: Resources allocation must be regularly reviewed to ensure that available resources meet the requirements.**

*List of the ongoing and planned major investments for developing, improving and/or refurbishing facilities and equipment, and origin of the funding*

*Prospected expenditures and revenues for the next 3 academic years*

*Description of how (procedures) and by who (description of the committee structure) expenditures, investments and revenues are decided, communicated to staff, students and stakeholders, implemented, assessed and revised*

Comments on Area 2

Suggestions for improvement in Area 2

### **Area 3. Curriculum**

#### ***Definitions***

***Student:*** undergraduate student.

***Core subject:*** compulsory subject taken by every student.

***Curriculum:*** a detailed description of the study programme including theoretical, practical and clinical training.

***Electives:*** each student must select from a list of possible subjects; the inherent nature of an elective is that students make a decision and select; however, the total number of hours to be taken by each student out of the various subject groups should be stated.

***EPT:*** External Practical Training. These are training periods that are an integral part of the curriculum, but which are taken outside the VEE and under the supervision of a non-academic teacher (e.g. a practitioner).

***Lectures:*** theoretical teaching given to an entire or partial group of students. Teaching may be with or without the use of teaching aids or of demonstration animals or specimens. The essential characteristic is that there is no hands-on involvement of the students in the material discussed.

***Seminars:*** (sometimes called tutorials or supervised group work): teaching sessions directed towards a smaller group of students during which they work on their own, or as a team, on part of the theoretical aspects, prepared from manuscript notes, photocopied documents, articles and bibliographic references. Information is illustrated and knowledge extended by the presentation of audio-visual material, exercises, discussions and, if possible, case work.

***Study programme:*** an undergraduate programme leading to the degree of veterinarian.



**Supervised self-learning:** *it includes sessions of individual students making use of defined teaching material provided by the VEE with support from staff, if requested by the students, and with a final assessment (e.g. e-learning).*

**Laboratory and desk-based work:** *it includes teaching sessions where students themselves actively perform laboratory experiments, and use microscopes for the examination of specimens. It also includes work on documents and idea-formulation without the handling of animals, organs, objects or products (e.g. essay work, clinical case studies, handling of herd-health monitoring programmes, risk-assessment computer-aided exercises).*

**Non-clinical animal work:** *These are teaching sessions where students themselves work on normal animals, on objects, dummies, products, carcasses etc. (e.g. animal husbandry, ante mortem and post mortem inspection, food hygiene, etc.) and perform dissection. The use of a clinical studies labs (skill labs) with the inclusion of models and equipment designed to realistically mimic surgical and other “hands on” techniques, is included here.*

**Clinical work.** *These are strictly hands-on procedures by students both in the intra- and extramural clinical rotations and in the ambulatory clinics under the supervision of an academic teacher; it includes work on normal animals in a clinical environment, on organs and clinical subjects including individual patients and herds, making use of the relevant diagnostic data. Surgery and propaedeutical hands-on work on organ systems and on cadavers to practice clinical techniques, and diagnostic pathology are also classified as clinical work.*

**NB: If a VEE offers more than one study programme to become veterinarian, e.g. in different languages or in collaboration with other VEEs, all study programmes and respective curricula must be described separately in this Chapter 3. Similarly, if a VEE implements a tracking (elective) system in its study programme, it should provide a clear explanation of the tracking system in this Chapter.**

**Standard 3.1: The curriculum must be designed, resourced and managed to ensure all graduates have achieved the graduate attributes expected to be fully compliant with the EU Directive 2005/36/EC (as amended by directive 2013/55/EU) and its Annex V.4.1. The curriculum must include the subjects (input) and must allow the acquisition of the Day One Competences (output) listed in Annex 2. This concerns Basic Sciences, Clinical Sciences in companion animals (including equine and exotic pets), Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management), Food Safety and Quality, and Professional Knowledge.**

*Description of the educational aims of the VEE and the general strategy for the design, resources and management of the curriculum*

*Description of the legal constraints imposed on curriculum by national/regional legislations and the degree of autonomy that the VEE has to change the curriculum*

*Description of how curricular overlaps, redundancies, omissions, and lack of consistency, transversality and/or integration of the curriculum are identified and corrected.*

Table 3.1.1. Curriculum hours in each academic year taken by each student

| Academic years* | A | B | C | D | E | F | G | H |
|-----------------|---|---|---|---|---|---|---|---|
| Year 1          |   |   |   |   |   |   |   |   |
| Year 2          |   |   |   |   |   |   |   |   |
| Year 3          |   |   |   |   |   |   |   |   |
| Year 4          |   |   |   |   |   |   |   |   |
| Year 5          |   |   |   |   |   |   |   |   |

Year 6

*A: lectures; B: seminars; C: supervised self-learning; D: laboratory and desk based work, E: non-clinical animal work; F: clinical animal work; G: others (specify); H: total*

*\* An academic year may be subdivided into 2 semesters*

Table 3.1.2. Curriculum hours taken by each student

| <i>Subjects</i> | <i>A</i> | <i>B</i> | <i>C</i> | <i>D</i> | <i>E</i> | <i>F</i> | <i>G</i> | <i>H</i> |
|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|
|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|

***Basic subjects***

*Medical physics*

*Chemistry (inorganic and organic sections)*

*Animal biology, zoology and cell biology*

*Feed plant biology and toxic plants*

*Biomedical statistics*

***Specific veterinary subjects***

***Basic Sciences***

*Anatomy, histology and embryology*

*Physiology*

*Biochemistry*

*General and molecular genetics*

*Pharmacology, pharmacy and pharmacotherapy*

*Pathology*

*Toxicology*

*Parasitology*

*Microbiology*

*Immunology*

*Epidemiology*

*Information literacy and data management*

*Professional ethics and communication*

*Animal health economics and practice management*

*Animal ethology*

*Animal welfare*

*Animal nutrition*

***Clinical Sciences***

*Obstetrics, reproduction and reproductive disorders*

*Diagnostic pathology*

*Medicine*

*Surgery*

*Anesthesiology*

*Clinical practical training in common animal species*

*Preventive medicine*

*Diagnostic imaging*

*Therapy in common animal species*

*Propaedeutics of common animal species*

***Animal Production***

*Animal Production, including breeding, husbandry and economics*

*Herd health management*

***Food Safety and Quality, Veterinary Public Health and One Health Concept***

*Veterinary legislation including official controls and regulatory veterinary services, forensic veterinary medicine and certification*

*Control of food, feed and animal by-products*

*Zoonoses*

*Food hygiene and food microbiology*

*Food technology*

*A: lectures; B: seminars; C: supervised self-learning; D: laboratory and desk based work, E: non-clinical animal work; F: clinical animal work; G: others (specify); H: total*

*NB: Subjects linked to **Professional Knowledge** are incorporated within the subcategories and include inter alia Information literacy and data management, Professional ethics and communication, Animal health economics and practice management, Clinical practical training in common animal species, Herd health management and Veterinary legislation.*

Table 3.1.3. Practical rotations under academic staff supervision (excluding EPT)

| <i>Types</i>                     | <i>List of practical rotations<br/>(Disciplines/Species)</i> | <i>Duration<br/>(weeks)</i> | <i>Year of<br/>programme</i> |
|----------------------------------|--|-----------------------------|------------------------------|
| <i>Intra-mural clinics (VTH)</i> |  |                             |                              |
| <i>Ambulatory clinics</i>        |  |                             |                              |
| <i>Herd Health Management</i>    |  |                             |                              |
| <i>FSQ &amp; VPH</i>             |  |                             |                              |
| <i>Electives</i>                 |  |                             |                              |
| <i>Other (specify)</i>           |  |                             |                              |

Table 3.1.4. Curriculum hours taken as electives for each student

| <i>Electives</i>  | <i>A</i> | <i>B</i> | <i>C</i> | <i>D</i> | <i>E</i> | <i>F</i> | <i>G</i> | <i>H</i> |
|---|----------|----------|----------|----------|----------|----------|----------|----------|
| <i>Basic subjects</i>   |          |          |          |          |          |          |          |          |
| <i>Basic Sciences</i>   |          |          |          |          |          |          |          |          |
| <i>Clinical Sciences</i>  |          |          |          |          |          |          |          |          |
| <i>Animal Production</i>  |          |          |          |          |          |          |          |          |
| <i>Food Safety and Quality, Veterinary Public Health and One Health Concept</i> |          |          |          |          |          |          |          |          |

*A: lectures; B: seminars; C: supervised self-learning; D: laboratory and desk based work, E: non-clinical animal work; F: clinical animal work; G: others (specify); H: hours to be taken by each student per subject group*

Table 3.1.5. Optional courses proposed to students (not compulsory)

| <i>Subjects</i>  | <i>A</i> | <i>B</i> | <i>C</i> | <i>D</i> | <i>E</i> | <i>F</i> | <i>G</i> | <i>H</i> |
|--|----------|----------|----------|----------|----------|----------|----------|----------|
| <i>A: lectures; B: seminars; C: supervised self-learning; D: laboratory and desk based work, E: non-clinical animal work; F: clinical animal work; G: others (specify); H: total</i> |          |          |          |          |          |          |          |          |

*Description of the core clinical exercises/practicals/seminars prior to the start of the clinical rotations*

*Description (timing, group size per teacher, ...) of the core clinical rotations and emergency services (both intramural VTH and ambulatory clinics) and the direct involvement of undergraduate students in it (responsibilities, hands-on versus observation, report writing, ...)*

*Description (timing, group size per teacher, ...) of the teaching in slaughterhouses and in premises for the production, processing, distribution/sale or consumption of food of animal origin*

*Description of the selection procedures of the Electives by the students and the degree of freedom in their choice (e.g. what happens when too many students select one specific track)*  
*Description of the procedures (e.g. logbooks) used to ascertain the achievement of each core practical/clinical activity (pre-clinical, clinical, ambulatory clinics, EPT) by all students*

**Standard 3.2: Each study programme provided by the VEE must be competency-based and designed so that it meets the objectives set for it, including the intended learning outcomes. The qualification resulting from a programme must be clearly specified and communicated and must refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.**

**The VEE must provide proof of a QA system that promotes and monitors the presence of an academic environment highly conducive to learning including self-learning. Details of the type, provision and updating of appropriate learning opportunities for the students must be clearly described, as well as the involvement of students.**

**The VEE must also describe how it encourages and prepares students for self-learning and lifelong learning.**

*Description of how the VEE:*

- ) ensures that the study programmes meet the objectives
- ) promotes an academic environment conducive to learning
- ) encourages and prepares students for self-learning and lifelong learning.

**Standard 3.3: Programme learning outcomes must:**

- ensure the effective alignment of all content, teaching, learning and assessment activities of the degree programme to form a cohesive framework
- include a description of Day One Competences
- form the basis for explicit statements of the objectives and learning outcomes of individual units of study
- be communicated to staff and students
- be regularly reviewed, managed and updated to ensure they remain relevant, adequate and are effectively achieved.

*Description of the educational aims and strategy in order to propose a cohesive framework and to achieve the learning outcomes*

*Description of how the VEE ensures that the learning outcomes fit with the ESEVT Day One Competences*

*Description of how (procedures) and by who (description of the committee structure) the learning outcomes are decided, communicated to staff, students and stakeholders, assessed and revised*

**Standard 3.4: The VEE must have a formally constituted committee structure (which includes effective student representation), with clear and empowered reporting lines, to oversee and manage the curriculum and its delivery. The committee(s) must:**

- determine the pedagogical basis, design, delivery methods and assessment methods of the curriculum

- **oversee QA of the curriculum, particularly gathering, evaluating, making change and responding to feedback from stakeholders, peer reviewers and external assessors, and data from examination/assessment outcomes**
- **perform on going and periodic review of the curriculum at least every seven years by involving staff, students and stakeholders; these reviews must lead to continuous improvement. Any action taken or planned as a result of such a review must be communicated to all those concerned**
- **identify and meet training needs for all types of staff, maintaining and enhancing their competence for the ongoing curriculum development.**

*Description of how (procedures) and by who (description of the committee structure) the core curriculum is decided, communicated to staff, students and stakeholders, implemented, assessed and revised*

**Standard 3.5: External Practical Training (EPT) is compulsory training activities organised outside the VEE, the student being under the direct supervision of a non-academic person (e.g. a practitioner). EPT cannot replace the core intramural training nor the extramural training under the close supervision of academic staff (e.g. ambulatory clinics, herd health management, practical training in FSQ and VPH). Since the veterinary degree is a professional qualification with Day One Competences, EPT must complement and strengthen the academic education inter alia by enhancing student's professional knowledge.**

*Description of the organisation of the EPT and how it complements (but not replaces) the academic clinical training*

Table 3.5.1. Curriculum days of External Practical Training (EPT) for each student

| <i>Fields of Practice</i>                | <i>Minimum duration (weeks)</i> | <i>Year of programme</i> |
|--|---------------------------------|--------------------------|
| <i>Production animals (pre-clinical)</i> |                                 |                          |
| <i>Companion animals (pre-clinical)</i>  |                                 |                          |
| <i>Production animals (clinical)</i>     |                                 |                          |
| <i>Companion animals (clinical)</i>      |                                 |                          |
| <i>FSQ &amp; VPH</i>                     |                                 |                          |
| <i>Others (specify)</i>                  |                                 |                          |

**Standard 3.6: The EPT providers must have an agreement with the VEE and the student (in order to state their respective rights and duties, including insurance matters), provide a standardised evaluation of the performance of the student during their EPT and be allowed to provide feedback to the VEE on the EPT programme.**

**There must be a member of the academic staff responsible for the overall supervision of the EPT, including liaison with EPT providers.**

*Description of how the EPT providers are linked to the VEE (a copy of one of the agreements to be provided in the appendices), assess the students and provide feedback to the VEE*

*Name of the academic person(s) responsible for the supervision of the EPT activities*

**Standard 3.7: Students must take responsibility for their own learning during EPT. This includes preparing properly before each placement, keeping a proper record of their experience during EPT by using a logbook provided by the VEE and evaluating the EPT.**

**Students must be allowed to complain officially and/or anonymously about issues occurring during EPT. The VEE must have a system of QA to monitor the implementation, progress and then feedback within the EPT activities.**

*Description of the implications of students in the preparation, recording and assessment of their EPT*

*Description of the complaint process in place concerning EPT*

Comments on Area 3

Suggestions for improvement in Area 3

## **Area 4. Facilities and equipment**

**Standard 4.1: All aspects of the physical facilities must provide an environment conducive to learning, including internet access. The veterinary VEE must have a clear strategy and programme for maintaining and upgrading its buildings and equipment. Facilities must comply with all relevant legislation including health, safety, biosecurity, accessibility to people with reduced mobility, and EU animal welfare and care standards.**

*Description of the location and organisation of the facilities used for the veterinary curriculum (surface area, distance from the main campus for extramural facilities, ...) (maps to be provided as appendices)*

*Description of the strategy and programme for maintaining and upgrading the current facilities and equipment and/or acquiring new ones*

*Description of how the VEE ensures that all physical facilities comply with all relevant legislation*

**Standard 4.2: Lecture theatres, teaching laboratories, tutorial rooms, clinical facilities and other teaching spaces must be adequate in number, size and equipped for the instructional purposes and must be well maintained. The facilities must be adapted for the number of students enrolled. Students must have ready access to adequate and sufficient study, self-learning, recreation, locker, sanitary and food service facilities. Offices, teaching preparation and research laboratories must be sufficient for the needs of the academic and support staff.**

*Short description (number, size, equipment, ...) of the premises for:*

- ) lecturing
- ) group work (seminars, tutorials, ...)
- ) practical work (laboratories, ...)
- ) skill labs (preclinical stimulation-based training on dummies, ...)

*Short description (number of rooms and places, ...) of the premises for:*

- ) study and self-learning
- ) catering, canteens, ...

- ) *locker rooms*
- ) *accommodation for on call students*
- ) *leisure*
- ) *sanitary (toilets, washing and/or shower facilities, ...)*

*Brief description of the staff offices and research laboratories*

**Standard 4.3: The livestock facilities, animal housing, core clinical teaching facilities and equipment used by the VEE for teaching purposes must:**

- **be sufficient in capacity and adapted for the number of students enrolled in order to allow safe hands-on training for all students**
- **be of a high standard, well maintained and fit for the purpose**
- **promote best husbandry, welfare and management practices**
- **ensure relevant biosecurity and bio-containment**
- **be designed to enhance learning.**

*Description (number, size, species, ...) of the premises for housing:*

- ) *healthy animals*
- ) *research animals*
- ) *hospitalised animals*

*Description (number, size, equipment, species, disciplines, ...) of the premises for:*

- ) *clinical activities*
- ) *diagnostic services including necropsy*
- ) *others (specify)*

*Description of the equipment used for clinical services (diagnostic, treatment, prevention, surgery, anaesthesia, physiotherapy, ...)*

*Brief description of the premises (both intra-mural and extra-mural) used for the practical teaching of FSQ & VPH (slaughterhouses, foodstuff processing units, ...)*

**Standard 4.4: Core clinical teaching facilities must be provided in a veterinary teaching hospital (VTH) with 24/7 emergency services at least for companion animals and equines. Within the VTH, the VEE must unequivocally demonstrate that standard of education and clinical research are compliant with all ESEVT Standards, e.g. research-based and evidence-based clinical training supervised by academic staff trained to teach and to assess, availability for staff and students of facilities and patients for performing clinical research and relevant QA procedures.**

**For ruminants, on-call service must be available if emergency services do not exist for those species in a VTH.**

**The VEE must ensure state-of-the-art standards of teaching clinics which remain comparable with or exceeding the best available in the private sector.**

**The VTH and any hospitals, practices and facilities (including EPT) which are involved with the curriculum must meet the relevant national Practice Standards.**

*Description of the organisation and management of the VTH and ambulatory clinics (opening hours and days, on-duty and on-call services, general consultations, list of specialised consultations, hospitalisations, emergencies and intensive care, ...)*

*Description on how the VTH and ambulatory clinics are organised in order to maximise the hands-on training of all students*

*Statement that the VEE meets the national Practice Standards*

**Standard 4.5: The VEE must ensure that students have access to a broad range of diagnostic and therapeutic facilities, including but not limited to: diagnostic imaging, anaesthesia, clinical pathology, intensive/critical care, surgeries and treatment facilities, ambulatory services, pharmacy and necropsy facilities.**

*Description of how all students can have access to all relevant facilities*

**Standard 4.6: Appropriate isolation facilities must be provided to meet the need for the isolation and containment of animals with communicable diseases. Such isolation facilities must be properly constructed, ventilated, maintained and operated to provide for animal care and for prevention of spread of infectious agents. They must be adapted to all animal species commonly handled in the VTH.**

*Description (number, size, species, ...) of the premises for housing isolated animals and how these premises guarantee isolation and containment of infectious patients*

**Standard 4.7: The VEE must have an ambulatory clinic for production animals or equivalent facilities so that students can practise field veterinary medicine and Herd Health Management under academic supervision.**

*Description of how and by who field veterinary medicine and Herd Health Management are taught to all students*

*Description of the vehicles and equipment used for the ambulatory clinic*

**Standard 4.8: The transport of students, live animals, cadavers, materials from animal origin and other teaching materials must be done in agreement with national and EU Standards, to ensure the safety of students and staff and to prevent the spread of infectious agents.**

*Brief description (number, size, equipment, ...) of the vehicles used for:*

- ) transportation of students (e.g. to extramural facilities)
- ) transportation of live animals
- ) transportation of cadavers/organs

