

System-wide analysis of the European System of Evaluation of Veterinary Training (ESEVT)

Period 2020–2023

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1. Introduction

The history of the European System of Evaluation of Veterinary Training (ESEVT) is accessible at <http://www.eaeve.org/esevt/history-of-the-esevt.html>.

In summary, ESEVT started in 1985 with pilot evaluations completed in several European Veterinary Education Establishments (VEEs). In 1992, a permanent system was set up and implemented in most European VEEs. This system was assessed on a regular basis (2000, 2007, 2011, 2016, 2019, 2022) and subsequently improved by amendments of the Standard Operating Procedure (SOP) by the EAEVE General Assembly (2008, 2009, 2011, 2012, 2016, 2019, 2023) (see: <https://www.eaeve.org/esevt/sop.html>).

Furthermore, based on the recommendations made by the European Association for Quality Assurance in Higher Education (ENQA) external review in 2022, several improvements were implemented (to be described in the follow-up report after external review by ENQA 2022).

The objective of the current report is to complete a system-wide analysis (SWA) of ESEVT for the period 2020–2023, in order to propose recommendations for the improvement of ESEVT and of veterinary education in Europe, and to identify the main challenges for the future. Specific aspects of veterinary education are and will be addressed in thematic analyses.

This period was unfortunately affected by two serious crises. The COVID-19 pandemic with its peak in 2020 and 2021 led to the postponement of several visitations and necessitated the elaboration of special regulations¹ for handling the situation and the introduction of hybrid visitations (i. e. some experts participating online). The General Assembly was also postponed and held online in December 2020 with no Educational Day. The outbreak of the war between Russia and Ukraine in February 2022 led to the cancellation of several visitations and the temporary suspension of relations with Russia.

This report was first drafted by the members of CIQA. It was then amended both internally (by the Coordinators' Group, European Coordinating Committee on Veterinary Training (ECCVT), European Committee of Veterinary Education (ECOVE), EAEVE members and Executive Committee (ExCom)), and externally (by stakeholders, inter alia Federation of Veterinarians of Europe (FVE), Union of European Veterinary Practitioners (UEVP), European Board of Veterinary Specialisation (EBVS), International Veterinary Students' Association (IVSA)).

¹ *Exceptional rules for ESEVT Visitations planned in 2020/2021 considering the extraordinary circumstances linked to the COVID-19 pandemic* by the SOP WG. EAEVE, 2022. 8 p. URL: https://www.eaeve.org/fileadmin/downloads/SOP/Exceptional_Rules_for_ESEVT_Visitations_planned_in_2023_approved_by_ExCom13122022.pdf

2. Follow-up of the System-wide analysis of ESEVT for the period 2016–2019

The previous system-wide analyses (SWA) of ESEVT (for the periods 2011–2015 and 2016–2019) are available on the EAEVE website at :

<https://www.eaeve.org/esevt/system-wide-analysis.html>. The last one included several recommendations.

2.1. Recommendations for the ESEVT Standard Operating Procedure (SOP)

The 10 recommendations for the ESEVT SOP were analysed and implemented by decisions of the General Assembly (GA) and/or the Executive Committee (ExCom). There were two amendments of SOP 2019 (in December 2020 and then in September 2021) and a complete revision of the SOP accepted by the GA in June 2023 (df. <https://www.eaeve.org/esevt/sop>).

-) More precise definition of several items of the current SOP, i.e.:

- Standards versus Substandards;
Done. (In SOP 2019 as amended in 2021 Areas were introduced in the place of Standards, and Substandards became Standards).
- supervised self-learning;
Done (see Annex 6 p. 52. of SOP 2023)
- difference between academic clinical training and External Practical Training (EPT);
Done (see Annex 6 p. 52. of SOP 2023 – these notions were gradually clarified to be formulated as Core Clinical Training and Elective Practical Training in SOP 2023)
- status (compulsory or not, included in the core curriculum or not), format (pre-clinical and clinical) and minimal duration of EPT;
Done (see Annex 6 p. 57. of SOP 2023)
- minimal training to teach and to assess for academic teachers and practitioners involved with teaching;
Done (see Annex 6. Standard 9.1 p. 72–73. of SOP 2023)
- calculation of ESEVT Indicators I4 to I7 in case of tracking system in the last year of the curriculum;
Done (see Annex 4 Introduction point 3. p. 40. of SOP 2023)
- recommendations on the minimal requirements for the practical training in pig production and diseases;
Not specified in the SOP 2023, because it was concluded that the main objective is the acquisition of D1Cs in all common species, so prescriptions for one species would not be appropriate.

