ESEVT: *new standards for evaluations*

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HISTORY OF EVALUATION OF VETERINARY ESTABLISHMENTS IN EUROPE

- **Until 1978** every country/Establishment offered a curriculum based on tradition, state regulations, etc.

- **1978:** Publication of *Directive 78/1027/EEC* and *Decision 78/1028/EEC* establishing the *Advisory Committee on Veterinary Training* (*ACVT*) that requires harmonization to guarantee a comparable level of veterinary training in the 9 EU members. Define minimum standards.

- **1985-1989**: *Pilot evaluation* in 1 Establishment/ EU member.

- **1990:** adoption of a *permanent system of evaluation* under the umbrella of ACVT.

- **1994:** ACVT passes on the responsibility of evaluation to the *European Association of Establishments for Veterinary Education* (*EAEVE*).

- **1996:** ACTV create a Committee ACVT-EAEVE to revise the system.

- **2000:** The *Federation of Veterinarians of Europe* (*FVE*) joint EAEVE on the responsibility of running the ESEVT.

… 30 YEARS OF APPLICATION OF THE *EUROPEAN SYSTEM OF EVALUATION OF VETERINARY TRAINING* (ESEVT) IN 2015

EU REGULATED PROFESSIONS

- 78/1026/EEC: recognition of veterinary education

- 78/1027/EEC: minimum requirements of training

- 78/1028/EEC: Advisory Committee on Veterinary Training

- **2005/36/EC**: **Recognition of Professional Qualifications amended by 2013/55/EU**

  - Doctors
  - Nurses (general practice)
  - Dental practitioners
  - **Veterinary Surgeons**
  - Midwives
  - Pharmacists
  - Architects

  1985 TO DATE

  ESEVT
  (EAEVE + FVE)

PRINCIPLES OF THE ESEVT

- Focuses on undergraduate veterinary education to ensure a comparably high standard throughout the EU making the mutual recognition of qualifications possible (**EU Directives 36/2005 & 55/2013**).

- The only Europe-wide profession specific evaluation system.

- Carried out by the **EAEVE** in co-operation with the **FVE**.

- Final decision taken by an independent body: **ECOVE** (**E**uropean **C**ommittee on **V**eterinary **E**ducation).

- Evaluations should be carried out periodically at 10 year intervals.

- Based on the application of Standard Operating Procedures (SOPs) previously approved and regularly updated.

ESTRUCTURE OF THE ESEVT
(SOP Budapest 2012)

☐ STAGE I **EVALUATION OF QUALITY OF TRAINING**

- ■ Approval
- ■ Conditional approval
- ■ Non approval

☐ STAGE II **ACCREDITATION OF QUALITY ASSURANCE**

- ■ Accreditation
- ■ Conditional accreditation
- ■ Non accreditation

ESTRUCTURE OF THE ESEVT
(SOP proposal Uppsala 2016)

☐ STAGE I + II integrated

EVALUATION OF QUALITY OF TRAINING and QUALITY ASSURANCE

- ☐ Accreditation in case of no Major Deficiency
- ☐ Conditional Accreditation in case of 1 single Major Deficiency
- ☐ Non Accreditation in case of several Major Deficiencies

Four types of evaluation are organised by the ESEVT
-) Full Visitation
-) Re-visitation
-) Consultative Visitation
-) Interim Report

SELF EVALUATION REPORT

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

- □ 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 *ad hoc* QA and quality enhancement mechanisms.

SELF EVALUATION REPORT

1. OBJECTIVES & ORGANISATION

- Strategic Plan & SWOT analysis (list of objectives, plan, timeframe, indicators)
- Reference to Day-1 skills
- Responsible for veterinary curriculum and responsible for Veterinary Teaching Hospital (VTH) must hold a veterinary degree.
- Organisational structure must allow input from staff, students and stakeholders