**Standard 4.9: Operational policies and procedures (including e.g. biosecurity, good laboratory practice and good clinical practice) must be taught and posted for students, staff and visitors and a Biosafety manual must be available. The VEE must demonstrate a clear commitment for the delivery of biosafety and biosecurity, e.g. by a specific committee structure. The VEE must have a system of QA to monitor and assure clinical, laboratory and farm services, including a regular monitoring of the feedback from students, staff and clients.**

*Description of how (procedures) and by who (description of the committee structure) changes in*



*facilities, equipment, biosecurity procedures (health & safety management for people and animals, including waste management) good laboratory practices and good clinical practices are decided, communicated to staff, students, stakeholders (and, if appropriate, to the public), implemented, assessed and revised.*

*The VEE's manual for biosecurity, health and safety must be provided as an appendix (with a summary in English).*

Comments on Area 4

Suggestions for improvement in Area 4

## **Area 5. Animal resources and teaching material of animal origin**

**Standard 5.1: The number and variety of healthy and diseased animals, cadavers, and material of animal origin must be adequate for providing the practical and safe hands-on training (in the areas of Basic Sciences, Clinical Sciences, Pathology, Animal Production, Food Safety and Quality) and adapted to the number of students enrolled. Evidence must be provided that these data are regularly recorded and that procedures are in place for correcting any deficiencies.**

*Description of the global strategy of the VEE about the use of animals and material of animal origin for the acquisition by each student of Day One Competences (see Annex 2)*

*Description of the specific strategy of the VEE in order to ensure that each student receives the relevant core clinical training before graduation, e.g. numbers of patients examined/treated by each student, balance between species, balance between clinical disciplines, balance between first opinion and referral cases, balance between acute and chronic cases, balance between consultations (day patients in the clinic) and hospitalisations, balance between individual medicine and population medicine*

*Description of the procedures developed to ensure the welfare of animals used for educational and research activities*

*Description of how the cadavers and material of animal origin for training in anatomy and pathology are obtained, stored and destroyed*

Table 5.1.1. Cadavers and material of animal origin used in practical anatomical training

| <i>Species</i>               | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|------------------------------|------------|-------------|-------------|-------------|
| <i>Cattle</i>                |            |             |             |             |
| <i>Small ruminants</i>       |            |             |             |             |
| <i>Pigs</i>                  |            |             |             |             |
| <i>Companion animals</i>     |            |             |             |             |
| <i>Equine</i>                |            |             |             |             |
| <i>Poultry &amp; rabbits</i> |            |             |             |             |
| <i>Aquatic animals</i>       |            |             |             |             |
| <i>Exotic pets</i>           |            |             |             |             |
| <i>Others (specify)</i>      |            |             |             |             |

\* *The last full academic year prior to the Visitation*

Table 5.1.2. Healthy live animals used for pre-clinical training (animal handling, physiology, animal production, propaedeutics, ...)

| <i>Species</i>               | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|------------------------------|------------|-------------|-------------|-------------|
| <i>Cattle</i>                |            |             |             |             |
| <i>Small ruminants</i>       |            |             |             |             |
| <i>Pigs</i>                  |            |             |             |             |
| <i>Companion animals</i>     |            |             |             |             |
| <i>Equine</i>                |            |             |             |             |
| <i>Poultry &amp; rabbits</i> |            |             |             |             |
| <i>Exotic pets</i>           |            |             |             |             |
| <i>Others (specify)</i>      |            |             |             |             |

Table 5.1.3. Number of patients\*\* seen intra-murally (in the VTH)

| <i>Species</i>               | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|------------------------------|------------|-------------|-------------|-------------|
| <i>Cattle</i>                |            |             |             |             |
| <i>Small ruminants</i>       |            |             |             |             |
| <i>Pigs</i>                  |            |             |             |             |
| <i>Companion animals</i>     |            |             |             |             |
| <i>Equine</i>                |            |             |             |             |
| <i>Poultry &amp; rabbits</i> |            |             |             |             |
| <i>Exotic pets</i>           |            |             |             |             |
| <i>Others (specify)</i>      |            |             |             |             |

\*\* *Each patient has to be officially recorded in the electronic patient record system of the VEE and has to be individually examined/treated by at least 1 student under the supervision of at least 1 member of staff. Each live animal affected by one specific clinical episode is counted as 1 single patient, even if it has been examined/treated by several departments/units/clinics.*

Table 5.1.4. Number of patients\*\* seen extra-murally (in the ambulatory clinics)

| <i>Species</i>               | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|------------------------------|------------|-------------|-------------|-------------|
| <i>Cattle</i>                |            |             |             |             |
| <i>Small ruminants</i>       |            |             |             |             |
| <i>Pigs</i>                  |            |             |             |             |
| <i>Companion animals</i>     |            |             |             |             |
| <i>Equine</i>                |            |             |             |             |
| <i>Poultry &amp; rabbits</i> |            |             |             |             |
| <i>Exotic pets</i>           |            |             |             |             |
| <i>Others (specify)</i>      |            |             |             |             |

\*\* *Each patient has to be officially recorded and has to be individually examined/treated by at least 1 student under the supervision of at least 1 member of staff. Each live animal affected by one specific clinical episode is counted as 1 single patient.*

Table 5.1.5. Percentage (%) of first opinion patients used for clinical training (both in VTH and ambulatory clinics, i.e. tables 5.1.3 & 5.1.4)

| <i>Species</i>         | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|------------------------|------------|-------------|-------------|-------------|
| <i>Cattle</i>          |            |             |             |             |
| <i>Small ruminants</i> |            |             |             |             |
| <i>Pigs</i>            |            |             |             |             |

*Companion animals*  
*Equine*  
*Poultry & rabbits*  
*Exotic pets*  
*Others (specify)*

Table 5.1.6. Cadavers used in necropsy

| <i>Species</i>               | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|------------------------------|------------|-------------|-------------|-------------|
| <i>Cattle</i>                |            |             |             |             |
| <i>Small ruminants</i>       |            |             |             |             |
| <i>Pigs</i>                  |            |             |             |             |
| <i>Companion animals</i>     |            |             |             |             |
| <i>Equine</i>                |            |             |             |             |
| <i>Poultry &amp; rabbits</i> |            |             |             |             |
| <i>Aquatic animals</i>       |            |             |             |             |
| <i>Exotic pets</i>           |            |             |             |             |
| <i>Others (specify)</i>      |            |             |             |             |

Table 5.1.7. Number of visits in herds/flocks/units for training in Animal Production and Herd Health Management

| <i>Species</i>          | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|-------------------------|------------|-------------|-------------|-------------|
| <i>Cattle</i>           |            |             |             |             |
| <i>Small ruminants</i>  |            |             |             |             |
| <i>Pigs</i>             |            |             |             |             |
| <i>Poultry</i>          |            |             |             |             |
| <i>Rabbits</i>          |            |             |             |             |
| <i>Aquatic animals</i>  |            |             |             |             |
| <i>Others (specify)</i> |            |             |             |             |

Table 5.1.8. Number of visits in slaughterhouses and related premises for training in FSQ

| <i>Species</i>                  | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|---------------------------------|------------|-------------|-------------|-------------|
| <i>Ruminant slaughterhouses</i> |            |             |             |             |
| <i>Pig slaughterhouses</i>      |            |             |             |             |
| <i>Poultry slaughterhouses</i>  |            |             |             |             |
| <i>Related premises **</i>      |            |             |             |             |
| <i>Others (specify)</i>         |            |             |             |             |

*\*\* Premises for the production, processing, distribution or consumption of food of animal origin*

*Description of how (procedures) and by who (description of the committee structure) the number and variety of animals and material of animal origin for pre-clinical and clinical training, and the clinical services provided by the VEE are decided, communicated to staff, students and stakeholders, implemented, assessed and revised*

**Standard 5.2: In addition to the training provided in the VEE, experience can include practical training at external sites, provided this training is organised under direct academic supervision and following the same standards as those applied in the VEE.**

*Description of the organisation and management of the external sites (teaching farms, ...) and the involvement of students in their running (e.g. births, milking, feeding, ...)*

**Standard 5.3: The VTH must provide nursing care skills and instruction in nursing procedures. Under all situations students must be active participants in the clinical workup of patients, including problem-oriented diagnostic approach together with diagnostic decision-making.**

*Description of how and by who the nursing care skills are implemented and taught to undergraduate students*

*Description of the group size for the different types of clinical training (both intra-murally and extra-murally) to guarantee hands-on training of all students*

*Description of the hands-on involvement of students in clinical procedures in the different species, i.e. clinical examination, diagnostic tests, blood sampling, treatment, nursing and critical care, anaesthesia, routine surgery, euthanasia, necropsy, report writing, client communication, biosecurity procedures, ... (both intra-murally and extra-murally)*

*Description of the procedures used to allow all students to spend extended periods in discussion, thinking and reading to deepen their understanding of the clinical case and its management*

**Standard 5.4: Medical records must be comprehensive and maintained in an effective retrieval system (preferably an electronic patient record system) to efficiently support the teaching, research, and service programmes of the VEE.**

*Description of the patient record system, its completion, its availability to staff and students and how it is used to efficiently support the teaching, research, and service programmes of the VEE*

Comments on Area 5

Suggestions for improvement in Area 5

## **Area 6. Learning resources**

**Standard 6.1: State-of-the-art learning resources must be adequate and available to support veterinary education, research, services and continuing education. When the study programme is provided in several tracks/languages, the learning resources must be available in all used languages. Timely access to learning resources, whether through print, electronic media or other means, must be available to students and staff and, when appropriate, to stakeholders. State-of-the-art procedures for bibliographical search and for access to databases and learning resources must be taught to undergraduate students.**

*Description of the general strategy of the VEE on learning resources*

*Description of how the procedures for access to and use of learning resources are taught to staff and students*

*Description of how (procedures) and by who (description of the committee structure) the learning resources (books, periodicals, databases, e-learning, new technologies, ..) provided by the VEE*

*are decided, communicated to staff, students and stakeholders, implemented, assessed and revised*

**Standard 6.2: Staff and students must have full access on site to an academic library administered by a qualified librarian, an Information Technology (IT) unit managed by an IT expert, an e-learning platform, and all the relevant human and physical resources necessary for the development of instructional materials by the staff and their use by the students.**

**The relevant electronic information, database and other intranet resources must be easily available for students and staff both in the VEE's core facilities via wireless connection (Wi-Fi) and from outside the VEE through a hosted secured connection, e.g. Virtual Private Network (VPN).**

*Brief description of the main library of the VEE:*

- ) *staff (FTE) and qualifications*
- ) *opening hours and days*
- ) *annual budget*
- ) *facilities: location in the campus, global space, number of rooms, number of seats*
- ) *equipment: number of computers, number of electrical connections for portable PC*
- ) *softwares available for bibliographical search*

*Brief description of the subsidiary libraries (if any)*

*Brief description of the IT facilities and of the e-learning platform (dedicated staff, hardware, software, available support for the development by staff and the use by students of instructional materials)*

*Description of the accessibility for staff and students to electronic learning resources both on and off campus (Wi-Fi coverage in the VEE and access to resources through a hosted secured connection, e.g. Virtual Private Network (VPN))*

**Standard 6.3: The VEE must provide students with unimpeded access to learning resources, internet and internal study resources, and equipment for the development of procedural skills (e.g. models). The use of these resources must be aligned with the pedagogical environment and learning outcomes within the programme and have mechanisms in place to evaluate the teaching value of changes in learning resources.**

*Brief description of:*

- ) *the number of veterinary books and periodicals*
- ) *the number of veterinary e-books and e-periodicals*
- ) *the number of other (e)books and (e)periodicals*
- ) *the available learning resources to students, including electronic information and e-learning courses (and their role in supporting student learning and teaching in the core curriculum)*
- ) *the organisation and supervision of the skill labs.*

Comments on Area 6

Suggestions for improvement in Area 6

## Area 7. Student admission, progression and welfare

**Standard 7.1: The VEE must consistently apply pre-defined and published regulations covering all phases of the student “life cycle”, e.g. student admission, progression and certification.**

**In relation to enrolment, the VEE must provide accurate and complete information regarding all aspects of the educational programme in all advertisings for prospective national and international students.**

**Formal cooperations with other VEEs must also be clearly advertised.**

*Description of how the educational programmes, learning outcomes, admission procedures and requirements for national and foreign students, progression and certification, tuition fees, academic calendar, collaborations with other VEEs, etc. are advertised to prospective students*

**Standard 7.2: The number of students admitted must be consistent with the resources available at the VEE for staff, buildings, equipment, healthy and diseased animals, and materials of animal origin.**

Table 7.2.1. Number of new veterinary students admitted by the VEE

| Type of students  | AY* | AY-1 | AY-2 | Mean |
|-------------------|-----|------|------|------|
| Standard students |     |      |      |      |
| Full fee students |     |      |      |      |
| Total             |     |      |      |      |

\* The last full academic year prior the Visitation

Table 7.2.2. Number of veterinary undergraduate students registered at the VEE

| Year of programme | AY* | AY-1 | AY-2 | Mean |
|-------------------|-----|------|------|------|
| First year        |     |      |      |      |
| Second year       |     |      |      |      |
| Third year        |     |      |      |      |
| Fourth year       |     |      |      |      |
| Fifth year        |     |      |      |      |
| Sixth year        |     |      |      |      |
| Total             |     |      |      |      |

Table 7.2.3. Number of veterinary students graduating annually

| Type of students  | AY* | AY-1 | AY-2 | Mean |
|-------------------|-----|------|------|------|
| Standard students |     |      |      |      |
| Full fee students |     |      |      |      |
| Total             |     |      |      |      |

Table 7.2.4. Average duration of veterinary studies

| Duration          | % of the students who graduated on AY* |
|-------------------|--|
| + 0**             |  |
| + 1 year          |  |
| + 2 years         |  |
| + 3 years or more |  |

\*\* The total duration of the studies matches the minimum number of years of the programme (e.g. 5 or 6 years)

Table 7.2.5. Number of postgraduate students registered at the VEE

| <i>Programmes</i>       | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|-------------------------|------------|-------------|-------------|-------------|
| <i>Interns</i>          |            |             |             |             |
| <i>Residents</i>        |            |             |             |             |
| <i>PhD students</i>     |            |             |             |             |
| <i>Others (specify)</i> |            |             |             |             |

**Standard 7.3: The selection and progression criteria must be clearly defined, consistent, and defensible, be free of discrimination or bias, and take into account of the fact that students are admitted with a view to their entry to the veterinary profession in due course. The VEE must regularly review and reflect on the selection processes to ensure they are appropriate for students to complete the programme successfully. If the selection processes are decided by another authority, the latter must regularly receive feedback from the VEE.**

**Adequate training (including periodic refresher training) must be provided for those involved in the selection process to ensure applicants are evaluated fairly and consistently.**

*Description of the admission procedures for standard students:*

- ) *selection criteria*
- ) *policy for disable and ill students*
- ) *composition and training of the selection committee*
- ) *appeal process*
- ) *advertisement of the criteria and transparency of the procedures*

*Description of the admission procedures for full fee students (if different from standard students)*

*Description of how the VEE adapts the number of admitted students to the available educational resources (facilities and equipment, staff, healthy and diseased animals, material of animal origin) and the biosecurity and welfare requirements*

*Description of the prospective number of new students admitted by the VEE for the next 3 academic years*

**Standard 7.4: There must be clear policies and procedures on how applicants with disabilities or illnesses are considered and, if appropriate, accommodated in the programme, taking into account the requirement that all students must be capable of meeting the ESEVT Day One Competences by the time they graduate.**

*Description of the policies and procedures dedicated to applicants with disabilities*

**Standard 7.5: The basis for decisions on progression (including academic progression and professional fitness to practise) must be explicit and readily available to the students. The VEE must provide evidence that it has mechanisms in place to identify and provide remediation and appropriate support (including termination) for students who are not performing adequately.**

**The VEE must have mechanisms in place to monitor attrition and progression and be able to respond and amend admission selection criteria (if permitted by national or**

**university law) and student support if required.**

*Description of:*

- ) *the progression criteria and procedures for all students*
- ) *the remediation and support for students who do not perform adequately*
- ) *the advertisement to students and transparency of these criteria/procedures*

*Description of the rate and main causes of attrition*

*Description of how (procedures) and by who (description of the committee structure) the admission procedures, the admission criteria, the number of admitted students and the services to students are decided, communicated to staff, students and stakeholders, implemented, assessed and revised*

**Standard 7.6: Mechanisms for the exclusion of students from the programme for any reason must be explicit.**

**The VEE's policies for managing appeals against decisions, including admissions, academic and progression decisions and exclusion, must be transparent and publicly available.**

*Description of the mechanisms for the exclusion of students*

*Description of the appeal processes*

**Standard 7.7: Provisions must be made by the VEE to support the physical, emotional and welfare needs of students. This includes, but is not limited to, learning support and counselling services, career advice, and fair and transparent mechanisms for dealing with student illness, impairment and disability during the programme. This shall include provision of reasonable adjustments for disabled students, consistent with all relevant equality and/or human rights legislation.**

**There must be effective mechanisms for resolution of student grievances (e.g. interpersonal conflict or harassment).**

*Description of the services available for students (i.e. registration, teaching administration, mentoring and tutoring, career advice, listening and counselling, assistance in case of illness, impairment and disability, clubs and organisations, ...)*

*Description of the mechanisms for resolution of student grievances*

**Standard 7.8: Mechanisms must be in place by which students can convey their needs and wants to the VEE. The VEE must provide students with a mechanism, anonymously if they wish, to offer suggestions, comments and complaints regarding compliance of the VEE with national and international legislation and the ESEVT Standards.**

*Description of the mechanisms allowing students to provide their needs, complaints, comments and suggestions to the VEE*

Comments on Area 7

Suggestions for improvement in Area 7



## **Area 8. Student assessment**

**Standard 8.1: The VEE must ensure that there is a clearly identified structure within the VEE showing lines of responsibility for the assessment strategy to ensure coherence of the overall assessment regime and to allow the demonstration of progressive development across the programme towards entry-level competence.**

*Description of the general student's assessment strategy of the VEE*

*Description of the specific methodologies for assessing the acquisition of:*

- ) *theoretical knowledge*
- ) *pre-clinical practical skills*
- ) *clinical practical skills*
- ) *soft skills (e.g. communication skills, team player, dealing with pressure, strong work ethic, positive mental attitude, flexibility, time management, self-confidence, dealing with criticism, ...)*

**Standard 8.2: The assessment tasks and grading criteria for each unit of study in the programme must be published, applied consistently, clearly identified and available to students in a timely manner well in advance of the assessment. Requirements to pass must be explicit.**

**The VEE must properly document the results of assessment and provide the students with timely feedback on their assessments.**

**Mechanisms for students to appeal against assessment outcomes must be explicit.**

*Description of the processes for ensuring the advertising and transparency of the assessment criteria/procedures*

*Description of the processes for awarding grades, including explicit requirements for barrier assessments*

*Description of the processes for providing to students a feedback post-assessment and a guidance for requested improvement*

*Description of the appeal processes against assessment outcomes*

**Standard 8.3: The VEE must have a process in place to review assessment outcomes, to change assessment strategies and to ensure the accuracy of the procedures when required. Programme learning outcomes covering the full range of professional knowledge, skills, competences and attributes must form the basis for assessment design and underpin decisions on progression.**

*Description of how (procedures) and by who (description of the committee structure) the students' assessment strategy is decided, communicated to staff, students and stakeholders, implemented, assessed and revised*

*Description of the link between learning outcomes and assessment design*

**Standard 8.4: Assessment strategies must allow the VEE to certify student achievement of learning objectives at the level of the programme and individual units of study.**

**The VEE must ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.**

*Description of the system to certify student achievement of learning outcomes in the different subjects, years of study, etc.*

*Description of the strategy to encourage students to take an active part in the learning process*

**Standard 8.5: Methods of formative and summative assessment must be valid and reliable and comprise a variety of approaches. Direct assessment of clinical skills and Day One Competences (some of which may be on simulated patients), must form a significant component of the overall process of assessment. It must also include the quality control of the student logbooks in order to ensure that all clinical procedures, practical and hands-on training planned in the study programme have been fully completed by each individual student.**

*Description of the assessment methodology to ensure that every graduate has achieved the minimum level of competence, as described in the ESEVT Day One Competences (see Annex 2)*

Comments on Area 8

Suggestions for improvement in Area 8

## **Area 9. Academic and support staff**

### ***Definitions***

***Academic staff:*** This category includes staff who have been granted a veterinary degree (or another university degree) and have acquired the relevant expertise in their respective disciplines, who have been formally trained to teach and assess students, and who provide up-to-date, evidence-based and research-based education. Usually permanent academic staff have a PhD (or equivalent degree) and are also involved with research and administrative activities.