- ways to advertise before a Visitation the Session in Confidence (“Open-hour” session);
Done (Annex 6. p. 80. of the SOP 2023)
- request for a hard copy of the SER and appendices for all experts.
Done (decision of visitors in SOP 2023)
-) Necessity to add a Substandard in the SOP devoted to the minimal requirement about the organisation and management of a VEE.
Done (see in Area 1 of SOP 2023)
-) Necessity to review the terminology used by ECOVE regarding the VEE’s status, because of the current inequity between 1 and 2 Major Deficiencies (Conditional Accreditation and Non-Accreditation respectively).
Done (see Chapter 2 p. 11. and p. 16. of SOP 2023)
-) Increased number of Visitors in case of increased workload for the team (e.g. multiple extramural facilities to be visited).
Done (see Chapter 2 p. 6 of SOP 2023)
-) Better definition of the participation of Associate members in the functioning of EAEVE and ESEVT.
Done (see EAEVE Statues Approved by the General Assembly on 30th May 2024 in Paris Alfort, France)
-) Improve the format and content of the current PVQ.
Done by CIQA approved by ExCom in use since 2023
-) Improve the E-learning course for candidate and current experts.
Done (updated for SOP 2023 in November 2023, tested by CIQA in December 2023 with feedback on the course)
-) Enhance the training of all experts on QA in higher education.
Done. (Annual webinars have been introduced for all experts by the Director of ESEVT on hot topics related to their work in ESEVT. It was also suggested for experts to follow a CPD course in QA locally.)
-) Recruit additional experts in the under-represented disciplines.
Done with partial success. (Invitation on the EAEVE website, promotional video for student experts, invitation for experienced practitioners to become experts during the FVE GA.)
-) Improve the functioning of QA loops in ESEVT activities, e.g. by introducing a mechanism for a continuous adaptation of post-Visitation questionnaires, aiming to retrieve maximally useful feedback.
Done. (Electronic PVQs were introduced for each type of visitation in 2023 eliciting more and more extensive feedback. Broadening of regular monitoring tasks of CIQA.)

2.2. Recommendations for Veterinary Training in Europe

Seven recommendations were put forward by the previous SWA.

Some of these recommendations have been discussed during EAEVE Educational Days (2021, 2022, 2023). The complete programmes and the presentations are available on the EAEVE website for members at: <https://www.eaeve.org/ga/general-assembly>.

-) More formal definition, communication and implementation of the procedures for:
 - biosecurity, biosafety and welfare;
Biosecurity is defined in SOP 2023, and the biosecurity manual has become a compulsory appendix of SERs since 2019. A sample biosecurity manual is available through the website of EAEVE among external publications.
 - training to teach and to assess;
“*Guidelines for the minimum training to teach and to assess*” have been included under standard 9.1 in SOP 2019 p. 82.
 - assessment of D1C.
E-Logbook working group: interim reports on Educational Days in 2023 and 2024; guidelines and final report in progress.
-) Full implication of academic staff in extramural clinical training.
Done. Core Clinical Training organised extramurally must be under supervision of teaching staff and not qualified persons. This is included in SOP 2023.
-) Better awareness and training of staff and students on Artificial Intelligence in education and veterinary medicine, including digital health and numeric medicine.