2. FINANCES

- **Transparent business plan**
- **Expenditure and Revenues: administration, research, services ...**
- **Enough budget to meet the objectives and guarantee the teaching, equipment and facilities update**
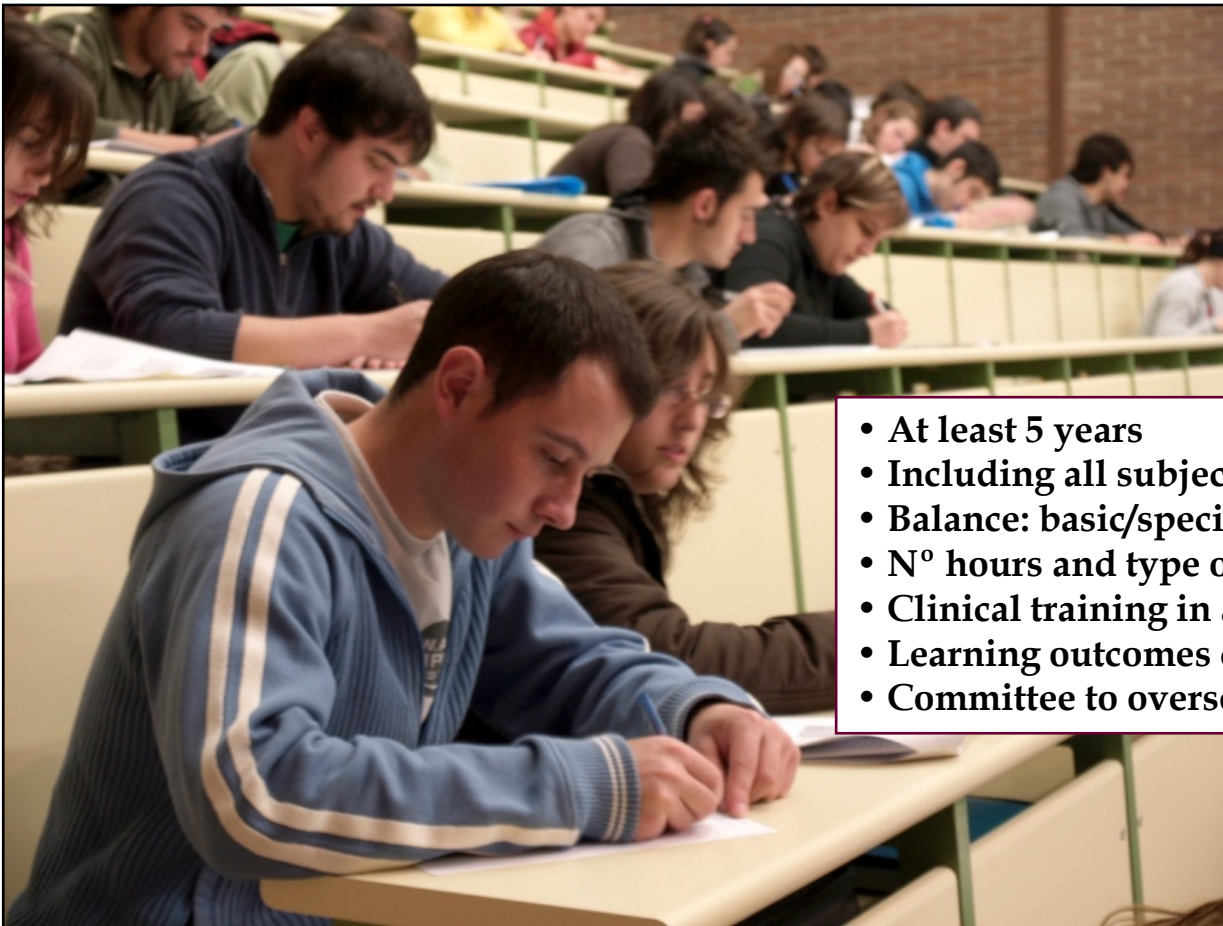
3. CURRICULUM

- At least 5 years
- Including all subjects listed in Directive 36/2005/EU
- Balance: basic/specific subjects, lectures/practicals
- Nº hours and type of practicals (intramural, extramural)
- Clinical training in all domestic species
- Learning outcomes communication to staff & students
- Committee to oversee (QA) and manage the curriculum

3. CURRICULUM

3.6. Extra Mural Studies (EMS) are training activities organised outside the Establishment, the student being under the direct supervision of a non academic person (e.g. a practitioner). EMS cannot replace the core intramural training nor the extramural training under the direct supervision of an academic staff.

3.7. Since the veterinary degree is a professional qualification with Day One Competences, EMS must contribute to complement and strengthen the academic education by enhancing for the student the handling of all common domestic animals, the understanding of the economics and management of animal units and veterinary practices, the communication skills for all aspects of veterinary work, the hands-on practical and clinical training, the real-life experience, and the employability of the future graduate student.