*Post-graduate students who are registered for a specialised or doctoral degree (i.e. interns, residents, PhD students or equivalent postgraduate students) and practitioners are not included in the figures unless they are **paid and trained** to regularly perform structured practical and/or clinical training (for a minimal of 10% and for a maximum of 50% of their annual workload) and are supervised by permanent academic staff (e.g. 10 residents employed half-time (50%) for clinical training of undergraduate students + 8 PhD students employed quarter-time (25%) for practical training of undergraduate students = 7 FTEs).*

*Researchers, invited speakers, unpaid lecturers, practitioners supervising the EPT and other persons who only occasionally contribute to the training of students **are not included in the tables** but must be reported for information in the SER.*

***Research staff:*** This category includes academic staff whose main task is to conduct research

work, although they may participate in teaching.

**Support staff:** This category includes staff who are dedicated to administrative, teaching or research tasks related to students, and to care of facilities, equipment or animals in the VEE.

**Permanent staff:** staff who have a permanent contract and are paid by the VEE's core funding (public funding and/or tuition fees) (budgeted posts).

**Temporary staff:** staff who have a fixed-term contract and are paid by service income, research grants, contract research, ... (non-budgeted posts).

**Standard 9.1: The VEE must ensure that all staff are appropriately qualified and prepared for their roles, in agreement with national and EU regulations and must apply fair and transparent processes for the recruitment and development of staff.**

**A formal training<sup>2</sup> (including good teaching and evaluation practices, learning and e-learning resources, biosecurity and QA procedures) must be in place for all staff<sup>1</sup> involved with teaching.**

**Most academic staff (calculated as FTE) involved in veterinary training must be veterinarians. It is expected that more than 2/3 of the instruction that the students receive, as determined by student teaching hours, is delivered by qualified veterinarians.**

*Description of the global strategy in order to ensure that all requested competences for the veterinary programme are covered and that staff are properly qualified and prepared for their roles (e.g. good teaching and assessing practices, knowledge of up-to-date (e-)learning resources, biosecurity and QA procedures, ...)*

<sup>1</sup> **Standard list of categories of teachers (to be used as a general guiding reference and amended as necessary for the writing of the SER, taking into account the local characteristics and peculiarities of the VEE):**

-) **Senior academic staff:** professors (or equivalent) employed full- or part-time by a VEE; holding a PhD (or equivalent) and being able to demonstrate their ability in veterinary research and in their teaching speciality, which should ideally be recognised by a national or international diploma; senior academic staff must be formally trained to teach and to assess (i.e. advanced level) and receive regular follow-up training, e.g. one-day training per year on new methods in teaching and assessing; this training may be more general and not necessarily focused on veterinary medicine;

-) **Junior staff:** interns, residents, assistants, PhD students paid by the VEE; must receive some training on how to teach and to assess (i.e. intermediate level); it must also relate to certain support staff (e.g. nurses) involved with training;

-) **Practitioners involved with the core curriculum practical or clinical training (intra- or extramurally):** must be contractually involved with the VEE; do not need to have a PhD or a speciality but need to have a training on how to teach and to assess (i.e. intermediate level) (could be an online training);

-) **Practitioners involved with EPT:** practitioners in any field of veterinary medicine; do not need to have in-depth training to teach and to assess but should receive at least some minimum training (e.g. basic level); they must agree to follow the VEE's code of conduct and must have some form of a contract

with the VEE to remind them that they are involved, even if indirectly, with the teaching and assessment of students.

<sup>2</sup> **General guidelines on the minimum training to teach and to assess for each category of teachers (to be used as a general guiding reference and amended as necessary for the writing of the SER, taking into account the local characteristics and peculiarities of the VEE):**

| <b>Guidelines for the minimum training to teach and to assess</b> |  |  |                                |
|---|--|--|--------------------------------|
|   | <b>Basic level</b>   | <b>Intermediate level</b>                                    | <b>Advanced level</b>          |
| <b>Persons concerned</b>  | Practitioners involved with EPT and support staff involved with teaching | Junior staff and practitioners involved with core curriculum | Senior academic staff          |
| <b>Code of conduct</b>  | ✓  | ✓  | ✓                              |
| <b>ESEVT Day One Competences (D1C)</b>                            | ✓  | ✓  | ✓                              |
| <b>GCP (good clinical practices)</b>                              | ✓  | ✓  | ✓                              |
| <b>Practical &amp; clinical teaching (basic)</b>                  | ✓  | ✓  | ✓                              |
| <b>Practical &amp; clinical teaching (advanced)</b>               | -  | ✓  | ✓                              |
| <b>Teaching methodologies</b>                                     | -  | -  | ✓                              |
| <b>Teaching tools</b>   | -  | ✓  | ✓                              |
| <b>Assessment methodologies</b>                                   | -  | -  | ✓                              |
| <b>Assessment tools</b>   | -  | ✓  | ✓                              |
| <b>QA loops in teaching &amp; assessment</b>                      | -  | -  | ✓                              |
| <b>Minimum duration of the initial training</b>                   | 4 h  | 16 h   | 24 h                           |
| <b>Annual update</b>  | -  | -  | ✓                              |
| <b>Format</b>   | physical, online or e-learning   | physical, online or e-learning                               | physical, online or e-learning |

**Standard 9.2: The total number, qualifications and skills of all staff involved with the programme, including teaching staff, ‘adjunct’ staff, technical, administrative and support staff, must be sufficient and appropriate to deliver the educational programme and fulfil the VEE’s mission.**

**A procedure must be in place to assess if the staff involved with teaching display competence and effective teaching skills in all relevant aspects of the curriculum that they teach, regardless of whether they are full or part time, residents, interns or other postgraduate students, adjuncts or off-campus contracted teachers.**

Table 9.2.1. Academic staff\*\* of the veterinary programme

| <i>Type of contract</i>       | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|-------------------------------|------------|-------------|-------------|-------------|
| <i>Permanent (FTE)</i>        |            |             |             |             |
| <i>Temporary:</i>             |            |             |             |             |
| <i>Interns (FTE)</i>          |            |             |             |             |
| <i>Residents (FTE)</i>        |            |             |             |             |
| <i>PhD students (FTE)</i>     |            |             |             |             |
| <i>Practitioners (FTE)</i>    |            |             |             |             |
| <i>Others (specify) (FTE)</i> |            |             |             |             |
| <i>Total (FTE)</i>            |            |             |             |             |

\* The last full academic year prior the Visitation

\*\* All staff included in this table must have received a training to teach and to assess undergraduate students. Practitioners involved with EPT are not included in this table.

Table 9.2.2. Percentage (%) of veterinarians in academic staff

| Type of contract | AY* | AY-1 | AY-2 | Mean |
|------------------|-----|------|------|------|
| Permanent (FTE)  |     |      |      |      |
| Temporary (FTE)  |     |      |      |      |

Table 9.2.3. Support staff of the veterinary programme

| Type of contract | AY* | AY-1 | AY-2 | Mean |
|------------------|-----|------|------|------|
| Permanent (FTE)  |     |      |      |      |
| Temporary (FTE)  |     |      |      |      |
| Total (FTE)      |     |      |      |      |

Table 9.2.4. Research staff of the VEE

| Type of contract | AY* | AY-1 | AY-2 | Mean |
|------------------|-----|------|------|------|
| Permanent (FTE)  |     |      |      |      |
| Temporary (FTE)  |     |      |      |      |
| Total (FTE)      |     |      |      |      |

*Prospected number of FTE academic and support staff of the veterinary programme for the next 3 academic years*

*Description of the formal programme for the selection and recruitment of the teaching staff and their training to teach and assess students (including continuing education)*

*Description of the formal programme for the selection, recruitment and training to perform their specific duties (including continuing education) of the support staff*

*Description of the formal rules governing outside work, including consultation and private practice, by staff working at the VEE*

**Standard 9.3: Staff must be given opportunities to develop and extend their teaching and assessment knowledge and must be encouraged to improve their skills. Opportunities for didactic and pedagogic training and specialisation must be available. The VEE must clearly define any systems of reward for teaching excellence in operation.**

**Academic positions must offer the security and benefits necessary to maintain stability, continuity, and competence of the academic staff. Academic staff must have a balanced workload of teaching, research and service depending on their role. They must have reasonable opportunities and resources for participation in scholarly activities.**

*Description of the peculiarities of the work contract for academic staff (e.g. permanent versus temporary, balance between teaching, research and services, continuing education, ...)*

**Standard 9.4: The VEE must provide evidence that it utilises a well-defined, comprehensive and publicised programme for the professional growth and development of academic and support staff, including formal appraisal and informal mentoring procedures.**

**Staff must have the opportunity to contribute to the VEE's direction and decision-making processes.**

**Promotion criteria for academic and support staff must be clear and explicit. Promotions for teaching staff must recognise excellence in, and (if permitted by the national or**

**university law) place equal emphasis on all aspects of teaching (including clinical teaching), research, service and other scholarly activities.**

*Description of the programmes dedicated to academic and support staff for:*

- ) *their professional growth and development*
- ) *the appraisal and promotion procedures*
- ) *the mentoring and supporting procedures*
- ) *their implication in the decision-making processes*

**Standard 9.5: A system for assessment of teaching staff must be in operation and must include student participation. Results must be available to those undertaking external reviews and commented upon in reports.**

*Description of the formal system in place for assessing the teachers by the students*

*Description of how (procedures) and by who (description of the committee structure) the strategy for allocating, recruiting, promoting, supporting and assessing academic and support staff is decided, communicated to staff, students and stakeholders, implemented, assessed and revised*

Comments on Area 9

Suggestions for improvement in Area 9

## **Area 10. Research programmes, continuing and postgraduate education**

**Standard 10.1: The VEE must demonstrate significant and broad research activities of staff that integrate with and strengthen the veterinary degree programme through research-based teaching.**

*Description of how the research activities of the VEE and the implication of most academic staff in it contribute to research-based veterinary education*

Table 10.1.1. List of the major funded research programmes in the VEE which were ongoing during the last full academic year prior the Visitation (AY\*) (this table may be substituted by a VEE list of ongoing research projects)

| <i>Scientific topics:</i> | <i>grant/year (€)</i> | <i>Duration (Yrs)</i> |
|---------------------------|-----------------------|-----------------------|
| ..                        |                       |                       |
| ..                        |                       |                       |

**Standard 10.2: All students must be trained in scientific method and research techniques relevant to evidence-based veterinary medicine and must have opportunities to participate in research programmes.**

*Description of how (undergraduate) students:*

- ) *are made aware of the importance of evidence-based medicine, scientific research and lifelong learning;*
- ) *are initiated to bibliographic search, scientific methods and research techniques, and writing of scientific papers*

*Description of how undergraduate students are offered to participate to research programmes on a non-compulsory or compulsory basis*

*Description of the minimum requirements for the graduation thesis (Master dissertation), its supervision and its assessment*

**Standard 10.3: The VEE must provide advanced postgraduate degree programmes, e.g. PhD, internships, residencies and continuing education programmes that complement and strengthen the veterinary degree programme and are relevant to the needs of the profession and society.**

Table 10.3.1. Number of students registered at postgraduate clinical training

| <i>Training:</i>                              | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|---|------------|-------------|-------------|-------------|
| <i>Interns:</i>                               |            |             |             |             |
| <i>Companion animals</i>                      |            |             |             |             |
| <i>Equine</i>                                 |            |             |             |             |
| <i>Production animals</i>                     |            |             |             |             |
| <i>Others (specify)</i>                       |            |             |             |             |
| ..  |            |             |             |             |
| <i>Total</i>                                  |            |             |             |             |
| <i>Residents:</i>                             |            |             |             |             |
| <i>EBVS disciplines (specify)</i>             |            |             |             |             |
| ..  |            |             |             |             |
| ..  |            |             |             |             |
| <i>Total</i>                                  |            |             |             |             |
| <i>Others (non-EBVS programmes) (specify)</i> |            |             |             |             |
| ..  |            |             |             |             |

*\* The last full academic year prior the Visitation*

Table 10.3.2. Number of students registered at postgraduate research training

| <i>Degrees:</i>         | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|-------------------------|------------|-------------|-------------|-------------|
| <i>PhD</i>              |            |             |             |             |
| <i>Others (specify)</i> |            |             |             |             |
| ..                      |            |             |             |             |
| <i>Total</i>            |            |             |             |             |

Table 10.3.3. Number of students registered at other postgraduate programmes in the VEE but not related to either clinical or research work (including any external/distance learning courses)

| <i>Programmes:</i> | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|--------------------|------------|-------------|-------------|-------------|
| ..                 |            |             |             |             |
| ..                 |            |             |             |             |

Table 10.3.4. Number of attendees to continuing education courses provided by the VEE

| <i>Courses:</i> | <i>AY*</i> | <i>AY-1</i> | <i>AY-2</i> | <i>Mean</i> |
|-----------------|------------|-------------|-------------|-------------|
| ..              |            |             |             |             |
| ..              |            |             |             |             |

*Prospected number of students registered at post-graduate programmes for the next 3*

*academic years*

*Description of how the postgraduate clinical trainings of the VEE contribute to undergraduate veterinary education and how potential conflicts in relation to case management between post- and undergraduate students are avoided*

*Description of how the continuing education programmes provided by the VEE are matched to the needs of the profession and the community*

**Standard 10.4: The VEE must have a system of QA to evaluate how research activities provide opportunities for student training and staff promotion, and how research approaches, methods and results are integrated into the veterinary teaching programmes.**

*Description of the mechanism used by the VEE to ensure that its research activities contribute to research-based education.*

*Description of how (procedures) and by who (description of the committee structure) research, continuing and postgraduate education programmes organised by the VEE are decided, communicated to staff, students and stakeholders, implemented, assessed and revised*

Comments on Area 10

Suggestions for improvement in Area 10

### **ESEVT Indicators** *(see Annex 4)*

*Complete the Excel file and include here the raw data and the calculated Indicators (i.e. both pages of the Excel file)*

Comments on Indicators

Suggestions for improvement on Indicators

### **Glossary**

*(Please use the same terminology and abbreviations as in the ESEVT SOP when possible)*

### **List of appendices** *(which are provided in a separate document)*

-) Current academic staff, qualifications, their FTE, teaching responsibilities and departmental affiliations

-) Units of study of the core veterinary programme (including clinical rotations, EPT and graduation thesis): title, reference number, ECTS value, position in curriculum (year, semester), whether it is compulsory or elective, hours and modes of instruction, learning outcomes and their alignment with the ESEVT Day One Competences



- ) Maps of the VEE and the intra-mural and extra-mural facilities used in the core veterinary programme
- ) Written assessment procedures for QA
- ) List of scientific publications from the VEE's academic staff in peer reviewed journals during the last three academic years
- ) Other relevant documents (*specify*)

*The information to be contained in the appendices must be carefully selected so that useful information is not swamped by large amounts of unnecessary detail. Hard copy of additional information may be provided on-site in the Team room.*

## **Annex 7. Timetable and guidelines for the Visitation**

*(as approved by the EAEVE Executive Committee on 29 September 2021)*

### **INTRODUCTION**

This document is a standardised programme for a (full) Visitation.

The specific programme must be proposed by the Liaison Officer 2 months before the start of the Visitation at the latest and is finalised in agreement with the Chairperson and the Coordinator.

### **TIMETABLE**

#### **Monday (Day 1)**

- ) by 15.00 at the latest: arrival of the Visitors at the hotel
- ) 15.00-16:00: meeting of the Visitation Team (i.e. 8 persons called Team in this Annex) in the hotel Team room dedicated to continuing education for the Visitors (led by the Coordinator)
- ) 16.00-18.00: first official meeting of the Team
- ) 18.00-19.00: meeting with the VEE's Head and the Liaison Officer in the hotel Team room
- ) 19.30-21.30: Dinner with the VEE's Head, Liaison Officer and representatives of Staff and Students as appointed and invited by the VEE's Head

#### **Tuesday (Day 2)**

- 07.30: transfer to the VEE Team Room
- 08.00-08.30: settling in the Team Room with access to a VEE IT-person
- 08.30- 09.15: meeting with the management of the VEE: presentation of the objectives of the Visitation by the Chairperson and presentation of the VEE by its Head
- 09.30-12.30 and 13.30-16.45: visit of all the intra-mural facilities/departments/units by the complete Team with a very short introduction by the responsible person of each unit (strict timetable requested to avoid any delay) (a short coffee break is welcome in the middle of the morning and afternoon sessions)
- 12.30-13.30: informal lunch with Team alone
- 13.30-16.45: see above
- 17.00-19.00: Team work in the VEE or hotel Team room
- 19.00: Informal dinner for the Team alone (in the hotel or within walking distance)

#### **Wednesday (Day 3)**

- 08.00: transfer to the VEE Team room
- 08.30–12.00: by individual Visitors or by sub-groups of Visitors:
  - ) visit of the extra-mural facilities involved in the veterinary curriculum (clinics, dispensaries, teaching farms, slaughterhouses, ...);
  - ) visit in depth of selected intra-mural facilities (e.g. VTH and pre-clinical training facilities);
  - ) meeting with staff involved with QA.(precise programme and name of attendees for each visit to be finalised during the Monday evening meeting)
- 12.00-13.00: informal lunch with Team alone
- 13.00-17.30: separate meetings with the relevant responsible persons for each ESEVT Area, i.e.:
  - ) Areas 1 & 2: Organisation, QA and Finances (60 min)
  - ) Area 3: Curriculum (60 min)
  - ) Area 4: Facilities (30 min)
  - ) Areas 5 & 6: Animal Resources and Learning Resources (30 min)

- ) Areas 7 & 8: Students (30 min)
  - ) Area 9: Staff (30 min)
  - ) Area 10: Research and post-graduate programmes (30 min)  
(precise programme and name of attendees for each meeting to be finalised during the Monday evening meeting at the latest)
- 17.30-19.00: Team work in the VEE or hotel Team room  
19.30-21.30: dinner with the VEE's Head, Liaison Officer, Rector and relevant stakeholders.