An ECCVT Expert Working Group on the impact of digital technologies and artificial intelligence in veterinary education and practice was set up and prepared a [*Report of the ECCVT expert working group on the impact of digital technologies & artificial intelligence in veterinary education and practice*](#) (Adopted by ECCVT on 28 September 2020) which was presented at the Educational Day in 2021 in the “Digital Technologies and Artificial Intelligence in veterinary education” session. There were two further presentations on “Day One Competences in DT&AI from the practitioner’s point of view” and “Integration of DT&AI in the veterinary study programme: examples and technologies of the VEE” (on behalf of VetCEE). All presentations are available for members.

-) More efficient use of skill labs, E-learning and MOOC for the acquisition of knowledge, skills (practical, clinical, soft ones) and competences.

EAEVE is participating in several projects related to this recommendation run by members the achievements of which are regularly presented at Educational Days and in [publications](#).

- [VetRepos project](#) (supported by Erasmus+) presented in 2022 and 2023 respectively (“A shared item repository for progress testing in European

veterinary schools” and “VetRepos”) and a special seminar was held during the Educational Day in 2023.

- [SoftVets competence model](#) presented in 2021 (“Pan-European soft skills curriculum for undergraduate veterinary education – SOFTVETS”)
- Several publications by EAEVE experts on using technology in the classroom, using models, skill labs, etc. Cf. [publications](#).

-) Better collaboration between VEEs for the development and sharing of pedagogical tools.

Working groups (e-Logbook WG, VTH WG) and projects created many opportunities for VEEs to engage in workshops and share pedagogical tools.

-) Promotion and implementation of the One Health concept throughout the curriculum.

In 2021 a poster session and in 2022 a session was devoted to the One Health issue in veterinary training during the Educational Days. Presentations are available for members.

-) More formal definitions of possible alternative approaches allowing a VEE to cope with its specific limitations (species availability, regional/cultural specificities, national legislation)

COVID-19 forced the VEEs to speed up the development and implementation of alternative methods (much of it digital). Some of these were presented on Educational Days, some published. E.g. session on *Measures taken to deal with the COVID-19 pandemic (Part I)* (2021) with topics such as “Abattoirs and food safety education during the COVID-19 pandemic”; “Virtual visits of pig farms in times of COVID-19. A feedback”; “Impact of COVID-19 pandemic on the teaching-learning processes: Benefits and Challenges through novel technologies, Ankara University example”.

Additional documents are available for members on the EAEVE website:

<https://www.eaeve.org/publications.html>

<https://www.eaeve.org/publications/externalpublications.html>

3. System-wide analysis of ESEVT for the period 2020–2023

3.1. Analysis of the ESEVT procedures

3.1.1. General aspects

Facts

Analyses of ESEVT procedures during the period 2020–2023 have been made by CIQA, which discuss all Post-Visitation Questionnaires (PVQ) according to the *Internal rules for evaluating PVQs* elaborated by CIQA in 2022. These rules specify the actions to be taken by CIQA to close the QA loop in case of non-conformities related to the procedure of visitations or the performance of individual experts.

The surveys are systematically completed after each Visitation and cover various aspects of the system, i.e. logistics of the Visitation, team cooperation and experts' skills and performance. They are completed both by the VEE's Head and Liaison Officer, and by all members of the Visitation Team. After having analysed the PVQs, CIQA makes proposals to the ExCom, which analyses their relevance and decides whether to amend the procedures or not. When a potential serious criticism concerns one individual, CIQA will formally suggest to the ESEVT Director to contact the visitor personally and confidentially to discuss the matter and report back to CIQA.

The list of comments and suggestions for improvement from PVQs from both Visitors and the visited VEEs is provided in *Annex 1*. (Comments which were irrelevant from the point of view of the ESEVT process were excluded.) It concerns 5 Visitations performed under SOP 2016 whereas the rest (36) were performed under SOP 2019. Most comments/suggestions are related to the ESEVT SOP, pre-Visitation preparation, training of ESEVT Visitors, duties of the ESEVT Visitors, Visitation Programme and Visitation Report.

Comments related specifically to changes due to COVID-restrictions and to the introduction of the on-line PVQ are presented under separate headings in Annex 1.