3.8. The EMS providers must have an official agreement with the Establishment and the student (in order to fix the respective rights and duties, including insurance matters), provide a standardised evaluation of the performance of the student during the EMS and be allowed to provide feedback to the Establishment on the EMS programme.

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

3.10. Students must take responsibility for their own learning during EMS. This includes preparing properly before each placement, keeping a proper record of their experience during EMS by using the logbook provided by the Establishment and evaluating the EMS. Students must be allowed to complain officially or anonymously about abnormal behaviours during EMS.

SELF EVALUATION REPORT

4. FACILITIES & EQUIPMENT

- Buildings, facilities and equipment well maintained and updated.
- Running Hospital 24/7 whole year round: pharmacy, diagnostic imaging, anaesthesia, internal medicine, intensive/critical care, surgeries, ambulatory services, isolation units and necropsy facilities.
- Mobile clinic.
- Access to the main food producing animals (teaching farm or agreement with external farm/s)
- High standard in biosecurity, breeding and animal welfare of faculty and external facilities (slaughterhouses, farms, industries..) **Biosecurity_Manual_Final_6Jan10.pdf**
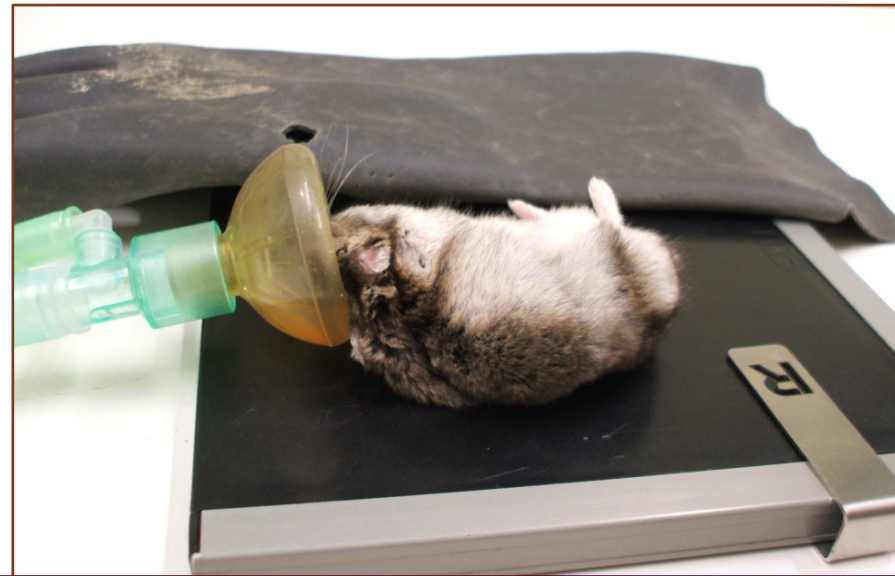
5. ANIMAL RESOURCES & TEACHING MATERIAL OF ANIMAL ORIGIN

- **Adequate number and variety of animals (healthy, diseased, cadavers, materials) to meet the objectives**
- **Guarantee clinical hands-on training of students in all domestic species**
  - **Indicators: animals/students, hospitalizations/students, consultations/students, necropsies/students, etc.**
- **Supportive medical record system (teaching, research, services)**

6. INFORMATION RESOURCES

- State-of-the-art information resources (teaching, research, services, continuing education)
- Library with qualified librarian and IT unit
- Timely resources of information (print, Emedia, Elearning platform) easily available for staff and students (Wi-Fi)

7. STUDENT ADMISSION, PROGRESSION & WELFARE

- **Number of students consistent with resources (buildings, facilities, equipment, staff, clinical caseload….)**
- **Objectives, curriculum, admission requirements, criteria and procedures public and clear.**
- **Admission procedure consistent, fair and free of discrimination.**
- **Monitoring of progression and drop-out of students.**
- **Support to students needs (physical, emotional, welfare)**
- **Possibility of student feed-back**

8. STUDENT ASSESSMENT

- Assessment tasks and grading criteria: clear, public and timely available to students
- Explicit mechanism to pass based on learning outcomes
- Explicit mechanism to appeal
- Valid and reliable methods of formative and summative assessment
- Significant value of direct assessment and control of clinical skills and Day One Competences