#### **Thursday (Day 4)**

- 08.00: transfer to the VEE Team room  
08.30-09.30: meeting with Academic Staff  
09.30-10.30: meeting with graduates involved with the veterinary curriculum (interns, residents, assistants, PhD students)  
10.30-11.00: meeting with Support Staff (technical, laboratory, administrative, nursing, IT)  
11.00-12.00: meeting with undergraduate students (several students from each year/semester of the curriculum, including students on eventual foreign language tracks)  
12.00-12.45: open session in confidence for individuals (staff, students and EPT providers) in the VEE Team Room (the VEE must inform in advance via e-mail all staff, students and EPT providers about this opportunity)  
In the morning: final on-site visits by individual Visitors if necessary  
13.00-14.00: lunch with alumni (i.e. local practitioners, employers of graduate students, representatives of professional organisations and stakeholders) who understand and speak basic English  
14.00-18.30: Team work at the VEE or hotel Team room  
19.00: informal dinner for the Team alone (in the hotel or within walking distance)

#### **Friday (Day 5)**

- 08.00: transfer to the VEE  
Around 8.30: exit presentation to the VEE's Head, Liaison Officer and representatives of staff and students (e.g. members of the VEE's Council)  
From the end of the exit presentation at the earliest: transfer of the Visitors to the airport/train station

**PS: Wi-Fi access, multiple (>10) electrical sockets, soft and hot drinks and one printed copy of the SER, its annexes and the relevant ESEVT SOP must be available upon arrival on Monday both at the hotel and in the VEE Team rooms.**

## **Annex 8. Template and guidelines for the writing of the Visitation Report**

*(as approved by the EAEVE Executive Committee on 29 May 2019)*



### **VISITATION REPORT**

**To** *(official name and location of the VEE)*

**On** *(date of Visitation)*

#### **By the Visitation Team**

*(First name, name, city, country):* Visitor in Basic Sciences

*(First name, name, city, country):* Visitor in Clinical Sciences in Companion Animals

*(First name, name, city, country):* Visitor in Clinical Sciences in Food-Producing Animals

*(First name, name, city, country):* Visitor in Food Safety and Quality

*(First name, name, city, country):* Visitor in Quality Assurance

*(First name, name, city, country):* Practitioner

*(First name, name, city, country):* Student

*(First name, name, city, country):* ESEVT Coordinator

*(Indicate the Chairperson)*

## ***Forewords (to be read by each Visitor before the writing of the Visitation Report)***

*The Visitation Report must be written in agreement with the ESEVT SOP (see Chapter 2, paragraph 1.6). The version of the SOP used to write the Visitation Report must coincide with the version the VEE followed when preparing its SER, as stated in the official Visitation agreement.*

***2.5 weeks before the Visitation at the latest***, each Visitor must have read the full SER, completed the chapters for which he/she is the principal writer in the draft Visitation Report (at least the sections 'Findings' and 'Questions to be asked/issues to be clarified during the Visitation') and sent his/her contribution to the Coordinator. Then, the Coordinator puts them together as Draft A, which is sent to all members of the Visitation Team.

*The final comprehensive list of questions is sent by the Coordinator to the VEE 2 weeks before the start of the Visitation in order to allow the Liaison Officer sufficient time to collect the required data.*

*The Visitation Team is responsible for making an independent assessment and proposing an unambiguous statement on the adequacy of the VEE against each ESEVT Standard, i.e. compliant, partially compliant (one or more Minor Deficiencies that does/do not significantly affect the quality of education and the VEE's compliance with the ESEVT Standards) or not compliant (one or more Major Deficiencies that affect the quality of education and the VEE's compliance with the ESEVT Standards).*

***For the writing of the Visitation Report, it is expected from all Visitors to:***

- ) use UK English, the standardised terminology proposed in the SOP and the international system of units (SI) (please remember that the Report will be public);*
- ) be concise and avoid cutting and copying what is already in the SER (the info provided on site must be added of course);*
- ) avoid comments in 'Findings', findings in 'Comments', repetitions/redundancies from other chapters;*
- ) avoid using phrases such as 'It seems that ...', 'The Team believes...', 'The Team finds...', 'It is the opinion of the Team that...';*
- ) be precise and avoid ambiguous terms like 'lack of' (please use 'absence' or 'insufficiency' or 'inadequacy' instead).*

***The different parts of each chapter of the Visitation Report must include the following:***

***-) Findings:***

- a short summary of the most relevant points from the SER (which according to observations on site must be corrected on site if necessary)*
- new relevant information gained on site*

***-) Comments:***

- commendations to the VEEs for things which are worthy of praise (if any)*
- a brief summary in general terms of what is compliant with the relevant Standard*
- a list of what is partially/not compliant with the relevant Standard, with a clear explanation of the reason of the deficiency (if any)*

*-) **Suggestions for improvement:** they must be brief and only focused on ways for improving the partial/non-compliance with the Standards ('It is suggested to ..'); they shouldn't be too concrete but formulated in a broader sense, since it is the responsibility of the VEE to find the most appropriate way to correct the deficiencies.*

*-) **Decision of the Visitation Team:** it must be completed by the Coordinator after the Thursday afternoon team meeting, be consistent with the 'Findings' and 'Comments' of the relevant Standard and use the following standardised terminology:*

- The VEE is compliant with Standard X.Z.*
- The VEE is partially compliant with Standard X.Z. because of (relevant text – e.g. suboptimal clinical training in the equine species).*
- The VEE is not compliant with Standard X.Z. because of (relevant text – e.g. insufficient clinical training in the equine species).*

*The Draft A Visitation Report (based on findings, comments, suggestions and identification of potential deficiencies) is amended during the Visitation by each Visitor, based on the onsite findings and the discussions within the Visitation Team. The resulting Draft B must be completed before the end of the Visitation and sent to the Coordinator.*

***The text in italics in this template must be deleted in the final copy of the Visitation Report.***

## ***Standard distribution of the principal writers for the Visitation Report***

*(It may be modified at the discretion of the Chairperson and the Coordinator)*

*Introduction: CO*

*Area 1. Objectives, Organisation and QA Policy: QA (helped by CO)*

*Area 2. Finances: FSQ (helped by CO)*

*Area 3. Curriculum: BS (helped by all experts)*

*Except for Standards:*

*3.1.3: Clinical Sciences in companion animals (including equine and exotic pets): CS-CA*

*3.1.4: Clinical Sciences in food-producing animals: CS-FPA*

*3.1.5: Food Safety and Quality: FSQ*

*3.1.6: Professional knowledge: P*

*3.2 up to 3.4: QA*

*3.5 up to 3.7: P (helped by ST)*

*Area 4. Facilities and equipment: CS-CA (helped by P)*

*Area 5. Animal resources and teaching material of animal origin: CS-FPA (helped by ST)*

*Area 6. Learning resources: P (helped by ST)*

*Area 7. Student admission, progression and welfare: QA (helped by ST)*

*Area 8. Student assessment: BS (helped by ST)*

*Area 9. Academic and support staff: CS-FPA (helped by CS-CA)*

*Area 10. Research programme, postgraduate and continuing education: FSQ (helped by BS)*

*Executive Summary: CO (helped by Chairperson)*

*Indicators: CO (helped by all experts)*

*Rubrics: CO (helped by all experts)*

*(BS: Basic Sciences; CO: Coordinator; CS-CA: Clinical Sciences in companion animals; CS-FPA: Clinical Sciences in food-producing animals; FSQ: Food Safety and Quality; P: Practitioner; QA: Quality Assurance; ST: Student)*

## Contents of the Visitation Report

Introduction

1. Objectives, Organisation and QA Policy
  2. Finances
  3. Curriculum
  4. Facilities and equipment
  5. Animal resources and teaching material of animal origin
  6. Learning resources
  7. Student admission, progression and welfare
  8. Student assessment
  9. Academic and support staff
  10. Research programmes, continuing and postgraduate education
  11. ESEVT Indicators
  12. ESEVT Rubrics
- Executive Summary  
Glossary

## Introduction

*Brief history of the VEE and of its previous ESEVT Visitations (if any)*

*Main features of the VEE*

*Main developments since the last Visitation (or, if there has not been a previous one, in the period since the veterinary degree programme began)*

*Version and date of the ESEVT SOP which is valid for the Visitation*

## Area 1. Objectives, Organisation and QA Policy

**Standard 1.1: The VEE must have as its main objective the provision, in agreement with the EU Directives and ESG recommendations, of adequate, ethical, research-based, evidence-based veterinary training that enables the new graduate to perform as a veterinarian capable of entering all commonly recognised branches of the veterinary profession and to be aware of the importance of lifelong learning. The VEE must develop and follow its mission statement which must embrace all the ESEVT Standards.**

1.1.1. Findings

1.1.2. Comments

1.1.3. Suggestions for improvement

*1.1.3'. Questions to be asked to the VEE*

*1.1.3''. Issues to be clarified on-site*



1.1.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 1.2: The VEE must be part of a university or a higher education institution providing training recognised as being of an equivalent level and formally recognised as such in the respective country.**

**The person responsible for the veterinary curriculum and the person(s) responsible for the professional, ethical, and academic affairs of the Veterinary Teaching Hospital (VTH) must hold a veterinary degree.**

**The decision-making process, organisation and management of the VEE must allow implementation of its strategic plan and of a cohesive study programme, in compliance with the ESEVT Standards.**

1.2.1. Findings

1.2.2. Comments

1.2.3. Suggestions for improvement

*1.2.3'. Questions to be asked to the VEE*

*1.2.3''. Issues to be clarified on-site*

1.2.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 1.3: The VEE must have a strategic plan, which includes a SWOT analysis of its current activities, a list of objectives, and an operating plan with a timeframe and indicators for its implementation.**

1.3.1. Findings

1.3.2. Comments

1.3.3. Suggestions for improvement

*1.3.3'. Questions to be asked to the VEE*

*1.3.3''. Issues to be clarified on-site*

1.3.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 1.4: The VEE must have a policy and associated written procedures for the assurance of the quality and standards of its programmes and awards. It must also**

**commit itself explicitly to the development of a culture which recognises the importance of quality, and quality assurance, within their VEE. To achieve this, the VEE must develop and implement a strategy for the continuous enhancement of quality. The development and implementation of the VEE's strategy must include a role for students and other stakeholders, both internal and external, and the strategy must have a formal status and be publicly available.**

1.4.1. Findings

1.4.2. Comments

1.4.3. Suggestions for improvement

*1.4.3'. Questions to be asked to the VEE*

*1.4.3''. Issues to be clarified on-site*

1.4.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 1.5: The VEE must provide evidence that it interacts with its stakeholders and the wider society. Such public information must be clear, objective and readily accessible; the information must include up-to-date information about the study programme, views and employment destinations of past students as well as the profile of the current student population.**

**The VEE's website must mention the ESEVT VEE's status and its last Self Evaluation Report and Visitation Report must be easily available for the public.**

1.5.1. Findings

1.5.2. Comments

1.5.3. Suggestions for improvement

*1.5.3'. Questions to be asked to the VEE*

*1.5.3''. Issues to be clarified on-site*

1.5.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 1.6: The VEE must monitor and periodically review its activities, both quantitative and qualitative, to ensure that they achieve the objectives set for them and respond to the needs of students and society. The VEE must make public how this analysis of information has been utilised in the further development of its activities and provide**

**evidence as to the involvement of both students and staff in the provision, analysis and implementation of such data.**

**Any action planned or taken as a result of this data analysis must be communicated to all those concerned.**

1.6.1. Findings

1.6.2. Comments

1.6.3. Suggestions for improvement

*1.6.3'. Questions to be asked to the VEE*

*1.6.3''. Issues to be clarified on-site*

1.6.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 1.7: The VEE must undergo external review through the ESEVT on a cyclical basis. Evidence must be provided of such external evaluation with the assurance that the progress made since the last ESEVT evaluation was linked to a continuous quality assurance process.**

1.7.1. Findings

1.7.2. Comments

1.7.3. Suggestions for improvement

*1.7.3'. Questions to be asked to the VEE*

*1.7.3''. Issues to be clarified on-site*

1.7.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

## **Area 2. Finances**

**Standard 2.1: Finances must be demonstrably adequate to sustain the requirements for the VEE to meet its mission and to achieve its objectives for education, research and services. The description must include both expenditures (separated into personnel costs, operating costs, maintenance costs and equipment) and revenues (separated into public funding, tuition fees, services, research grants and other sources).**

2.1.1. Findings

2.1.2. Comments

2.1.3. Suggestions for improvement

*2.1.3'. Questions to be asked to the VEE*

*2.1.3''. Issues to be clarified on-site*

2.1.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 2.2: Clinical and field services must function as instructional resources. Instructional integrity of these resources must take priority over financial self-sufficiency of clinical services operations.**

**The VEE must have sufficient autonomy in order to use the resources to implement its strategic plan and to meet the ESEVT Standards.**

2.2.1. Findings

2.2.2. Comments

2.2.3. Suggestions for improvement

*2.2.3'. Questions to be asked to the VEE*

*2.2.3''. Issues to be clarified on-site*

2.2.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 2.3: Resources allocation must be regularly reviewed to ensure that available resources meet the requirements.**

2.3.1. Findings

2.3.2. Comments

2.3.3. Suggestions for improvement

*2.3.3'. Questions to be asked to the VEE*

*2.3.3''. Issues to be clarified on-site*

2.3.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

## **Area 3. Curriculum**

**Standard 3.1: The curriculum must be designed, resourced and managed to ensure all graduates have achieved the graduate attributes expected to be fully compliant with the EU Directive 2005/36/EC (as amended by directive 2013/55/EU) and its Annex V.4.1. The curriculum must include the subjects (input) and must allow the acquisition of the Day One Competences (output) listed in Annex 2. This concerns Basic Sciences, Clinical Sciences in companion animals (including equine and exotic pets), Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management), Food Safety and Quality, and Professional Knowledge.**

### **3.1.1. General findings**

3.1.1.1. Findings

3.1.1.2. Comments

3.1.1.3. Suggestions for improvement

*3.1.1.3'. Questions to be asked to the VEE*

*3.1.1.3". Issues to be clarified on-site*

3.1.1.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

### **3.1.2. Basic Sciences**

3.1.2.1. Findings

3.1.2.2. Comments

3.1.2.3. Suggestions for improvement

*3.1.2.3'. Questions to be asked to the VEE*

*3.1.2.3". Issues to be clarified on-site*

3.1.2.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

### **3.1.3. Clinical Sciences in companion animals (including equine and exotic pets)**

3.1.3.1. Findings

3.1.3.2. Comments

3.1.3.3. Suggestions for improvement

*3.1.3.3'. Questions to be asked to the VEE*

*3.1.3.3''. Issues to be clarified on-site*

3.1.3.4 Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**3.1.4. Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management)**

3.1.4.1. Findings

3.1.4.2. Comments

3.1.4.3. Suggestions for improvement

*3.1.4.3'. Questions to be asked to the VEE*

*3.1.4.3''. Issues to be clarified on-site*

3.1.4.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**3.1.5. Food Safety and Quality**

3.1.5.1. Findings

3.1.5.2. Comments

3.1.5.3. Suggestions for improvement

*3.1.5.3'. Questions to be asked to the VEE*

*3.1.5.3''. Issues to be clarified on-site*

3.1.5.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**3.1.6. Professional Knowledge**

3.1.6.1. Findings

3.1.6.2. Comments

### 3.1.6.3. Suggestions for improvement

*3.1.6.3'. Questions to be asked to the VEE*

*3.1.6.3''. Issues to be clarified on-site*

3.1.6.4 Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 3.2: Each study programme provided by the VEE must be competency-based and designed so that it meets the objectives set for it, including the intended learning outcomes. The qualification resulting from a programme must be clearly specified and communicated and must refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.**

**The VEE must provide proof of a QA system that promotes and monitors the presence of an academic environment highly conducive to learning including self-learning. Details of the type, provision and updating of appropriate learning opportunities for the students must be clearly described, as well as the involvement of students.**

**The VEE must also describe how it encourages and prepares students for self-learning and lifelong learning.**

### 3.2.1. Findings

### 3.2.2. Comments

### 3.2.3. Suggestions for improvement

*3.2.3'. Questions to be asked to the VEE*

*3.2.3''. Issues to be clarified on-site*

3.2.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 3.3: Programme learning outcomes must:**

- **ensure the effective alignment of all content, teaching, learning and assessment activities of the degree programme to form a cohesive framework**
- **include a description of Day One Competences**
- **form the basis for explicit statements of the objectives and learning outcomes of individual units of study**
- **be communicated to staff and students**
- **be regularly reviewed, managed and updated to ensure they remain relevant, adequate and are effectively achieved.**

### 3.3.1. Findings

3.3.2. Comments

3.3.3. Suggestions for improvement

3.3.3'. *Questions to be asked to the VEE*

3.3.3''. *Issues to be clarified on-site*

3.3.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 3.4: The VEE must have a formally constituted committee structure (which includes effective student representation), with clear and empowered reporting lines, to oversee and manage the curriculum and its delivery. The committee(s) must:**

- **determine the pedagogical basis, design, delivery methods and assessment methods of the curriculum**
- **oversee QA of the curriculum, particularly gathering, evaluating, making change and responding to feedback from stakeholders, peer reviewers and external assessors, and data from examination/assessment outcomes**
- **perform on going and periodic review of the curriculum at least every seven years by involving staff, students and stakeholders; these reviews must lead to continuous improvement. Any action taken or planned as a result of such a review must be communicated to all those concerned**
- **identify and meet training needs for all types of staff, maintaining and enhancing their competence for the ongoing curriculum development.**

3.4.1. Findings

3.4.2. Comments

3.4.3. Suggestions for improvement

3.4.3'. *Questions to be asked to the VEE*

3.4.3''. *Issues to be clarified on-site*

3.4.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 3.5: External Practical Training (EPT) is compulsory training activities organised outside the VEE, the student being under the direct supervision of a non-academic person (e.g. a practitioner). EPT cannot replace the core intramural training nor the extramural training under the close supervision of academic staff (e.g. ambulatory clinics, herd health management, practical training in FSQ and VPH).**



**Since the veterinary degree is a professional qualification with Day One Competences, EPT must complement and strengthen the academic education inter alia by enhancing student's professional knowledge.**

3.5.1. Findings

3.5.2. Comments

3.5.3. Suggestions for improvement

3.5.3'. *Questions to be asked to the VEE*

3.5.3''. *Issues to be clarified on-site*

3.5.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 3.6: The EPT providers must have an agreement with the VEE and the student (in order to state their respective rights and duties, including insurance matters), provide a standardised evaluation of the performance of the student during their EPT and be allowed to provide feedback to the VEE on the EPT programme.**

**There must be a member of the academic staff responsible for the overall supervision of the EPT, including liaison with EPT providers.**

3.6.1. Findings

3.6.2. Comments

3.6.3. Suggestions for improvement

3.6.3'. *Questions to be asked to the VEE*

3.6.3''. *Issues to be clarified on-site*

3.6.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 3.7: Students must take responsibility for their own learning during EPT. This includes preparing properly before each placement, keeping a proper record of their experience during EPT by using a logbook provided by the VEE and evaluating the EPT. Students must be allowed to complain officially and/or anonymously about issues occurring during EPT. The VEE must have a system of QA to monitor the implementation, progress and then feedback within the EPT activities.**

3.7.1. Findings

3.7.2. Comments

### 3.7.3. Suggestions for improvement

*3.7.3'. Questions to be asked to the VEE*

*3.7.3''. Issues to be clarified on-site*

3.7.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

## **Area 4. Facilities and equipment**

**Standard 4.1: All aspects of the physical facilities must provide an environment conducive to learning, including internet access. The veterinary VEE must have a clear strategy and programme for maintaining and upgrading its buildings and equipment. Facilities must comply with all relevant legislation including health, safety, biosecurity, accessibility to people with reduced mobility, and EU animal welfare and care standards.**