Comments

The analysis of PVQ feedback has been useful to improve the ESEVT procedure in several aspects, thus closing the QA loop. The introduction of pre-visitiation webinars for the team and also with the VEE, the introduction of a shared Draft A, the tailoring of the PVQ to the type of visitation and the on-line version of the PVQ have been suggested, realised and received well. The hybrid visitations during the COVID epidemics have contributed valuable experience with remote experts that can be considered as an alternative to last-minute changes of experts also permitted by SOP 2023 (cf. p. 7.). Thus, up to 3 remote experts seems to be acceptable if necessary. There are however other specific areas mentioned repeatedly in the PVQ's that deserve further attention.

Suggestions

It is suggested that the current procedure for the continuous monitoring of ESEVT procedures through the analysis of the PVQs is continued. It is also suggested to focus on further improvement of the specific areas listed in 3.1.2–3.1.5 of the present SWA in the future.

The hybrid visitations with remote experts may be an alternative in case of last-minute changes of experts also permitted by SOP 2023 (cf. p. 7.).

3.1.2 Visitation teams and experts

Facts

All information related to the recruitment, preparation, assessment and competences of experts can be found on the EAEVE website at <https://www.eaeve.org/esevt/experts>.

The experts' E-learning course was updated with the new features of SOPs and situational judgement tests related to the ESEVT Expert Competency Framework. The last update was made in November 2023, launched in January 2024.

The composition of visiting teams is specified in the SOPs and the organisation of the team is guided by the *Principles for the Assemblage of Visitation Teams* endorsed by ExCom in 2020 and revised by CIQA in 2022.

Relying on the Office, CIQA regularly monitors the completion of e-learning courses by candidate visitors; the submission of no-conflict of interest statements; the composition of visiting teams; and the PVQs.

Annual webinars held by the Director of ESEVT were introduced in 2022 for all experts to provide them with updates on the SOP, ESEVT, or any current issue that may have an impact on their work. It is also an opportunity to ask questions.

Two preparatory webinars for Visitations have been introduced and formally made mandatory in SOP 2023 the first of which serves as an introduction to the writing of draft A of the report.

The acceptance of observers and joint visitations are also clearly regulated in the SOP.

Comments

The procedures for the admittance of new experts and their preparation as well as the team assemblage and the utilisation of PVQs in the QA of visitations is straightforward and has become a routine. Due to some emergency situations usually caused by COVID-19, the need for some regulation for the replacement of appointed visitors within 6 months to the visitation occurred. Since the pool of visitors is barely sufficient to cope with the increased number of visitations, such substitutions are very difficult, and no

strict rules can be applied. As a matter of course, the basic principles and the absence of conflict of interest are always adhered to.

The annual webinars, though no formal feedback is required, were welcome and the attendance online is always high. The extensive presentation of the Director is available for those who cannot participate.

Similarly, the preparatory webinars are also appreciated in the PVQs by the visitors and contribute directly to the improvement of the efficiency of visitations. However, the preparation and support of student members may need clarification.

The introduction of online PVQs seem to elicit more and more open and extensive feedback from both the VEEs and the visitors offering more insight into the process and personal contributions.

Recommendations and suggestions

Some form of brief feedback on annual webinars may be useful, especially supplemented with an opportunity for those who could not participate online to put questions to the Director of ESEVT. Annual webinars may also be opportunities for conveying the rationale behind ECOVE decisions which alter the suggestions of Visiting Teams to enhance uniform interpretation of major and minor deficiencies.

The recruitment of experts must be continued, and new ways of attracting especially younger experts could be beneficial. Deans of the member VEEs could be approached with a letter explaining the benefits of having experts from their VEE who bring home the experiences from the visited VEEs and become familiar with the evaluation procedure as well.

Since practitioners are less familiar with how VEEs and veterinary training has evolved since their studies, it would be beneficial to enhance their training in the SOP (especially in the Areas they are responsible for) or prioritise younger practitioners with more recent experience.

Higher level of clarification to the student of his/her role in the team is suggested, for example during preliminary meetings, by designation of an experienced team member as mentor, by special discussions related to the report.