9. ACADEMIC & SUPPORT STAFF

- Appropriate number of qualified and prepared staff to deliver the educational programme
  Indicators: Full Time Equivalents of teaching staff/ students, Academic/Support Staff
- Training and qualification (good teaching and evaluation practices, learning & e-learning resources, biosecurity & QA procedures)
- Most teachers must be <u>veterinarians</u>
- Academic positions must offer stability, continuity, and competence of the academic staff
- Balanced workload of teaching, research and services
- Well-defined, comprehensive and publicised programme for the professional growth and development of academic and support staff
- Promotion criteria for academic and support staff must be clear and explicit

SELF EVALUATION REPORT

10. RESEARCH PROGRAMMES, CONTINUING AND POSTGRADUATE EDUCATION

- Significant and broad research activities of staff (research-based teaching)
- All students must be trained in scientific method and research techniques relevant to evidence-based veterinary medicine
- All students must have opportunities to participate in research programmes
- Establishment must provide advanced postgraduate degree programmes (PhD, internships, residencies and continuing education programmes

SELF EVALUATION REPORT

11. OUTCOME ASSESSMENT AND QUALITY ASSURANCE

THE ESTABLISHMENT MUST:
- Have a <u>policy for quality assurance</u>, public and part of their strategic management.
- Deliver programmes to encourage <u>students' active role in the learning process</u>.
- <u>Apply pre-defined and published regulations covering student "life cycle"</u>(admission, progression, recognition and certification).
- Assure of <u>the competence of their teachers</u> and apply fair and transparent processes for the recruitment and development of the staff.
- Collect, analyse and use relevant information for the <u>effective management of their programmes</u>.
- <u>Publish information about their activities</u>, including programmes, which is clear, accurate, objective, up-to date and readily accessible
- <u>Monitor and periodically review their programmes</u> to ensure that they achieve the objectives (continuous improvement).
- <u>Undergo external quality assurance</u> in line with the ESG on a cyclical basis.

NEW INDICATORS

- 22 Indicators (2 new)

Indicators_approved_by_ExCom_28.01.2015.pdf

- Automatic calculations in the SER

ESEVT Indicators draft 2 Excel table for automatic calculation 12 04 2015.xlsx

MEMBERS OF EAEVE

(May 2015)

Group 1. **Ireland 1, The Netherlands 1, UK 7**

Group 2. **Portugal 6, Spain 11**

Group 3. *Albania 1*, **Greece 2**, *Israel 1*, **Italy 13, Romania 4**

Group 4. **Belgium 2, France 4**

Group 5. **Austria 1, Germany 5**, *Switzerland 1*

Group 6. **Denmark 1, Estonia 1, Finland 1, Latvia 1, Lithuania 1**, *Norway 1*, **Sweden 1**

Group 7. **Croacia 1, Czech Republic 2, Hungary 1, Poland 4, Slovak Republic 1, Slovenia 1**

Group 8: *Bosnia-Herzegovina 1*, **Bulgaria 2**, *FYROM 1*, *Turkey 13*, *Serbia 1, Jordan 1*

Italics: non EU members

ESTABLISHMENTS < **96 in 34 countries**

75 in EU

ESTABLISHMENTS' STATUS

(May 2015)

EAEVE_Establishments_Status_January2015.pdf

- **MEMBERS: 96**
  - **Non evaluated (yet) by the ESEVT: 14 (14.6%)**
  - **Evaluated by the ESEVT: 82 (85.4%)**
    - **Stage 1**
      - **Approved: 59 (61.4%)**
      - **Conditionally approved: 5 (5.2%)**
      - **Non approved: 18 (18.75%)**
    - **Stage 2:**
      - **Accredited: 10 (10.4%)**
      - **Non accredited: 1 (1%)**

APPROVED ESTABLISMENTS IN EU

(MAY 2015)

Austria	1 / 1	Belgium	2 / 2
Bulgaria	2 / 0	Croatia	1/1
Denmark	1 / 1	Czech Republic	2 / 2
Finland	1 / 1	Estonia	1 / 1
Germany	5 / 5	France	4 / 3 (1)
Hungary	1 / 1	Greece	2 / 1
Italy	13 / 12 (1)	Ireland	1 / 1
Lithuania	1 / 0	Latvia	1 / 0
Portugal	6 / 1	Poland	4 / (2)
Slovak Republic	1 / 1	Romania	4 / 1 (1)
Sweden	1 / 1	Slovenia	1 / 1
The Netherlands	1 / 1	Spain	11 / 8
		UK	7 / 7