4.1.1. Findings

4.1.2. Comments

4.1.3. Suggestions for improvement

*4.1.3'. Questions to be asked to the VEE*

*4.1.3''. Issues to be clarified on-site*

4.1.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 4.2: Lecture theatres, teaching laboratories, tutorial rooms, clinical facilities and other teaching spaces must be adequate in number, size and equipped for the instructional purposes and must be well maintained. The facilities must be adapted for the number of students enrolled. Students must have ready access to adequate and sufficient study, self-learning, recreation, locker, sanitary and food service facilities. Offices, teaching preparation and research laboratories must be sufficient for the needs of the academic and support staff.**

4.2.1. Findings

4.2.2. Comments

4.2.3. Suggestions for improvement

*4.2.3'. Questions to be asked to the VEE*

4.2.3". *Issues to be clarified on-site*

4.2.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 4.3: The livestock facilities, animal housing, core clinical teaching facilities and equipment used by the VEE for teaching purposes must:**

- **be sufficient in capacity and adapted for the number of students enrolled in order to allow safe hands-on training for all students**
- **be of a high standard, well maintained and fit for the purpose**
- **promote best husbandry, welfare and management practices**
- **ensure relevant biosecurity and bio-containment**
- **be designed to enhance learning.**

4.3.1. Findings

4.3.2. Comments

4.3.3. Suggestions for improvement

4.3.3'. *Questions to be asked to the VEE*

4.3.3". *Issues to be clarified on-site*

4.3.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 4.4: Core clinical teaching facilities must be provided in a veterinary teaching hospital (VTH) with 24/7 emergency services at least for companion animals and equines. Within the VTH, the VEE must unequivocally demonstrate that standard of education and clinical research are compliant with all ESEVT Standards, e.g. research-based and evidence-based clinical training supervised by academic staff trained to teach and to assess, availability for staff and students of facilities and patients for performing clinical research and relevant QA procedures.**

**For ruminants, on-call service must be available if emergency services do not exist for those species in a VTH.**

**The VEE must ensure state-of-the-art standards of teaching clinics which remain comparable with or exceeding the best available in the private sector.**

**The VTH and any hospitals, practices and facilities (including EPT) which are involved with the curriculum must meet the relevant national Practice Standards.**

4.4.1. Findings

4.4.2. Comments

4.4.3. Suggestions for improvement

4.4.3'. *Questions to be asked to the VEE*

4.4.3". *Issues to be clarified on-site*

4.4.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 4.5: The VEE must ensure that students have access to a broad range of diagnostic and therapeutic facilities, including but not limited to: diagnostic imaging, anaesthesia, clinical pathology, intensive/critical care, surgeries and treatment facilities, ambulatory services, pharmacy and necropsy facilities.**

4.5.1. Findings

4.5.2. Comments

4.5.3. Suggestions for improvement

4.5.3'. *Questions to be asked to the VEE*

4.5.3". *Issues to be clarified on-site*

4.5.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 4.6: Appropriate isolation facilities must be provided to meet the need for the isolation and containment of animals with communicable diseases. Such isolation facilities must be properly constructed, ventilated, maintained and operated to provide for animal care and for prevention of spread of infectious agents. They must be adapted to all animal species commonly handled in the VTH.**

4.6.1. Findings

4.6.2. Comments

4.6.3. Suggestions for improvement

4.6.3'. *Questions to be asked to the VEE*

4.6.3". *Issues to be clarified on-site*

4.6.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 4.7: The VEE must have an ambulatory clinic for production animals or equivalent facilities so that students can practise field veterinary medicine and Herd Health Management under academic supervision.**

4.7.1. Findings

4.7.2. Comments

4.7.3. Suggestions for improvement

4.7.3'. *Questions to be asked to the VEE*

4.7.3''. *Issues to be clarified on-site*

4.7.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 4.8: The transport of students, live animals, cadavers, materials from animal origin and other teaching materials must be done in agreement with national and EU standards, to ensure the safety of students and staff and to prevent the spread of infectious agents.**

4.8.1. Findings

4.8.2. Comments

4.8.3. Suggestions for improvement

4.8.3'. *Questions to be asked to the VEE*

4.8.3''. *Issues to be clarified on-site*

4.8.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 4.9: Operational policies and procedures (including e.g. biosecurity, good laboratory practice and good clinical practice) must be taught and posted for students, staff and visitors and a Biosafety manual must be available. The VEE must demonstrate a clear commitment for the delivery of biosafety and biosecurity, e.g. by a specific committee structure. The VEE must have a system of QA to monitor and assure clinical, laboratory and farm services, including a regular monitoring of the feedback from students, staff and clients.**

4.9.1. Findings

4.9.2. Comments

#### 4.9.3. Suggestions for improvement

4.9.3'. *Questions to be asked to the VEE*

4.9.3''. *Issues to be clarified on-site*

4.9.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

### **Area 5. Animal resources and teaching material of animal origin**

**Standard 5.1: The number and variety of healthy and diseased animals, cadavers, and material of animal origin must be adequate for providing the practical and safe hands-on training (in the areas of Basic Sciences, Clinical Sciences, Pathology, Animal Production, Food Safety and Quality) and adapted to the number of students enrolled. Evidence must be provided that these data are regularly recorded and that procedures are in place for correcting any deficiencies.**

#### 5.1.1. Findings

#### 5.1.2. Comments

#### 5.1.3. Suggestions for improvement

5.1.3'. *Questions to be asked to the VEE*

5.1.3''. *Issues to be clarified on-site*

5.1.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 5.2: In addition to the training provided in the VEE, experience can include practical training at external sites, provided this training is organised under direct academic supervision and following the same standards as those applied in the VEE.**

#### 5.2.1. Findings

#### 5.2.2. Comments

#### 5.2.3. Suggestions for improvement

5.2.3'. *Questions to be asked to the VEE*

5.2.3''. *Issues to be clarified on-site*

5.2.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 5.3: The VTH must provide nursing care skills and instruction in nursing procedures. Under all situations students must be active participants in the clinical workup of patients, including problem-oriented diagnostic approach together with diagnostic decision-making.**

5.3.1. Findings

5.3.2. Comments

5.3.3. Suggestions for improvement

5.3.3'. *Questions to be asked to the VEE*

5.3.3''. *Issues to be clarified on-site*

5.3.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 5.4: Medical records must be comprehensive and maintained in an effective retrieval system (preferably an electronic patient record system) to efficiently support the teaching, research, and service programmes of the VEE.**

5.4.1. Findings

5.4.2. Comments

5.4.3. Suggestions for improvement

5.4.3'. *Questions to be asked to the VEE*

5.4.3''. *Issues to be clarified on-site*

5.4.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

## **Area 6. Learning resources**

**Standard 6.1: State-of-the-art learning resources must be adequate and available to support veterinary education, research, services and continuing education. When the study programme is provided in several tracks/languages, the learning resources must be available in all used languages. Timely access to learning resources, whether through**

**print, electronic media or other means, must be available to students and staff and, when appropriate, to stakeholders. State-of-the-art procedures for bibliographical search and for access to databases and learning resources must be taught to undergraduate students.**

6.1.1. Findings

6.1.2. Comments

6.1.3. Suggestions for improvement

*6.1.3'. Questions to be asked to the VEE*

*6.1.3''. Issues to be clarified on-site*

6.1.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 6.2: Staff and students must have full access on site to an academic library administered by a qualified librarian, an Information Technology (IT) unit managed by an IT expert, an e-learning platform, and all the relevant human and physical resources necessary for the development of instructional materials by the staff and their use by the students.**

**The relevant electronic information, database and other intranet resources must be easily available for students and staff both in the VEE's core facilities via wireless connection (Wi-Fi) and from outside the VEE through a hosted secured connection, e.g. Virtual Private Network (VPN).**

6.2.1. Findings

6.2.2. Comments

6.2.3. Suggestions for improvement

*6.2.3'. Questions to be asked to the VEE*

*6.2.3''. Issues to be clarified on-site*

6.2.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 6.3: The VEE must provide students with unimpeded access to learning resources, internet and internal study resources, and equipment for the development of procedural skills (e.g. models). The use of these resources must be aligned with the pedagogical environment and learning outcomes within the programme and have mechanisms in place to evaluate the teaching value of changes in learning resources.**

6.3.1. Findings



6.3.2. Comments

6.3.3. Suggestions for improvement

6.3.3'. *Questions to be asked to the VEE*

6.3.3''. *Issues to be clarified on-site*

6.3.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

## **Area 7. Student admission, progression and welfare**

**Standard 7.1: The VEE must consistently apply pre-defined and published regulations covering all phases of the student “life cycle”, e.g. student admission, progression and certification.**

**In relation to enrolment, the VEE must provide accurate and complete information regarding all aspects of the educational programme in all advertisings for prospective national and international students.**

**Formal cooperations with other VEEs must also be clearly advertised.**

7.1.1. Findings

7.1.2. Comments

7.1.3. Suggestions for improvement

7.1.3'. *Questions to be asked to the VEE*

7.1.3''. *Issues to be clarified on-site*

7.1.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 7.2: The number of students admitted must be consistent with the resources available at the VEE for staff, buildings, equipment, healthy and diseased animals, and materials of animal origin.**

7.2.1. Findings

7.2.2. Comments

7.2.3. Suggestions for improvement

7.2.3'. *Questions to be asked to the VEE*

7.2.3". *Issues to be clarified on-site*

7.2.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 7.3: The selection and progression criteria must be clearly defined, consistent, and defensible, be free of discrimination or bias, and take into account the fact that students are admitted with a view to their entry to the veterinary profession in due course. The VEE must regularly review and reflect on the selection processes to ensure they are appropriate for students to complete the programme successfully. If the selection processes are decided by another authority, the latter must regularly receive feedback from the VEE.**

**Adequate training (including periodic refresher training) must be provided for those involved in the selection process to ensure applicants are evaluated fairly and consistently.**

7.3.1. Findings

7.3.2. Comments

7.3.3. Suggestions for improvement

7.3.3'. *Questions to be asked to the VEE*

7.3.3". *Issues to be clarified on-site*

7.3.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 7.4: There must be clear policies and procedures on how applicants with disabilities or illnesses are considered and, if appropriate, accommodated in the programme, taking into account the requirement that all students must be capable of meeting the ESEVT Day One Competences by the time they graduate.**

7.4.1. Findings

7.4.2. Comments

7.4.3. Suggestions for improvement

7.4.3'. *Questions to be asked to the VEE*

7.4.3". *Issues to be clarified on-site*

7.4.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the*

*relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 7.5: The basis for decisions on progression (including academic progression and professional fitness to practise) must be explicit and readily available to the students. The VEE must provide evidence that it has mechanisms in place to identify and provide remediation and appropriate support (including termination) for students who are not performing adequately.**

**The VEE must have mechanisms in place to monitor attrition and progression and be able to respond and amend admission selection criteria (if permitted by national or university law) and student support if required.**

7.5.1. Findings

7.5.2. Comments

7.5.3. Suggestions for improvement

*7.5.3'. Questions to be asked to the VEE*

*7.5.3''. Issues to be clarified on-site*

7.5.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 7.6: Mechanisms for the exclusion of students from the programme for any reason must be explicit.**

**The VEE's policies for managing appeals against decisions, including admissions, academic and progression decisions and exclusion, must be transparent and publicly available.**

7.6.1. Findings

7.6.2. Comments

7.6.3. Suggestions for improvement

*7.6.3'. Questions to be asked to the VEE*

*7.6.3''. Issues to be clarified on-site*

7.6.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 7.7: Provisions must be made by the VEE to support the physical, emotional and welfare needs of students. This includes, but is not limited to, learning support and counselling services, career advice, and fair and transparent mechanisms for dealing with student illness, impairment and disability during the programme. This shall include**

**provision of reasonable adjustments for disabled students, consistent with all relevant equality and/or human rights legislation.**

**There must be effective mechanisms for resolution of student grievances (e.g. interpersonal conflict or harassment).**

7.7.1. Findings

7.7.2. Comments

7.7.3. Suggestions for improvement

7.7.3'. *Questions to be asked to the VEE*

7.7.3''. *Issues to be clarified on-site*

7.7.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 7.8: Mechanisms must be in place by which students can convey their needs and wants to the VEE. The VEE must provide students with a mechanism, anonymously if they wish, to offer suggestions, comments and complaints regarding compliance of the VEE with national and international legislation and the ESEVT Standards.**

7.8.1. Findings

7.8.2. Comments

7.8.3. Suggestions for improvement

7.8.3'. *Questions to be asked to the VEE*

7.8.3''. *Issues to be clarified on-site*

7.8.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

## **Area 8. Student assessment**

**Standard 8.1: The VEE must ensure that there is a clearly identified structure within the VEE showing lines of responsibility for the assessment strategy to ensure coherence of the overall assessment regime and to allow the demonstration of progressive development across the programme towards entry-level competence.**

8.1.1. Findings

8.1.2. Comments

8.1.3. Suggestions for improvement

*8.1.3'. Questions to be asked to the VEE*

*8.1.3''. Issues to be clarified on-site*

8.1.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 8.2: The assessment tasks and grading criteria for each unit of study in the programme must be published, applied consistently, clearly identified and available to students in a timely manner well in advance of the assessment. Requirements to pass must be explicit.**

**The VEE must properly document the results of assessment and provide the students with timely feedback on their assessments.**

**Mechanisms for students to appeal against assessment outcomes must be explicit.**

8.2.1. Findings

8.2.2. Comments

8.2.3. Suggestions for improvement

*8.2.3'. Questions to be asked to the VEE*

*8.2.3''. Issues to be clarified on-site*

8.2.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 8.3: The VEE must have a process in place to review assessment outcomes, to change assessment strategies and to ensure the accuracy of the procedures when required. Programme learning outcomes covering the full range of professional knowledge, skills, competences and attributes must form the basis for assessment design and underpin decisions on progression.**

8.3.1. Findings

8.3.2. Comments

8.3.3. Suggestions for improvement

*8.3.3'. Questions to be asked to the VEE*

8.3.3". *Issues to be clarified on-site*

8.3.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 8.4: Assessment strategies must allow the VEE to certify student achievement of learning objectives at the level of the programme and individual units of study. The VEE must ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.**

8.4.1. Findings

8.4.2. Comments

8.4.3. Suggestions for improvement

8.4.3'. *Questions to be asked to the VEE*

8.4.3". *Issues to be clarified on-site*

8.4.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 8.5: Methods of formative and summative assessment must be valid and reliable and comprise a variety of approaches. Direct assessment of clinical skills and Day One Competences (some of which may be on simulated patients), must form a significant component of the overall process of assessment. It must also include the quality control of the student logbooks in order to ensure that all clinical procedures, practical and hands-on training planned in the study programme have been fully completed by each individual student.**

8.5.1. Findings

8.5.2. Comments

8.5.3. Suggestions for improvement

8.5.3'. *Questions to be asked to the VEE*

8.5.3". *Issues to be clarified on-site*

8.5.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

## **Area 9. Academic and support staff**

**Standard 9.1: The VEE must ensure that all staff are appropriately qualified and prepared for their roles, in agreement with national and EU regulations and must apply fair and transparent processes for the recruitment and development of staff.**

**A formal training (including good teaching and evaluation practices, learning and e-learning resources, biosecurity and QA procedures) must be in place for all staff involved with teaching.**

**Most academic staff (calculated as FTE) involved in veterinary training must be veterinarians. It is expected that more than 2/3 of the instruction that the students receive, as determined by student teaching hours, is delivered by qualified veterinarians.**

9.1.1. Findings

9.1.2. Comments

9.1.3. Suggestions for improvement

*9.1.3'. Questions to be asked to the VEE*

*9.1.3''. Issues to be clarified on-site*

9.1.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 9.2: The total number, qualifications and skills of all staff involved with the programme, including teaching staff, 'adjunct' staff, technical, administrative and support staff, must be sufficient and appropriate to deliver the educational programme and fulfil the VEE's mission.**

**A procedure must be in place to assess if the staff involved with teaching display competence and effective teaching skills in all relevant aspects of the curriculum that they teach, regardless of whether they are full or part time, residents, interns or other postgraduate students, adjuncts or off-campus contracted teachers.**

9.2.1. Findings

9.2.2. Comments

9.2.3. Suggestions for improvement

*9.2.3'. Questions to be asked to the VEE*

*9.2.3''. Issues to be clarified on-site*

9.2.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 9.3: Staff must be given opportunities to develop and extend their teaching and assessment knowledge and must be encouraged to improve their skills. Opportunities for didactic and pedagogic training and specialisation must be available. The VEE must clearly define any systems of reward for teaching excellence in operation.**

**Academic positions must offer the security and benefits necessary to maintain stability, continuity, and competence of the academic staff. They must have a balanced workload of teaching, research and service depending on their role. They must have reasonable opportunities and resources for participation in scholarly activities.**

9.3.1. Findings

9.3.2. Comments

9.3.3. Suggestions for improvement

*9.3.3'. Questions to be asked to the VEE*

*9.3.3''. Issues to be clarified on-site*

9.3.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 9.4: The VEE must provide evidence that it utilises a well-defined, comprehensive and publicised programme for the professional growth and development of academic and support staff, including formal appraisal and informal mentoring procedures.**

**Staff must have the opportunity to contribute to the VEE's direction and decision-making processes.**

**Promotion criteria for academic and support staff must be clear and explicit. Promotions for teaching staff must recognise excellence in, and (if permitted by the national or university law) place equal emphasis on all aspects of teaching (including clinical teaching), research, service and other scholarly activities.**

9.4.1. Findings

9.4.2. Comments

9.4.3. Suggestions for improvement

*9.4.3'. Questions to be asked to the VEE*

*9.4.3''. Issues to be clarified on-site*

9.4.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 9.5: A system for assessment of teaching staff must be in operation and must**



**include student participation. Results must be available to those undertaking external reviews and commented upon in reports.**

9.5.1. Findings

9.5.2. Comments

9.5.3. Suggestions for improvement

*9.5.3'. Questions to be asked to the VEE*

*9.5.3''. Issues to be clarified on-site*

9.5.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

## **Area 10. Research programmes, continuing and postgraduate education**

**Standard 10.1: The VEE must demonstrate significant and broad research activities of staff that integrate with and strengthen the veterinary degree programme through research-based teaching.**

10.1.1. Findings

10.1.2. Comments

10.1.3. Suggestions for improvement

*10.1.3'. Questions to be asked to the VEE*

*10.1.3''. Issues to be clarified on-site*

10.1.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 10.2: All students must be trained in scientific method and research techniques relevant to evidence-based veterinary medicine and must have opportunities to participate in research programmes.**

10.2.1. Findings

10.2.2. Comments

10.2.3. Suggestions for improvement

*10.2.3'. Questions to be asked to the VEE*

*10.2.3". Issues to be clarified on-site*

10.2.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 10.3: The VEE must provide advanced postgraduate degree programmes, e.g. PhD, internships, residencies and continuing education programmes that complement and strengthen the veterinary degree programme and are relevant to the needs of the profession and society.**

10.3.1. Findings

10.3.2. Comments

10.3.3. Suggestions for improvement

*10.3.3'. Questions to be asked to the VEE*

*10.3.3". Issues to be clarified on-site*

10.3.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**Standard 10.4: The VEE must have a system of QA to evaluate how research activities provide opportunities for student training and staff promotion, and how research approaches, methods and results are integrated into the veterinary teaching programmes.**