3.1.3. Logistics of the visitations

Facts

The timetable and guidelines for the organisation of all types of visitations have been further clarified in SOP 2023 (Chapter 2 and Annex 7, 10 and 12). Coordinators take care that these are closely followed. Some experience has been gained with visitations in VEEs with more than one study programme or which delegate a part of their curriculum to different legal entities. It is possible to involve one more expert in these cases, and the finetuning of the visitation programme by the team is also possible.

Comments

Several Experts and VEE's use the PVQ to point out that the timetable of the Visits is very tight (c.f. Annex 1). Comments from Visitation teams focus on the need for more time for the team to discuss and suggest reconsidering the need for two formal dinners and to have an earlier start on Monday, whereas VEEs suggest more time for talking to staff during visits to facilities. Both groups mention the need to reconsider the format for meeting alumni and stakeholders.

CIQA is gathering experiences and feedback on visitations in VEEs with more than one study programme, distributed model, etc. to elaborate suggestions regarding the logistics of such visitations.

Recommendations and suggestions

Recommendations for the organisation of visitations to VEEs with more than one study programme or partially delegated curriculum/distributed model must be elaborated.

Starting the Visitation program earlier on Monday and the merging of the formal dinners on Monday and Wednesday should be considered.

Further it is suggested that the meeting with alumni and external stakeholders should have a structure that makes it clearer what their relation to the VEE is and offers an opportunity to learn about their opinion of the training. This meeting could be more efficient if it were not held during a meal.

3.1.4. Quality Assurance in the accreditation process

Facts

QA has become an integral part of each standard since the implementation of SOP 2019. In SOP 2023 the QA parts of the standards are more elaborate and detailed to enhance the preparation of VEEs and the assessment for the visitors.

CIQA has made an analysis of the impact of the integration of Standard 11 of the SOP 2016 into the other standards in SOP 2019². It was found that there were few quality-related deficiencies found in the incorporating standards, less than were identified previously under Standard 11 of SOP 2016.

Comments

² Integration of QA standards into the other standards of SOP 2019/2023. In: *CIQA Analysis of major and minor deficiencies 2017-2024*. p. 3-4.

Though the integration of QA aspects into all standards is a logical development, it is a challenge to visitors. The more explicit description of the key QA elements of standards is a great help. However, the wish for a kind of checklist occurs in PVQs.

One of the most important elements is Outcomes Assessment. Among others a clear demonstration that all students achieve D1Cs is important as well as the input from stakeholders (particularly recent graduates, employers in primary care practice and other areas of employment) on whether the curriculum prepares graduates for practice. The general alumni surveys conducted by host Universities and the brief encounter with alumni and stakeholders during the Visitation may not always be satisfactory. The importance of this issue is underlined by the VetSurvey conducted by FVE in 2022–2023 which found that “Veterinary schools are doing a poor job in preparing new graduates for the world of work. When asked to rate them, results suggest European veterinarians think they ‘could do better.’” ... “Veterinarians who have joined the world of work within the past five years feel insufficiently skilled — 52% say they lack sufficient clinical skills (52%) and 19% judge themselves to lack sufficient communication skills to deal with clients and colleagues.”³ Though the sample was not representative of the veterinary population of the 37 participating countries these findings must be considered as a warning.

Recommendations and suggestions

The e-learning course could be supplemented with some more QA related items.

Though in fact all the elements of a well-developed QA system are included in the Standards, QA aspects of standards could be dealt with during the annual webinars for experts.

3.1.5. Decision-making processes

Facts

Chapter 2 in the SOP 23 clearly defines the decision-making process for the Full Visitation (section 1.7), Re-Visitation (section 2.7) and Preliminary Visitation (section 3.7) together with the Appeal and Complaint procedures. There were some ECOVE sessions which covered a great number of reports due to the congestion of visitations after the COVID-period.

There were two appeals and two complaints between 2020–2023⁴. The two complaints were related to the *Code of Conduct* of EAEVE, not to the ESEVT process itself.

³ *Third survey of the Veterinary profession in Europe 2023*. VetSurvey. Federation of Veterinarians of Europe (FVE) : CM-Research,. 171 p. <https://fve.org/cms/wp-content/uploads/FVE-Survey-2023-updated-13-Dec-23.pdf> p. 10.