Establishments: Total /Approved + (Conditionally Approved)

75 / 54 + (5) = **79%**

EXAMPLES OF MAJOR DEFICIENCIES

☐ Lack of Strategic Plan

EUROPEAN ASSOCIATION OF ESTABLISMENTS
FOR VETERINARY EDUCATION

STRATEGIC PLAN
2015-2020

EXAMPLES OF MAJOR DEFICIENCIES

☐ **Facilities**: lack or not appropriate (hospital, necropsy room, isolation units..)

EXAMPLES OF MAJOR DEFICIENCIES

☐ Biosafety not appropriate
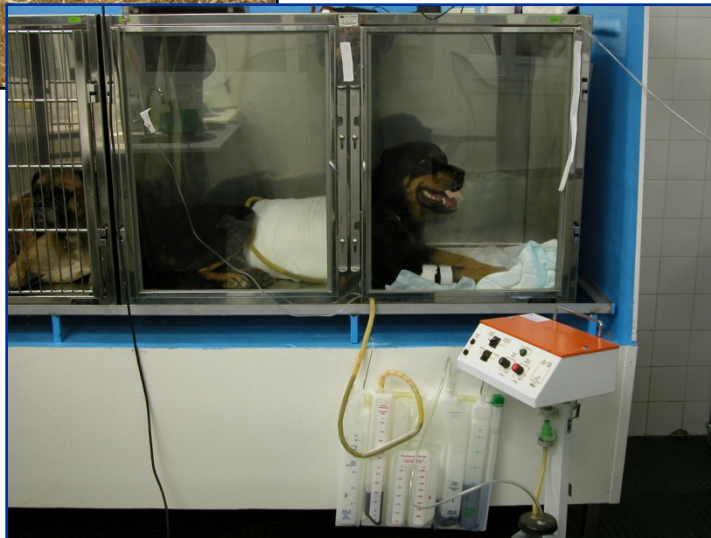
EXAMPLES OF MAJOR DEFICIENCIES

☐ Lack of mobile clinic for food producing animals

EXAMPLES OF MAJOR DEFICIENCIES

□ Non running emergency service 24h/7 all year round

EXAMPLES OF MAJOR DEFICIENCIES

□ Caseload in clinics: low or lack of species
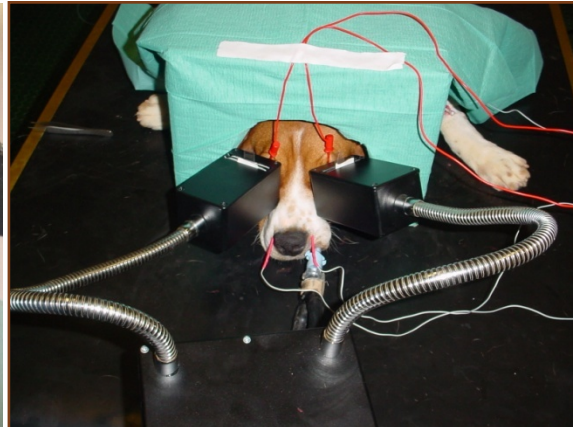
EXAMPLES OF MAJOR DEFICIENCIES

☐ Non appropriate "hands on" training of students (groups too large)

EXAMPLES OF MAJOR DEFICIENCIES

☐ Insufficient teaching in Food Hygiene, Animal Production, visits to slaughterhouses

EXAMPLES OF MAJOR DEFICIENCIES

☐ Problems with animal welfare

Future of the Evaluation System

- **AVMA & COE** *(American Veterinary Medical Association and its Committee on Education)*

- **AVBC** *(Australasian Veterinary Boards Council)*

- **SAVC** *(South African Veterinary Council)*

- **RCVS** (Royal College of Veterinary Surgeons)

- **ESEVT** *(EAEVE/FVE)*
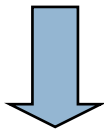
Development of a GLOBAL ACCREDITATION SYSTEM

Gracias por la atención

Muralla Romana de Lugo, S. I d C, Patrimonio de la Humanidad