10.4.1. Findings

10.4.2. Comments

10.4.3. Suggestions for improvement

*10.4.3'. Questions to be asked to the VEE*

*10.4.3". Issues to be clarified on-site*

10.4.4. Decision of the Visitation Team, *i.e. whether the VEE is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

**11. ESEVT Indicators** (*see Annex 4*)

(*Include here both pages of the Excel file – i.e. the raw data and the calculated Indicators*)

**12. ESEVT Rubrics** (summary of the decision of the Visitation Team of the VEE for each ESEVT Standard, i.e. (total or substantial) compliance (C), partial compliance (PC) (Minor Deficiency) or non-compliance (NC) (Major Deficiency))

| Area 1. Objectives, Organisation and QA Policy  | C | PC | NC |
|---|---|----|----|
| Standard 1.1: The VEE must have as its main objective the provision, in agreement with the EU Directives and ESG recommendations, of adequate, ethical, research-based, evidence-based veterinary training that enables the new graduate to perform as a veterinarian capable of entering all commonly recognised branches of the veterinary profession and to be aware of the importance of lifelong learning.<br>The VEE must develop and follow its mission statement which must embrace all the ESEVT Standards.  |   |    |    |
| Standard 1.2: The VEE must be part of a university or a higher education institution providing training recognised as being of an equivalent level and formally recognised as such in the respective country.<br>The person responsible for the veterinary curriculum and the person(s) responsible for the professional, ethical, and academic affairs of the Veterinary Teaching Hospital (VTH) must hold a veterinary degree.<br>The decision-making process, organisation and management of the VEE must allow implementation of its strategic plan and of a cohesive study programme, in compliance with the ESEVT Standards.                                      |   |    |    |
| Standard 1.3: The VEE must have a strategic plan, which includes a SWOT analysis of its current activities, a list of objectives, and an operating plan with a timeframe and indicators for its implementation.   |   |    |    |
| Standard 1.4: The VEE must have a policy and associated written procedures for the assurance of the quality and Standards of its programmes and awards. It must also commit itself explicitly to the development of a culture which recognises the importance of quality, and quality assurance, within their VEE. To achieve this, the VEE must develop and implement a strategy for the continuous enhancement of quality. The development and implementation of the VEE's strategy must include a role for students and other stakeholders, both internal and external, and the strategy must have a formal status and be publicly available.                        |   |    |    |
| Standard 1.5: The VEE must provide evidence that it interacts with its stakeholders and the wider society. Such public information must be clear, objective and readily accessible; the information must include up-to-date information about the study programme, views and employment destinations of past students as well as the profile of the current student population.<br>The VEE's website must mention the ESEVT VEE's status and its last Self Evaluation Report and Visitation Report must be easily available for the public.   |   |    |    |
| Standard 1.6: The VEE must monitor and periodically review its activities, both quantitative and qualitative, to ensure that they achieve the objectives set for them and respond to the needs of students and society. The VEE must make public how this analysis of information has been utilised in the further development of its activities and provide evidence as to the involvement of both students and staff in the provision, analysis and implementation of such data.<br>Any action planned or taken as a result of this data analysis must be communicated to all those concerned.  |   |    |    |
| Standard 1.7: The VEE must undergo external review through the ESEVT on a cyclical basis. Evidence must be provided of such external evaluation with the assurance that the progress made since the last ESEVT evaluation was linked to a continuous quality assurance process.   |   |    |    |
| <b>Area 2. Finances</b>   |   |    |    |
| Standard 2.1: Finances must be demonstrably adequate to sustain the requirements for the VEE to meet its mission and to achieve its objectives for education, research and services. The description must include both expenditures (separated into personnel costs, operating costs, maintenance costs and equipment) and revenues (separated into public funding, tuition fees, services, research grants and other sources).   |   |    |    |
| Standard 2.2: Clinical and field services must function as instructional resources. Instructional integrity of these resources must take priority over financial self-sufficiency of clinical services operations.<br>The VEE must have sufficient autonomy in order to use the resources to implement its strategic plan and to meet the ESEVT Standards.  |   |    |    |
| Standard 2.3: Resources allocation must be regularly reviewed to ensure that available resources meet the requirements.   |   |    |    |
| <b>Area 3. Curriculum</b>   |   |    |    |
| Standard 3.1: The curriculum must be designed, resourced and managed to ensure all graduates have achieved the graduate attributes expected to be fully compliant with the EU Directive 2005/36/EC (as amended by directive 2013/55/EU) and its Annex V.4.1. The curriculum must include the subjects (input) and must allow the acquisition of the Day One Competences (output) listed in Annex 2. This concerns Basic Sciences, Clinical Sciences in companion animals (including equine and exotic pets), Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management), Food Safety and Quality, and Professional Knowledge. |   |    |    |
| 3.1.1. General findings   |   |    |    |
| 3.1.2. Basic sciences   |   |    |    |
| 3.1.3. Clinical Sciences in companion animals (including equine and exotic pets)  |   |    |    |
| 3.1.4. Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management)   |   |    |    |
| 3.1.5. Food Safety and Quality  |   |    |    |
| 3.1.6. Professional Knowledge   |   |    |    |

|  |  |  |  |
|--|--|--|--|
| <p><b>Standard 3.2:</b> Each study programme provided by the VEE must be competency-based and designed so that it meets the objectives set for it, including the intended learning outcomes. The qualification resulting from a programme must be clearly specified and communicated and must refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.</p> <p>The VEE must provide proof of a QA system that promotes and monitors the presence of an academic environment highly conducive to learning including self-learning. Details of the type, provision and updating of appropriate learning opportunities for the students must be clearly described, as well as the involvement of students.</p> <p>The VEE must also describe how it encourages and prepares students for self-learning and lifelong learning.</p>  |  |  |  |
| <p><b>Standard 3.3:</b> Programme learning outcomes must:</p> <ul style="list-style-type: none"> <li>• ensure the effective alignment of all content, teaching, learning and assessment activities of the degree programme to form a cohesive framework</li> <li>• include a description of Day One Competences</li> <li>• form the basis for explicit statements of the objectives and learning outcomes of individual units of study</li> <li>• be communicated to staff and students</li> <li>• be regularly reviewed, managed and updated to ensure they remain relevant, adequate and are effectively achieved.</li> </ul>  |  |  |  |
| <p><b>Standard 3.4:</b> The VEE must have a formally constituted committee structure (which includes effective student representation), with clear and empowered reporting lines, to oversee and manage the curriculum and its delivery. The committee(s) must:</p> <ul style="list-style-type: none"> <li>• determine the pedagogical basis, design, delivery methods and assessment methods of the curriculum</li> <li>• oversee QA of the curriculum, particularly gathering, evaluating, making change and responding to feedback from stakeholders, peer reviewers and external assessors, and data from examination/assessment outcomes</li> <li>• perform ongoing and periodic review of the curriculum at least every seven years by involving staff, students and stakeholders; these reviews must lead to continuous improvement. Any action taken or planned as a result of such a review must be communicated to all those concerned</li> <li>• identify and meet training needs for all types of staff, maintaining and enhancing their competence for the ongoing curriculum development.</li> </ul> |  |  |  |
| <p><b>Standard 3.5:</b> External Practical Training (EPT) is compulsory training activities organised outside the VEE, the student being under the direct supervision of a non-academic person (e.g. a practitioner). EPT cannot replace the core intramural training nor the extramural training under the close supervision of academic staff (e.g. ambulatory clinics, herd health management, practical training in FSQ and VPH).</p> <p>Since the veterinary degree is a professional qualification with Day One Competences, EPT must complement and strengthen the academic education inter alia by enhancing student's professional knowledge.</p>   |  |  |  |
| <p><b>Standard 3.6:</b> The EPT providers must have an agreement with the VEE and the student (in order to state their respective rights and duties, including insurance matters), provide a standardised evaluation of the performance of the student during their EPT and be allowed to provide feedback to the VEE on the EPT programme.</p> <p>There must be a member of the academic staff responsible for the overall supervision of the EPT, including liaison with EPT providers.</p>  |  |  |  |
| <p><b>Standard 3.7:</b> Students must take responsibility for their own learning during EPT. This includes preparing properly before each placement, keeping a proper record of their experience during EPT by using a logbook provided by the VEE and evaluating the EPT. Students must be allowed to complain officially and/or anonymously about issues occurring during EPT. The VEE must have a system of QA to monitor the implementation, progress and then feedback within the EPT activities.</p>   |  |  |  |
| <b>Area 4. Facilities and equipment</b>  |  |  |  |
| <p><b>Standard 4.1:</b> All aspects of the physical facilities must provide an environment conducive to learning, including internet access. The veterinary VEE must have a clear strategy and programme for maintaining and upgrading its buildings and equipment. Facilities must comply with all relevant legislation including health, safety, biosecurity, accessibility to people with reduced mobility, and EU animal welfare and care standards.</p>   |  |  |  |
| <p><b>Standard 4.2:</b> Lecture theatres, teaching laboratories, tutorial rooms, clinical facilities and other teaching spaces must be adequate in number, size and equipped for the instructional purposes and must be well maintained. The facilities must be adapted for the number of students enrolled. Students must have ready access to adequate and sufficient study, self-learning, recreation, locker, sanitary and food service facilities.</p> <p>Offices, teaching preparation and research laboratories must be sufficient for the needs of the academic and support staff.</p>   |  |  |  |
| <p><b>Standard 4.3:</b> The livestock facilities, animal housing, core clinical teaching facilities and equipment used by the VEE for teaching purposes must:</p> <ul style="list-style-type: none"> <li>• be sufficient in capacity and adapted for the number of students enrolled in order to allow safe hands-on training for all students</li> <li>• be of a high standard, well maintained and fit for the purpose</li> <li>• promote best husbandry, welfare and management practices</li> <li>• ensure relevant biosecurity and bio-containment</li> <li>• be designed to enhance learning.</li> </ul>   |  |  |  |
| <p><b>Standard 4.4:</b> Core clinical teaching facilities must be provided in a veterinary teaching hospital (VTH) with 24/7 emergency services at least for companion animals and equines. Within the VTH, the VEE must unequivocally demonstrate that standard of education and clinical research are compliant with all ESEVT Standards, e.g. research-based and evidence-based clinical training supervised by academic staff trained to teach and to assess, availability for staff and students of facilities and patients for performing clinical research and relevant QA procedures.</p>  |  |  |  |

|   |  |  |  |
|---|--|--|--|
| For ruminants, on-call service must be available if emergency services do not exist for those species in a VTH. The VEE must ensure state-of-the-art standards of teaching clinics which remain comparable with or exceeding the best available in the private sector. The VTH and any hospitals, practices and facilities (including EPT) which are involved with the curriculum must meet the relevant national Practice Standards.   |  |  |  |
| Standard 4.5: The VEE must ensure that students have access to a broad range of diagnostic and therapeutic facilities, including but not limited to: diagnostic imaging, anaesthesia, clinical pathology, intensive/critical care, surgeries and treatment facilities, ambulatory services, pharmacy and necropsy facilities.   |  |  |  |
| Standard 4.6: Appropriate isolation facilities must be provided to meet the need for the isolation and containment of animals with communicable diseases. Such isolation facilities must be properly constructed, ventilated, maintained and operated to provide for animal care and for prevention of spread of infectious agents. They must be adapted to all animal species commonly handled in the VTH.   |  |  |  |
| Standard 4.7: The VEE must have an ambulatory clinic for production animals or equivalent facilities so that students can practise field veterinary medicine and Herd Health Management under academic supervision.   |  |  |  |
| Standard 4.8: The transport of students, live animals, cadavers, materials from animal origin and other teaching materials must be done in agreement with national and EU standards, to ensure the safety of students and staff and to prevent the spread of infectious agents.   |  |  |  |
| Standard 4.9: Operational policies and procedures (including e.g. biosecurity, good laboratory practice and good clinical practice) must be taught and posted for students, staff and visitors and a Biosafety manual must be available. The VEE must demonstrate a clear commitment for the delivery of biosafety and biosecurity, e.g. by a specific committee structure. The VEE must have a system of QA to monitor and assure clinical, laboratory and farm services, including a regular monitoring of the feedback from students, staff and clients.   |  |  |  |
| <b>Area 5. Animal resources and teaching material of animal origin</b>  |  |  |  |
| Standard 5.1: The number and variety of healthy and diseased animals, cadavers, and material of animal origin must be adequate for providing the practical and safe hands-on training (in the areas of Basic Sciences, Clinical Sciences, Pathology, Animal Production, Food Safety and Quality) and adapted to the number of students enrolled. Evidence must be provided that these data are regularly recorded and that procedures are in place for correcting any deficiencies.   |  |  |  |
| Standard 5.2: In addition to the training provided in the VEE, experience can include practical training at external sites, provided this training is organised under direct academic supervision and following the same standards as those applied in the VEE.   |  |  |  |
| Standard 5.3: The VTH must provide nursing care skills and instruction in nursing procedures. Under all situations students must be active participants in the clinical workup of patients, including problem-oriented diagnostic approach together with diagnostic decision-making.  |  |  |  |
| Standard 5.4: Medical records must be comprehensive and maintained in an effective retrieval system (preferably an electronic patient record system) to efficiently support the teaching, research, and service programmes of the VEE.  |  |  |  |
| <b>Area 6. Learning resources</b>   |  |  |  |
| Standard 6.1: State-of-the-art learning resources must be adequate and available to support veterinary education, research, services and continuing education. When the study programme is provided in several tracks/languages, the learning resources must be available in all used languages. Timely access to learning resources, whether through print, electronic media or other means, must be available to students and staff and, when appropriate, to stakeholders. State-of-the-art procedures for bibliographical search and for access to databases and learning resources must be taught to undergraduate students.   |  |  |  |
| Standard 6.2: Staff and students must have full access on site to an academic library administered by a qualified librarian, an Information Technology (IT) unit managed by an IT expert, an e-learning platform, and all the relevant human and physical resources necessary for the development of instructional materials by the staff and their use by the students. The relevant electronic information, database and other intranet resources must be easily available for students and staff both in the VEE's core facilities via wireless connection (Wi-Fi) and from outside the VEE through a hosted secured connection, e.g. Virtual Private Network (VPN).   |  |  |  |
| Standard 6.3: The VEE must provide students with unimpeded access to learning resources, internet and internal study resources, and equipment for the development of procedural skills (e.g. models). The use of these resources must be aligned with the pedagogical environment and learning outcomes within the programme and have mechanisms in place to evaluate the teaching value of changes in learning resources.  |  |  |  |
| <b>Area 7. Student admission, progression and welfare</b>   |  |  |  |
| Standard 7.1: The VEE must consistently apply pre-defined and published regulations covering all phases of the student "life cycle", e.g. student admission, progression and certification. In relation to enrolment, the VEE must provide accurate and complete information regarding all aspects of the educational programme in all advertisements for prospective national and international students. Formal cooperations with other VEEs must also be clearly advertised.   |  |  |  |
| Standard 7.2: The number of students admitted must be consistent with the resources available at the VEE for staff, buildings, equipment, healthy and diseased animals, and materials of animal origin.   |  |  |  |
| Standard 7.3: The selection and progression criteria must be clearly defined, consistent, and defensible, be free of discrimination or bias, and take into account the fact that students are admitted with a view to their entry to the veterinary profession in due course. The VEE must regularly review and reflect on the selection processes to ensure they are appropriate for students to complete the programme successfully. If the selection processes are decided by another authority, the latter must regularly receive feedback from the VEE. Adequate training (including periodic refresher training) must be provided for those involved in the selection process to ensure applicants are evaluated fairly and consistently. |  |  |  |

|   |  |  |  |
|---|--|--|--|
| Standard 7.4: There must be clear policies and procedures on how applicants with disabilities or illnesses are considered and, if appropriate, accommodated in the programme, taking into account the requirement that all students must be capable of meeting the ESEVT Day One Competences by the time they graduate.   |  |  |  |
| Standard 7.5: The basis for decisions on progression (including academic progression and professional fitness to practise) must be explicit and readily available to the students. The VEE must provide evidence that it has mechanisms in place to identify and provide remediation and appropriate support (including termination) for students who are not performing adequately.<br>The VEE must have mechanisms in place to monitor attrition and progression and be able to respond and amend admission selection criteria (if permitted by national or university law) and student support if required.  |  |  |  |
| Standard 7.6: Mechanisms for the exclusion of students from the programme for any reason must be explicit.<br>The VEE's policies for managing appeals against decisions, including admissions, academic and progression decisions and exclusion, must be transparent and publicly available.  |  |  |  |
| Standard 7.7: Provisions must be made by the VEE to support the physical, emotional and welfare needs of students. This includes, but is not limited to, learning support and counselling services, career advice, and fair and transparent mechanisms for dealing with student illness, impairment and disability during the programme. This shall include provision of reasonable adjustments for disabled students, consistent with all relevant equality and/or human rights legislation.<br>There must be effective mechanisms for resolution of student grievances (e.g. interpersonal conflict or harassment).   |  |  |  |
| Standard 7.8: Mechanisms must be in place by which students can convey their needs and wants to the VEE. The VEE must provide students with a mechanism, anonymously if they wish, to offer suggestions, comments and complaints regarding compliance of the VEE with national and international legislation and the ESEVT Standards.   |  |  |  |
| <b>Area 8. Student assessment</b>   |  |  |  |
| Standard 8.1: The VEE must ensure that there is a clearly identified structure within the VEE showing lines of responsibility for the assessment strategy to ensure coherence of the overall assessment regime and to allow the demonstration of progressive development across the programme towards entry-level competence.   |  |  |  |
| Standard 8.2: The assessment tasks and grading criteria for each unit of study in the programme must be published, applied consistently, clearly identified and available to students in a timely manner well in advance of the assessment. Requirements to pass must be explicit.<br>The VEE must properly document the results of assessment and provide the students with timely feedback on their assessments.<br>Mechanisms for students to appeal against assessment outcomes must be explicit.   |  |  |  |
| Standard 8.3: The VEE must have a process in place to review assessment outcomes, to change assessment strategies and to ensure the accuracy of the procedures when required. Programme learning outcomes covering the full range of professional knowledge, skills, competences and attributes must form the basis for assessment design and underpin decisions on progression.  |  |  |  |
| Standard 8.4: Assessment strategies must allow the VEE to certify student achievement of learning objectives at the level of the programme and individual units of study.<br>The VEE must ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.   |  |  |  |
| Standard 8.5: Methods of formative and summative assessment must be valid and reliable and comprise a variety of approaches. Direct assessment of clinical skills and Day One Competences (some of which may be on simulated patients), must form a significant component of the overall process of assessment. It must also include the quality control of the student logbooks in order to ensure that all clinical procedures, practical and hands-on training planned in the study programme have been fully completed by each individual student.  |  |  |  |
| <b>Area 9. Academic and support staff</b>   |  |  |  |
| Standard 9.1: The VEE must ensure that all staff are appropriately qualified and prepared for their roles, in agreement with national and EU regulations and must apply fair and transparent processes for the recruitment and development of staff.<br>A formal training (including good teaching and evaluation practices, learning and e-learning resources, biosecurity and QA procedures) must be in place for all staff involved with teaching.<br>Most academic staff (calculated as FTE) involved in veterinary training must be veterinarians. It is expected that more than 2/3 of the instruction that the students receive, as determined by student teaching hours, is delivered by qualified veterinarians. |  |  |  |
| Standard 9.2: The total number, qualifications and skills of all staff involved with the programme, including teaching staff, 'adjunct' staff, technical, administrative and support staff, must be sufficient and appropriate to deliver the educational programme and fulfil the VEE's mission.<br>A procedure must be in place to assess if they display competence and effective teaching skills in all relevant aspects of the curriculum that they teach, regardless of whether they are full or part time, residents, interns or other postgraduate students, adjuncts or off-campus contracted teachers.  |  |  |  |
| Standard 9.3: Staff must be given opportunities to develop and extend their teaching and assessment knowledge and must be encouraged to improve their skills. Opportunities for didactic and pedagogic training and specialisation must be available. The VEE must clearly define systems of reward for teaching excellence in operation.<br>Academic positions must offer the security and benefits necessary to maintain stability, continuity, and competence of the academic staff. Academic staff must have a balanced workload of teaching, research and service depending on their role. They must have reasonable opportunities and resources for participation in scholarly activities.                          |  |  |  |
| Standard 9.4: The VEE must provide evidence that it utilises a well-defined, comprehensive and publicised programme for the professional growth and development of academic and support staff, including formal appraisal and informal mentoring procedures.<br>Staff must have the opportunity to contribute to the VEE's direction and decision-making processes.   |  |  |  |

|  |  |  |  |
|--|--|--|--|
| <b>Promotion criteria for academic and support staff must be clear and explicit. Promotions for teaching staff must recognise excellence in, and (if permitted by the national or university law) place equal emphasis on all aspects of teaching (including clinical teaching), research, service and other scholarly activities.</b> |  |  |  |
| <b>Standard 9.5: A system for assessment of teaching staff must be in operation and must include student participation. Results must be available to those undertaking external reviews and commented upon in reports.</b>   |  |  |  |
| <b>Area 10. Research programmes, continuing and postgraduate education</b>   |  |  |  |
| <b>Standard 10.1: The VEE must demonstrate significant and broad research activities of staff that integrate with and strengthen the veterinary degree programme through research-based teaching.</b>  |  |  |  |
| <b>Standard 10.2: All students must be trained in scientific method and research techniques relevant to evidence-based veterinary medicine and must have opportunities to participate in research programmes.</b>  |  |  |  |
| <b>Standard 10.3: The VEE must provide advanced postgraduate degree programmes, e.g. PhD, internships, residencies and continuing education programmes that complement and strengthen the veterinary degree programme and are relevant to the needs of the profession and society.</b>   |  |  |  |
| <b>Standard 10.4: The VEE must have a system of QA to evaluate how research activities provide opportunities for student training and staff promotion, and how research approaches, methods and results are integrated into the veterinary teaching programmes.</b>  |  |  |  |
| <i>C: (total or substantial) compliance; PC: partial compliance (Minor Deficiency); NC: non-compliance (Major Deficiency)</i>  |  |  |  |