⁴ *CIQA Analysis of Complaints and Appeals 2014–2024*. 3 p.

The ENQA panel suggests further defining the format of ECOVE meetings concerning appeals and a shortened timeline for the first and optional third phase of the appeals process by more frequent use of videoconferences. There were two appeals in 2020–2023 and in those cases the 1st phase took 1.5 and 4.5 months, respectively. Only one appeal had a 2nd phase which lasted for 20 days and thus the relatively long timeline (4.5 months) of this case was due to a gap phase of 2.5 months between the 1st and 2nd phase. No third phase was present in either of these cases.

There are new elements in SOP 2023 concerning the follow-up of the decisions. Interim reports (Chapter 2.4. and Annex 14) must be submitted to ECOVE for evaluation 3 and 5 years following the full visitation. According to SOP 2023 in case ECOVE accredited the VEE with minor deficiencies only an interim report must be submitted one year after the full visitation.

The ENQA review report raised concerns regarding the discrepancy between Visiting Teams report and suggestions and ECOVE decisions. An analysis⁵ was conducted by CIQA in this respect and found that these discrepancies are decreasing due to the general decrease in the number of deficiencies; the regulations in the SOP enhancing clear formulation of deficiencies; the better communication with coordinators; etc.

Besides, SOP 2023 states that any amendment by ECOVE of the VR must be explained and communicated to the VEE and the Full Visitation team by the Chairperson of ECOVE and the ESEVT Director.

Comments

The frequency of ECOVE meetings (two per year) seems to be sufficient when the rhythm of visitations is normal. However, there is an increasing number of visitations, and an increasing number of interim reports to be reviewed.

The low number of appeals indicates that the procedure is working well. In fact, one of the appeals regarded the organisation of the visitation during COVID-times not the decision as such. However, a 1st phase duration of 4.5 months in one of the appeal cases seems quite long.

Though VEEs may complain about the increased frequency of Interim Reports these contribute to the regular monitoring of the operation of the VEE and ensure continuous improvement.

Recommendations and suggestions

The analysis of the gap between Visiting Teams' suggestions and ECOVE decisions must be continued to monitor the trend of discrepancies.

⁵ CIQA Analysis of gaps between the decisions proposed by the ESEVT teams and the final ECOVE decisions 2014-2024. 10 p.

Beside the explanation and communication of ECOVE decisions altering the proposals of visiting teams, the recording of these alterations by ECOVE together with explanations could be beneficial. The maintenance of such a document by ECOVE and its sharing with all experts (for example during annual webinars) could be recommended to improve the system, allowing experts to avoid misjudgements. It could be developed into a kind of “consistency book” that would enhance the distinction between major and minor deficiencies that was suggested by ENQA.

Online ECOVE meetings should be organised in cases of exceptional workload and in those appeal cases where the expected timespan between formal appeal and decision of the 1st phase exceeds 2 months.

Further, preparatory work at the EAEVE Office to form a potential appeal panel during the 1st phase may shorten the gap phase if the VEE decides to appeal against ECOVE’s decision.

3.2. Analysis of the results of the evaluation of the veterinary training in Europe

Facts

During the period 2020–2023 there were 41 Full Visitations: 5 were completed based on the SOP 2016, 11 full Visitations based on the SOP 2019, 3 full visitations based on SOP 2019 as amended in 2020, and 22 full visitations based on SOP 2019 as amended in 2021. There was one Stage 2 visitation as well under SOP 2012 in 2021.

There were postponed/cancelled visitations mostly due to the COVID-19 situation: 18 in 2020 and 4 in 2021.

28 Re-visitations and 7 Consultative Visitations were also completed. *Table 1* gives an overview of the visitations.

Table 1 Visitations between 2020 and 2023

SOP	Full visitations				postponed + cancelled	Re-visitations					Consultative visitations				Stage 2
	2016	2019	2019(20)	2019(21)		2012	2016	2019	2019(20)	2019(21)	2016	2019	2019(20)	2019(21)	
2020	3	3			17+1		2	1							
2021	2	8	1	2	3+1	2	6				4			1	
2022			2	8	3		7	3	1	1		2			
2023				12	1				2	3			1		

Precise information on the date and location of visitations is available on the website (<https://www.eave.org/esevt/visitation-programme>).