## **Executive Summary**

*Brief history of the VEE and its previous EAEVE Visitations*

*Brief comment on the SER*

*Brief comment on the Visitation*

*Commendations (areas worthy of praise identified by the Team)*

*Recommendations (areas of concern/partial compliance with the ESEVT Standards identified by the Team)*

*List of items of potential non-compliance with the ESEVT Standards identified by the Team*

## **Glossary**

*(Please use the same terminology and abbreviations as in the ESEVT SOP when possible)*



## **Annex 9. Template and guidelines for the writing of the Re-visitiation SER (RSER)**

*(as approved by the EAEVE Executive Committee on 29 September 2021)*

### ***Forewords (to be read before the writing of the RSER)***

*The RSER must provide factual and accurate information providing evidence that the Major Deficiencies identified during the Visitation have been corrected and that an ongoing process to correct the Minor Deficiencies is in place.*

*Not less than 2 months before the Re-visitiation, the RSER (and the RSER Appendices) must be sent by the VEE to all members of the Re-visitiation Team and to the EAEVE Office by e-mail (electronic version in PDF and Word format), and it is up to the Visitors to decide if they would like to receive a hard copy of the document in addition to the e-copy (it is the duty of the Liaison Officer to enquire about the Visitors' preference in this respect before the RSER due date). The EAEVE Office does not need to receive a hard copy of the RSER.*

*The RSER must be concise, written in Times New Roman font, size 12, single spacing, complete, accurate and written in English in agreement with this ESEVT template. All Deficiencies must be addressed with Factual Information and, if necessary, with Comments and Suggestions. Updated ESEVT Indicators must also be provided.*

*The texts in italic in this template must be deleted in the final copy of the RSER.*

*The RSER and the Re-visitiation Report, which are considered confidential until the final decision of ECOVE, are eventually published on the websites of the VEE, EAEVE and DEQAR.*

## **Contents of the RSER**

### **Introduction**

- 1. Correction of Major Deficiencies**
- 2. Correction of Minor Deficiencies**
- 3. ESEVT Visitations**

### **Introduction**

*Brief summary of the conclusions of the previous Visitation and of the commitment of the VEE to correct the Deficiencies and to become fully compliant with the ESEVT Standards.*

### **1. Correction of Major Deficiencies**

- 1.1. Major Deficiency 1: ....
  - 1.1.1. Factual information
  - 1.1.2. Comments

- 1.2. Major Deficiency 2: ....
  - 1.2.1. Factual information
  - 1.2.2. Comments

...

**2. Correction of Minor Deficiencies**

2.1. Minor Deficiency 1: ....

2.1.1. Factual information

2.1.2. Comments

2.1.3. Suggestions for improvement

2.2. Minor Deficiency 2: ....

2.2.1. Factual information

2.2.2. Comments

2.2.3. Suggestions for improvement

...

**3. ESEVT Indicators**

3.1. Factual information (*Updated data based on the last three academic years*)

3.2. Comments

3.3. Suggestions for improvement

## **Annex 10. Timetable and guidelines for the Re-visitation**

*(as approved by the EAEVE Executive Committee on 29 May 2019 )*

### **INTRODUCTION**

This document is a standardised programme for the Re-visitation. ECOVE may decide to adapt the duration of the Re-visitation (e.g. plus/minus ½ day) on the basis of the number and complexity of the Deficiencies identified after the (full) Visitation.

The specific programme must be proposed by the Liaison Officer 1 month before the start of the Re-visitation at the latest and is finalised in agreement with the Chairperson and the Coordinator.

### **TIMETABLE**

#### **Day 1**

By 19.00 at the latest: arrival of the Visitors (the Team) at the hotel

19.30-21.30: working dinner with the VEE's Head and Liaison Officer in the hotel or nearby

#### **Day 2**

08.00: transfer to the VEE Team room

08.30–13.00: for each Major Deficiency, visit of the relevant facilities, consultation of the relevant databases and meeting with the relevant people

13.00-14.00: informal lunch with Team alone

14.00-16.30: evaluation if the Minor Deficiencies have been corrected or if an ongoing process to correct them is in place.

17.00-19.00: Team work in the Team room

19.30-21.30: informal dinner

#### **Day 3**

08.00: transfer to the VEE

Around 8.30: exit presentation to the VEE's Head, Liaison Officer and representatives of staff and students (e.g. members of the VEE's Council)

From the end of the exit presentation at the earliest: transfer of the Visitors to the airport/train station

**PS: Wi-Fi access, multiple electrical sockets, soft drinks and one printed copy of the RSER, its annexes and the relevant ESEVT SOP must be available upon arrival on Monday in the Team room.**

## **Annex 11. Template and guidelines for the writing of the Re- visitation Report**

*(as approved by the EAEVE Executive Committee on 29 May 2019 )*



### **RE-VISITATION REPORT**

**To** *(official name and location of the VEE)*

**On** *(date of Visitation)*

**By the Re-visitation Team**

*(First name, name, city, country):* Chairperson

*(First name, name, city, country):* ESEVT Coordinator

## ***Forewords (to be read by each Visitor before the writing of the Re-visitation Report)***

*The Re-visitation Report must be written in agreement with the ESEVT SOP (see Chapter 2, paragraph 2.5). The version of the SOP used to write the Re-visitation Report must coincide with the version the VEE followed when preparing its SER, as stated in the official Visitation agreement.*

*2.5 weeks before the Re-visitation at the latest, each Visitor must have read the RSER. If appropriate, questions to be asked to the VEE are sent to the Liaison Officer before the start of the Re-visitation.*

*The Re-visitation Team is responsible for making an independent assessment and proposing an unambiguous statement on whether the Major Deficiencies identified during the previous Visitation have been fully corrected, whether an ongoing process to correct the Minor Deficiencies is in place, and whether the VEE is now fully compliant with the ESEVT Standards.*

*Files must be written in UK English. Chapters should be consolidated but concise.*

*The Draft A must be completed immediately after the end of the Re-visitation and sent to the EAEVE Office.*

*The texts in italic in this template must be deleted in the final copy of the Re-visitation Report.*

## **Contents of the Re-visitation Report**

### **Introduction**

1. Correction of the Major Deficiencies
2. Correction of the Minor Deficiencies
3. ESEVT Indicators
4. Conclusions

### **Introduction**

*Brief summary of the conclusions of the previous Visitation, about the RSER and about the Re-visitation*

#### **1. Correction of the Major Deficiencies**

##### **1.1. Major Deficiency 1: ... (to be completed)**

###### **1.1.1. Findings**

###### **1.1.2. Comments**

###### **1.1.3. Suggestions**

###### **1.1.4. Decision of the Visitation Team (whether Major Deficiency 1 has been fully corrected or not)**

##### **1.2. Major Deficiency 2: ... (to be completed)**

- 1.2.1. Findings
- 1.2.2. Comments
- 1.2.3. Suggestions
- 1.2.4. Decision of the Visitation Team (*whether Major Deficiency 2 has been fully corrected or not*)

...

## **2. Correction of the Minor Deficiencies**

### 2.1. Minor Deficiency 1: ... (*to be completed*)

- 2.1.1. Findings
- 2.1.2. Comments
- 2.1.3. Suggestions

### 2.2. Minor Deficiency 2: ... (*to be completed*)

- 2.2.1. Findings
- 2.2.2. Comments
- 2.2.3. Suggestions

...

## **3. ESEVT Indicators**

- 3.1. Findings
- 3.2. Comments
- 3.3. Suggestions

**4. Conclusions** (*recommendations to ECOVE, i.e. Accreditation if all Major Deficiencies have been fully corrected or Non-Accreditation if all Major Deficiencies have not been fully corrected*)

## **Annex 12. Timetable and guidelines for the Preliminary Visitation**

*(as approved by the EAEVE Executive Committee on 2 December 2020)*

### **INTRODUCTION**

This document is a standardised programme for a Preliminary Visitation.

The specific programme must be proposed by the Liaison Officer 1 month before the start of the Preliminary Visitation at the latest and is finalised in agreement with the Chairperson and the Coordinator.

### **TIMETABLE**

#### **Day 1**

By 19.00: arrival of the Preliminary Visitation Team at the hotel

19.30-21.30: working dinner with the VEE's Head and Liaison Officer

#### **Day 2**

08.00: transfer to the VEE Team Room

08.30- 09.00: meeting with the direction of the VEE

09.00-13.00 and 14.00-17.00:

-) visit of the intra-mural facilities/departments/units by the Team with a very short introduction by the responsible person of each unit

-) visit in depth of some intra-mural facilities (e.g. the VTH);

-) virtual visit of the extra-mural facilities involved in the veterinary curriculum (clinics, dispensaries, teaching farms, slaughterhouses, ...) by a PowerPoint presentation with photos and/or videos in the presence of their respective responsible person

(strict timetable requested to avoid any delay)

13.00-14.00: informal lunch with Team alone

14.00-17.00: see above

17.00-19.00: Team work in the Team room

19.30-21.30: informal dinner

#### **Day 3**

08.00: transfer to the VEE Team room

08.30-9.00: meeting with Academic Staff

09.00-9.30: meeting with graduates involved with the veterinary curriculum (interns, residents, assistants, PhD students)

9.30-10.00: meeting with Support Staff (technical, laboratory, administrative, nursing, IT)

10.00-10.30: meeting with undergraduate students (several students from each year/semester of the curriculum)

11.00-13.00 and 14.00-16.30: separate meetings (around 30 minutes each) with the relevant responsible persons for each ESEVT Area, i.e. Organisation, Finances, Curriculum, Facilities, Animal Resources, Learning Resources, Students, Staff, Research and post-graduate programmes, Quality Assurance

(precise programme and name of attendees for each meeting to be finalised during the Day 1 dinner)

13.00-14.00: informal lunch with Team alone

14.00-16.30: see above

17.00-19.00: Team work in the Team room

19.00-19.30: exit presentation to the VEE's Head, Liaison Officer and invited guests

19.30-21.30: dinner with the VEE's Head, Liaison Officer and invited guests.

**Day 4**

Transfer of the Visitors to the airport/train station

**PS: Wi-Fi access, multiple electrical sockets, soft and hot drinks and one printed copy of the CSER, its annexes and the relevant ESEVT SOP must be available in the Team room.**



## **Annex 13. Template and guidelines for the writing of the Preliminary Visitation Report**

*(as approved by the EAEVE Executive Committee on 2 December 2020)*



### **PRELIMINARY VISITATION REPORT**

**To** *(official name and location of the VEE)*

**On** *(date of Preliminary Visitation)*

**By the Preliminary Visitation Team:**

*(First name, name, city, country): Chairperson*

*(First name, name, city, country): ESEVT Coordinator*

## ***Forewords (to be read by each Visitor before the writing of the Preliminary Visitation Report)***

*The Preliminary Visitation Report must be written in agreement with the ESEVT SOP (see Chapter 2, paragraph 3.6).*

***2.5 weeks before the Preliminary Visitation at the latest, each Visitor must have read the full PSER. Questions to be asked are sent to the VEE before the start of the Preliminary Visitation in order to allow the Liaison Officer sufficient time to collect the required data.***

*Files must be written in plain English in Times New Roman, size 12, single spaced. Chapters must be concise and mainly focused on potential deficiencies.*

*The Preliminary Visitation Report must be much shorter than a Full Visitation Report with a maximum of 20 pages and should be written to answer the following questions:*

- ) Is the VEE fully aware of the ESEVT SOP in general and the accreditation Standards in particular?*
- ) Is there an ongoing process in place to achieve compliance with these Standards?*
- ) Is the VEE sufficiently informed, organised and equipped for undergoing a (Full) Visitation within a 3-year period ?*
- ) What are the areas of concern about the compliance of the VEE with ESEVT Standards?*

*If some indicators are out of range, it is expected from the Visitors to assess if it affects the quality of the education and the compliance of the VEE with the SOP.*

*The Preliminary Visitation Report must be initiated before the start of the Preliminary Visitation, completed and amended during it, finalised not later than two weeks after it, corrected for factual errors by the VEE not later than two weeks after it and finally proofread by the Coordinator and the EAEVE Office.*

*The texts in italic in this template must be deleted in the final copy of the Preliminary Visitation Report.*

## **Contents of the Preliminary Visitation Report**

### Introduction

1. Objectives, Organisation and QA Policy
2. Finances
3. Curriculum
4. Facilities and equipment
5. Animal resources and teaching material of animal origin
6. Learning resources
7. Student admission, progression and welfare
8. Student assessment
9. Academic and support staff
10. Research programmes, continuing and postgraduate education
11. ESEVT Indicators
12. Conclusions

## **Introduction**

*Brief history of the VEE*

*Main features of the VEE*

## **1. Objectives, Organisation and QA Policy**

### **1.1. Findings**

### **1.2. Comments**

### **1.3. Suggestions for improvement**

## **2. Finances**

### **2.1. Findings**

### **2.2. Comments**

### **2.3. Suggestions for improvement**

## **3. Curriculum**

### **3.1. General curriculum**

#### **3.1.1. Findings**

#### **3.1.2. Comments**

#### **3.1.3. Suggestions for improvement**

### **3.2. Specific curriculum**

#### **3.2.1. Findings**

Basic sciences

Clinical Sciences in companion animals (including equine and exotic pets)

Clinical Sciences in food-producing animals (including Animal production)

Food Safety and Quality

Professional knowledge

### **3.2.2. Comments**

Basic sciences

Clinical Sciences in companion animals (including equine and exotic pets)

Clinical Sciences in food-producing animals (including Animal production)

Food Safety and Quality

Professional knowledge

### **3.2.3. Suggestions for improvement**

## **3.3. External Practical training**

### **3.3.1. Findings**

### **3.3.2. Comments**

### **3.3.3. Suggestions for improvement**

## **4. Facilities and equipment**

### **4.1. Findings**

### **4.2. Comments**

### **4.3 Suggestions for improvement**

## **5. Animal resources and teaching material of animal origin**

### **5.1. Findings**

### **5.2. Comments**

### **5.3. Suggestions for improvement**

## **6. Learning resources**

### **6.1. Findings**

### **6.2. Comments**

**6.3. Suggestions for improvement**

**7. Student admission, progression and welfare**

**7.1. Findings**

**7.2. Comments**

**7.3. Suggestions for improvement**

**8. Student assessment**

**8.1. Findings**

**8.2. Comments**

**8.3. Suggestions for improvement**

**9. Academic and support staff**

**9.1. Findings**

**9.2. Comments**

**9.3. Suggestions for improvement**

**10. Research programmes, continuing and postgraduate education**

**10.1. Findings**

**10.2. Comments**

**10.3. Suggestions for improvement**

**11. ESEVT Indicators**

**11.1. Findings**

**11.2. Comments**

**11.3. Suggestions for improvement**

## **12. Conclusions**

- ) Is the VEE fully aware of the ESEVT SOP in general and the accreditation Standards in particular?
- ) Is there an ongoing process in place to achieve compliance with these Standards?
- ) Is the VEE sufficiently informed, organised and equipped for undergoing a (full) Visitation within a 3-year period ?
- ) What are the areas of concern about the compliance of the VEE with the ESEVT Standards?

## **Annex 14. Templates and guidelines for the Interim Report**

*(as approved by the EAEVE Executive Committee on 29 May 2019)*

In accordance with Chapter 2, point 4 of the SOP, 3.5 years after the (full) Visitation, all VEEs that are members of EAEVE must send a concise Interim Report (IR) to the EAEVE Office.

The IR must be written in agreement with the template (Appendix 1) and sent to the EAEVE Office via e-mail. An ESEVT Coordinator, designated by ECOVE, reviews the IR and notes major changes or concerns to the Chairperson of ECOVE, using the template provided in Appendix 2. The IR and its review are then sent by the EAEVE Office to ECOVE for consideration during its next meeting.

The Review of the IR as amended by ECOVE is sent to the VEE by the EAEVE Office. In case of the lack of an Interim Report or evidence in the Interim Report of the occurrence of potential major issues, ECOVE may ask for further information from the VEE.

If the VEE does not reply or does not provide a convincing plan for correcting these major issues, ECOVE may decide to send an ESEVT Coordinator on site (at the cost of the VEE), with the possibility that the VEE's Accreditation status may be changed.