The system of evaluation was based on the assessment of the compliance of the visited VEE with the ESEVT Standards described in the SOPs used during the period, leading to the identification of commendations and deficiencies. The evaluation process has not changed significantly since the last system-wide analysis. However, SOP 2019 was modified two times: once in 2020, then in 2021 and a complete revision was finished in 2023.

An important change was that SOP 2019 as amended in 2021 united Conditional Accreditation and Non-accreditation under the umbrella of Pending Accreditation for VEEs with one or more major deficiencies. However, if a VEE with Pending Accreditation does not manage to have a successful Re-visitiation within 2 years, the status will turn into Non-accreditation.

Previous SOPs obliged ECOVE to explain its decisions. It is a new feature of SOP 2023 that “In the event that the ECOVE decision differs from the proposals of the Full Visitation Team, the rationale behind these changes is explained via a webinar first to the visited VEE and then to the Full Visitation Team by the ECOVE Chairperson (or another ECOVE representative) and the ESEVT Director.”⁶

A statistical overview of the deficiencies and accreditations shows that there is a decrease in the number of major deficiencies and an increase in the number of minor deficiencies. Accordingly, the rate of accreditations (25% in 2020, 54% in 2021, 50% in 2022, 66% in 2023) relative to non-, conditional or pending accreditations had been increasing between 2020–2023.

The complete list of the Major and Minor Deficiencies identified by ECOVE for the period 2020–2023 is provided in *Annex 2* and *Annex 3* respectively.

Comments

The big change, incorporating all the QA requirements into the other standards, took place during the elaboration of SOP 2019 which was fine-tuned by the amendments and the revised SOP 2023. The process became better regulated, and the standards were enriched with more details, and formulated with increasing clarity. The analysis of deficiencies by CIQA⁷ suggest that one factor contributing to the decreasing number of major deficiencies and consequent pending/non-accreditations is the periodic improvement of the SOP. As a matter of course, the alterations in the rhythm of visitations due to COVID allow only a cautious assessment of trends which are similar to those found in the previous SWA.

The introduction of Pending Accreditation status had a practical consequence for VEEs which would lose their status or financing in case of non-accreditation on the one hand.

⁶ *European System of Evaluation of Veterinary Training (ESEVT) Standard Operating Procedure 2023*. EAEVE, FVE p.12.

⁷ *CIQA Analysis of major and minor deficiencies 2017-2024*. 24 p.

On the other hand, the two-year limit for the rectification of major deficiencies speeds up the necessary improvements.

ECOVE's obligation to explain its decisions for the VEE and the Visitation Team may also be looked upon as part of the learning process for both parties.

The analysis of deficiencies shows that – again similarly to the findings of the previous SWA – materials of animal origin, clinical caseload, and hands-on clinical training (especially in the case of food producing animals) remained the greatest challenge for VEEs. This period was especially difficult from this point of view with COVID-19 hindering practical training for some months, and the occurrence of other biohazards such as the outbreak of African swine fever that has made visits to pig farms totally impossible in many parts of Europe. Slaughterhouses and meat plants are also more and more reluctant to let groups of students make visits and perform hands-on work on the spot. By now, skill labs are used in almost all of the VEEs, and COVID-19 urged the introduction of innovative solutions to compensate for the lack of onsite activities like virtual reality visits to slaughterhouses, and the extensive use of E-learning.

Biosecurity procedures and the preparation of staff for teaching and assessment also remained a challenge for the VEEs.