## **Appendix 1: Template Interim Report (maximum 2 pages)**

**Name and location of the Veterinary Education Establishment (VEE)**

**Name and details of the current VEE's Head**

**Date of the completion of the Interim Report** (*3.5 years after the (full) Visitation at the latest*):

**Date of the previous Visitation**

**Any major changes which may affect the compliance with the ESEVT Standards since the previous SER** (*e.g. new national regulations, new foreign language track, more admitted students, less funding, lower caseload*)

**Progress in the correction of:**

- ) Major Deficiencies (non-compliance with ESEVT Standards);
  - ) Minor Deficiencies (partial compliance with ESEVT Standards)
- and plans for the near future**

**Expected date of the next Visitation** (*which should be completed not later than 2 months before the date of the ECOVE meeting preceding the end of granted status*)

**Annex: Updated Excel table with ESEVT Indicators** (*focusing on the last three complete academic years*)





## **Appendix 2: Template review of the Interim Report (maximum 2 pages)**

**Name and location of the Veterinary Education Establishment (VEE)**

**Name of the Coordinator reviewing the Interim Report (IR)**

**Date of the review**

- 1. Overall analysis: Is the IR written in agreement with the SOP?**
- 2. Major changes since the previous SER: Could these changes significantly affect compliance with the ESEVT Standards?**
- 3. Progress in the correction of Deficiencies: Have the Deficiencies (both Major and Minor ones) identified during the previous Visitation been corrected? If not, are there a plan and a timeframe to do so?**
- 4. ESEVT Indicators: Are some Indicators below the current minimum value and could it significantly affect compliance with the ESEVT Standards?**
- 5. Any other comments or suggestions to ECOVE**

**Annex 15. Declaration stating the lack of conflicts of interest with the visited Veterinary Education Establishment (VEE) and the commitment to strictly respect the ESEVT SOP and the EAEVE Code of Conduct**

*(as approved by the EAEVE Executive Committee on 29 May 2019)*

I hereby declare:

That I have no direct connection or personal interest with the visited VEE;

*- with the exception of ongoing international research projects – if they exist, such collaboration must be disclosed here:*

*- if not applicable, please cross out*

That I have neither studied at nor have been employed by this VEE

That none of my close family members are studying or being employed by this VEE

That I have neither received nor have been promised any gifts or benefits of any nature by this VEE

That I am not a citizen of the country which VEE is going to be visited

That I am committed to strictly respect the ESEVT SOP and the EAEVE Code of Conduct.

Name of the Visitor:

Name of the visited VEE:

Date of the Visitation:

Signature:

Date of signature:

## Annex 16a. Post-Visitation Questionnaire for Team Members

(as approved by the EAEVE Executive Committee on 18 June 2020)



In order to have the highest level of internal quality assurance and to be able to continuously improve its Visitation procedures, EAEVE needs post-Visitation feedback from the Team Members.

Please fill in this post-Visitation feedback form and return it to the EAEVE Office ([office@eaeve.org](mailto:office@eaeve.org)).

The post-Visitation questionnaires are handled confidentially by EAEVE's Committee of Internal Quality Assurance (CIQA).

Please remember that experts who do not return completed feedback forms will be removed from the List of ESEVT Experts.

**Name of the Visitor:**

**Position:** (*Chairperson, Coordinator, Visitor in ((Basic Sciences, Clinical Sciences, etc.))*)

**Veterinary Education Establishment (VEE) visited:** (*name and location*)

**Type of the Visitation:** (*Full Visitation, Re-visitation, Preliminary Visitation*)

**Date of the Visitation:**

1) Using a score from 1 to 4 (where **4** is **complete agreement** and **1** - **complete disagreement**), please indicate to what extent you agree with the following statements. Please tick your score in the respective box.

|  |                          |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>1. The Visitation was performed in line with the ESEVT SOP.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*

|   |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>2. The SER was provided on time and was written in agreement with the ESEVT SOP.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*

|  |                          |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>3. The Liaison Officer helped the Visitation efficiently.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*

|  |                          |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>4. The Chairperson was leading the Visitation in a professional manner.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*

|   |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>5. The Coordinator was supporting the Team by ensuring a strict implementation of the SOP and without trying to influence its decisions.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*

|  |                          |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>6. The Visitation had a friendly, collegial atmosphere.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*

|   |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>7. The EAEVE Office supported the Visitation in a professional manner.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*

2) Using a score from 1 to 4 (where **4** is **complete agreement** and **1** – **complete disagreement**), please indicate to what extent you agree with the following statements for each of the Team members:

**Please DO NOT provide evaluation of your own performance.**

**-) Visitor in Basic Sciences:** *(please indicate name)*

|   | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance.                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor was well informed about the evaluation procedure and the SOP.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor was fully cooperative.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor had a good level of proficiency in English.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor wrote his/her Chapters of the Visitation Report in an appropriate way and in a timely manner. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

|   |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor interacted with both staff and students in a friendly and constructive way. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|---|--------------------------|--------------------------|--------------------------|--------------------------|

*Please briefly comment on the overall strengths and weaknesses of the Visitor in Basic Sciences:*

**-) Visitor in Clinical Sciences – Companion Animals:** *(please indicate name)*

|   | 1                        | 2                        | 3                        | 4                        |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance.                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor was well informed about the evaluation procedure and the SOP.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor was fully cooperative.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor had a good level of proficiency in English.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor wrote his/her Chapters of the Visitation Report in an appropriate way and in a timely manner. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor interacted with both staff and students in a friendly and constructive way.                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Please briefly comment on the overall strengths and weaknesses of the Visitor in Clinical Sciences – Companion Animals:*

**-) Visitor in Clinical Sciences – Food-producing Animals:** *(please indicate name)*

|   | 1                        | 2                        | 3                        | 4                        |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance.                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor was well informed about the evaluation procedure and the SOP.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor was fully cooperative.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor had a good level of proficiency in English.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor wrote his/her Chapters of the Visitation Report in an appropriate way and in a timely manner. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor interacted with both staff and students in a friendly and constructive way.                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Please briefly comment on the overall strengths and weaknesses of the Visitor in Clinical Sciences – Food-producing Animals:*

**-) Practitioner:** *(please indicate name)*

|   | 1                        | 2                        | 3                        | 4                        |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor was well informed about the evaluation procedure and the SOP. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor was fully cooperative.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

|   |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor had a good level of proficiency in English.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor wrote his/her Chapters of the Visitation Report in an appropriate way and in a timely manner. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor interacted with both staff and students in a friendly and constructive way.                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Please briefly comment on the overall strengths and weaknesses of the Practitioner:*

**-) Visitor in Food Safety and Quality:** *(please indicate name)*

|   | 1                        | 2                        | 3                        | 4                        |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance.                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor was well informed about the evaluation procedure and the SOP.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor was fully cooperative.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor had a good level of proficiency in English.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor wrote his/her Chapters of the Visitation Report in an appropriate way and in a timely manner. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor interacted with both staff and students in a friendly and constructive way.                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Please briefly comment on the overall strengths and weaknesses of the Visitor in Food Safety and Quality:*

**-) Visitor in Quality Assurance:** *(please indicate name)*

|   | 1                        | 2                        | 3                        | 4                        |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance.                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor was well informed about the evaluation procedure and the SOP.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor was fully cooperative.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor had a good level of proficiency in English.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor wrote his/her Chapters of the Visitation Report in an appropriate way and in a timely manner. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor interacted with both staff and students in a friendly and constructive way.                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Please briefly comment on the overall strengths and weaknesses of the Visitor in Quality Assurance:*

**-) Student:** *(please indicate name)*

|  | 1                        | 2                        | 3                        | 4                        |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

|   |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well informed about the evaluation procedure and had a reasonable grasp of the SOP. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor was fully cooperative.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor had a good level of proficiency in English.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor contributed to the writing of the Visitation Report in an appropriate way.              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor interacted with both staff and students in a friendly and constructive way.             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Please briefly comment on the overall strengths and weaknesses of the Student:*

**Suggestions for improvement (if any):**

**Date:**

**Signature:**

## Annex 16b. Post-Visitation Questionnaire for visited VEEs

(as approved by the EAEVE Executive Committee on 18 June 2020)



In order to have the highest level of internal quality assurance and to be able to continuously improve its Visitation procedures, EAEVE needs post-Visitation feedback from the visited VEEs.

Please fill in this post-Visitation feedback form and return it to the EAEVE Office ([office@eaeve.org](mailto:office@eaeve.org)).

The post-Visitation questionnaires are handled confidentially by EAEVE's Committee of Internal Quality Assurance (CIQA).

Please remember that the Visitation Report of your VEE can only be put on the agenda of the next meeting of the European Committee of Veterinary Education (ECOVE) after you have submitted your completed post-Visitation feedback form to the EAEVE Office.

**Name:**

**Position:** (*Head of VEE, Liaison Officer, members of staff, Other (please specify)*)

**Veterinary Education Establishment (VEE) visited:**

**Type of the Visitation:** (*Full Visitation, Re-visitation, Preliminary Visitation*)

**Date of the Visitation:**

1) Using a score from 1 to 4 (where **4** is **complete agreement** and **1** - **complete disagreement**), please indicate to what extent you agree with the following statements. Please tick your score in the respective box.

|   |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>1. The Team respected the deadlines for submitting the list of questions to the VEE and requesting additional information before the Visitation.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*



|  |                          |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>2. The Team respected the deadline for submitting Draft C of the Visitation Report for factual corrections to the VEE after the Visitation.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*

|   |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>3. The Team followed the previously agreed timetable during the Visitation, with any subsequent changes during the actual Visitation agreed on by all parties.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*

|  |                          |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>4. The Visitation had a friendly, collegial atmosphere.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*

|  |                          |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>5. The Chairperson was leading the Visitation in a professional manner.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*

|   |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>6. The Coordinator was supporting the Team with efficiency and without interference.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*

|   |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>7. The EAEVE Office supported the Visitation in a professional manner.</b> | <b>1</b>                 | <b>2</b>                 | <b>3</b>                 | <b>4</b>                 |
|   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any):*

2) Using a score from 1 to 4 (where **4** is **complete agreement** and **1** – **complete disagreement**), please indicate to what extent you agree with the following statements for each of the Team members:

**-) Visitor in Basic Sciences:** *(please indicate name)*

|   | 1                        | 2                        | 3                        | 4                        |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance.                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor had a good level of proficiency in English.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor interacted with both staff and students in a friendly and constructive way. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any) on the overall performance of the Visitor in Basic Sciences:*

**-) Visitor in Clinical Sciences – Companion Animals:** *(please indicate name)*

|   | 1                        | 2                        | 3                        | 4                        |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance.                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor had a good level of proficiency in English.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor interacted with both staff and students in a friendly and constructive way. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any) on the overall performance of the Visitor in Clinical Sciences – Companion Animals:*

**-) Visitor in Clinical Sciences – Food-producing Animals:** *(please indicate name)*

|   | 1                        | 2                        | 3                        | 4                        |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance.                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor had a good level of proficiency in English.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor interacted with both staff and students in a friendly and constructive way. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any) on the overall performance of the Visitor in Clinical Sciences – Food-producing Animals:*

**-) Practitioner:** *(please indicate name)*

|   | 1                        | 2                        | 3                        | 4                        |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance.                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor had a good level of proficiency in English.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor interacted with both staff and students in a friendly and constructive way. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any) on the overall performance of the Practitioner:*

**-) Visitor in Food Safety and Quality:** *(please indicate name)*

|   | 1                        | 2                        | 3                        | 4                        |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance.                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor had a good level of proficiency in English.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor interacted with both staff and students in a friendly and constructive way. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any) on the overall performance of the Visitor in Food Safety and Quality:*

**-) Visitor in Quality Assurance:** *(please indicate name)*

|   | 1                        | 2                        | 3                        | 4                        |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance.                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor had a good level of proficiency in English.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor interacted with both staff and students in a friendly and constructive way. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any) on the overall performance of the Visitor in Quality Assurance:*

**-) Student:** *(please indicate name)*

|   | 1                        | 2                        | 3                        | 4                        |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| The Visitor was well prepared and had read the SER carefully in advance.                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor understood the local characteristics of the VEE.                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor had a good level of proficiency in English.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Visitor interacted with both staff and students in a friendly and constructive way. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Additional comments (if any) on the overall performance of the Student:*

**Suggestions for improvement (if any):**

**Date:**

**Signature:**

## **Annex 17. ESEVT transitional procedures between SOP 2019 as amended in December 2020 and SOP 2019 as amended in September 2021**

*(as approved by the EAEVE Executive Committee on 29 September 2021)*

**The SOP 2019 as amended in September 2021 is valid for all types of Visitations performed after September 2021.**

However, if an agreement for a specific Visitation has been formally signed by the VEE with the EAEVE Office before September 2021, this VEE may decide which SOP is valid for this Visitation. This must be agreed with the EAEVE Office and mentioned both within the SER and in the Visitation Report.

Any Re-visitation will be completed under the SOP which was used for the relevant (full) Visitation.

The Interim Report as described in the SOP 2019 is valid for all VEEs independent of the date of their last Visitation.

## **Annex 18. Observers at ESEVT Visitations**

*(as approved by the EAEVE Executive Committee on 29 September 2021)*

### **General Rule**

No more than one observer per Visitation may be accepted, thus making the number of Visitors 9.

On any Visitation, the Head of VEE must provide his/her official agreement and is not obliged to accept the proposal. Furthermore, the observers must financially support their expenses related to the Visitation on their own (incl. travel and accommodation expenses and insurance).

### **Type of observers**

There may be two types of observers at ESEVT Visitations, who, depending on their category, have different rights:

- 1) An observer from an official accrediting agency (e.g. a national QA agency or a sister organisation), who behaves in accordance with a signed Code of Conduct of their own. They may participate as observers in all activities/meetings of the team without voting right but must not have access to the Draft A Visitation Report issued before the Visitation. When selected for a Visitation they have priority over the second type of observers, and the VEEs are strongly encouraged to consider including observers of this type in the ESEVT Visitation.
- 2) An observer who is not a member of an official accrediting agency (e.g. a dean from a yet not visited VEE). They are allowed to participate in the visits/meetings on Tuesday and Wednesday (without interfering with the Visitation process) but not in the private meetings of the team nor in the Thursday meetings, and must not have access to the Draft A Visitation Report issued before the Visitation.

### **Procedure**

Upon receipt of a formal application, the Director of ESEVT may decide on accepting the request of an observer to participate in an ESEVT Visitation. Following the decision, the EAEVE Office asks the Head of the VEE to be visited for endorsement and, if positive, sends the current procedure and the EAEVE Code of Conduct to the observer.

In any case, in agreement with the ECOVE Rules of Operation, the Team composition must be approved by ECOVE.

## Glossary

### Abbreviations

CIQA: Committee on Internal Quality Assurance (of EAEVE)  
DEQAR: Database of the European Quality Assurance Register  
EAEVE: European Association of Establishments for Veterinary Education  
EBVS: European Board of Veterinary Specialisation  
ECCVT: European Coordination Committee on Veterinary Training  
ECOVE: European Committee of Veterinary Education  
ENQA: European Network for Quality Assurance in Higher Education  
EPT: External Practical Training  
ESEVT: European System of Evaluation of Veterinary Training  
ESG: Standards and Guidelines for Quality Assurance in the European Higher Education Area  
ExCom: Executive Committee (of EAEVE)  
FSQ: Food Safety and Quality  
FTE: Full-Time Equivalent  
FVE: Federation of Veterinarians of Europe  
GA: General Assembly (of EAEVE)  
IT: Information Technology  
OIE: World Organisation for Animal Health  
PSER: Preliminary Self Evaluation Report  
QA: Quality Assurance  
RSER: Re-visitation SER  
SER: Self Evaluation Report  
SOP: Standard Operating Procedure  
SWOT: Strengths, Weaknesses, Opportunities, Threats  
VPH: Veterinary Public Health  
VTH: Veterinary Teaching Hospital

### Standardised terminology (*to be used in all reports*)

**Accreditation:** status of a VEE that is considered by ECOVE as compliant with the ESEVT Standards normally for a 7-year period starting from the date of the last (full) Visitation;

**Veterinary Education Establishment (VEE):** the official and legal unit that organises the veterinary degree as a whole, either a university, faculty, school, department, institute;

**Ambulatory clinic:** clinical training done extra-murally and fully supervised by academic trained teachers;

**VEE's Head:** the person who officially chairs the above described VEE, i.e. Rector, Dean, Director, Head of Department, President, Principal, ...;

**External Practical Training (EPT):** clinical and practical training done extra-murally and fully supervised by non-academic staff (e.g. practitioners);

**Major Deficiency:** a deficiency that significantly affects the quality of education and the VEE's compliance with the ESEVT Standards;

**Minor Deficiency:** a deficiency that does not significantly affect the quality of education or the VEE's compliance with the ESEVT Standards;

**Propaedeutics:** preliminary collection of data about patient by observation, palpation, temperature measurement, etc., without specialised diagnostic procedures;

**Re-visitation:** a partial visitation organised in agreement with the ESEVT SOP in order to evaluate if the Major Deficiencies identified during a previous Visitation have been corrected

**Visitation:** a full visitation organised on-site in agreement with the ESEVT SOP in order to evaluate if the veterinary degree provided by the visited VEE is compliant with all ESEVT Standards; any chronological reference to ‘the Visitation’ means the first day of the full on-site Visitation;

**Visitation Report:** a document prepared by the Visitation Team, corrected for factual errors and finally issued by ECOVE; it contains, for each ESEVT Standard, findings, comments, suggestions and identified deficiencies.

## Tracking system

### ESEVT SOP 2019

|       | Prepared by:             | Reviewed by:   | Approved by:  |
|-------|--------------------------|--|---|
| Name: | Pierre Lekeux and SOP WG | ECOVE,<br>CIQA,<br>FVE Board,<br>EAEVE ExCom,<br>EAEVE Members<br>IVSA | EAEVE GA<br>(for Chapters 2 & 3 and Annex 5)<br>FVE Board<br>(for Chapters 2 & 3)<br>EAEVE ExCom<br>(for Annexes 4 to 18) |
| Date: | 10/05/18                 | Between 10/05/18<br>and 10/03/19                                       | 08/04/19 (FVE Board)<br>29/05/19 (EAEVE ExCom)<br>30/05/19 (EAEVE GA)   |

| Revision Nr. | Prepared by:             | Date:      | Approved by:                         | Date:                                  |
|--------------|--------------------------|------------|--------------------------------------|--|
| 1*           | Pierre Lekeux and SOP WG | 28/02/2020 | ExCom                                | 18/06/2020                             |
| 2 **         | Pierre Lekeux and SOP WG | 07/10/2020 | EAEVE ExCom<br>EAEVE GA<br>FVE Board | 02/12/2020<br>03/12/2020<br>15/12/2020 |
| 3 ***        | Pierre Lekeux and SOP WG | 24/08/2021 | EAEVE ExCom<br>EAEVE GA<br>FVE Board | 29/09/2021<br>30/09/2021<br>15/09/2021 |
| 4            |                          |            |                                      |  |
| 5            |                          |            |                                      |  |
| 6            |                          |            |                                      |  |
| 7            |                          |            |                                      |  |
| 8            |                          |            |                                      |  |
| 9            |                          |            |                                      |  |

\* The revision concerns *Annex 16a. Post-Visitation Questionnaire for Team Members* and *Annex 16b. Post-Visitation Questionnaire for visited VEEs*.

\*\* The revision concerns *Chapter 2. Visitation Process - Preliminary Visitation* and the related Annexes – i.e. *Annex 12. Timetable and guidelines for the Preliminary Visitation*, *Annex 13. Template and guidelines for the writing of the Preliminary Visitation Report* and *Annex 17. ESEVT transitional procedures between SOP 2019 and SOP 2019 as amended in December 2020*.

\*\*\* The revision concerns minor technical amendments throughout the document as well as the replacement of ‘Conditional Accreditation’ and ‘Non-Accreditation’ in case of Major Deficiencies by ‘Pending Accreditation’ in *Chapter 2. ESEVT Evaluation process – Visitation*.