Based on the SERs and Visitations Reports, Major Deficiencies for the concerned VEEs were most commonly associated with the following challenges:

-) providing the number and variety of healthy and diseased animals, cadavers, and material of animal origin (especially in food-producing animals) sufficient for students;
-) ensuring the acquisition of D1Cs and their assessment;
-) improving biosecurity procedures and facilities to conform with relevant legislation, health and safety and animal welfare regulations;
-) provision of 24/7 emergency services, night services, on-call services;
-) provision of adequate isolation facilities;
-) provision of adequate number and quality of teaching and support staff.

Recommendations and suggestions

Actually, all these areas of persistent difficulty have already been addressed by EAEVE in some way or another. The achievements of working groups must be shared and promoted. Further efforts must be made to carry on with the sharing of best practices by way of preparing thematic analyses, enhancing the formation of working groups, organising workshops, etc. to support VEEs overcoming these difficulties.

4. Recommendations for the future

4.1. Recommendations for ESEVT and the ESEVT SOP

Based on the above analysis, the major recommendations are summarised as follows:

-) Experiences from visitations at VEEs with more than one study programmes, more than one location or partially delegated curriculum must be gathered, and recommendations should be elaborated. (see also 3.1.3)
-) The recruitment of experts must be continued, and new ways of attracting experts have to be found. (see also 3.1.2)
-) The preparatory E-learning course for experts could be supplemented with some more QA related items. (see also 3.1.4)
-) Some form of further training e. g. during the annual webinars focusing on the QA elements of standards could be beneficial for all experts in any field. (see also 3.1.4)
-) Brief feedback on annual webinars supplemented with an opportunity to put questions to the Director of ESEVT for those who could not participate online would be appreciated. (see also 3.1.2)
-) Online ECOVE meetings should be organised in cases of exceptional workload and in those appeal cases where the expected timespan between formal appeal and decision of the first phase exceeds 2 months. (see also 3.1.5)
-) CIQA should regularly monitor appeals and complaints, deficiencies, and discrepancies between the deficiencies suggested by Visiting Teams and the final decisions by ECOVE to contribute to the improvement of ESEVT processes. (see also 3.1.4-3.1.5)
-) It is suggested that ECOVE explain discrepancies between conclusions of the Visiting Teams and final decision by ECOVE, with the goal of harmonising the evaluation of deficiencies (upon 1.7 of SOP 2023, p.12.).
-) Fields in which the SOP could be more specific or detailed: QA aspects of the Standards, role of the student visitor, students with disabilities and Day One Competences, meeting with the alumni, etc.
-) Further efforts are needed to address areas of persistent difficulty by sharing best practices by way of preparing thematic analyses, enhancing the formation of working groups, organising workshops, etc. to support VEEs overcoming these difficulties. (3.2)
-) The reliance on volunteer contributions from members' staff to support a significant proportion of EAEVE's activities may reach its limits in the coming years, given the expansion of EAEVE's activities and quality management requirements. Consideration will need to be given to the balance between the objective of keeping the cost for VEEs at a reasonable level and the need to increase the number of permanent staff to manage the workload and maintain the desired level of quality.

4.2. Recommendations for Veterinary Training in Europe

Based on the most frequently identified Major Deficiencies and trends outlined in professional surveys and literature (see *Annex 4*), several recommendations can be made to the VEEs which are quite similar to the ones in the previous SWA. EAEVE must play an active role in revealing the outstanding achievements and innovations of VEEs and the implementation of these recommendations e.g. by organising conferences, seminars, workshops, preparing guidelines for the VEEs.

-) AI and other advances in technology must be closely followed and the related competences must be incorporated in the curriculum preparing students to continuously update their knowledge and skills also in this rapidly changing field; to be aware of their limitations and pitfalls; and to be prepared for their critical use. The teaching staff must also be prepared for this task.

-) The use of digital tools such as virtual reality, computer assisted instruction (CAI) and models could be increased in teaching to compensate for or supplement external practical opportunities.

-) The development of technical and professional skills is more and more important, including soft (non-technical) skills like communication and competencies related to mental wellbeing such as stress management, fatigue management. The continuous update of these competences in the light of changes in the profession; the preparation of the teaching staff for the fostering of these competences or finding and inviting specialists to develop them is a complex task.

-) Student's awareness of Evidence Based Veterinary Medicine (EBVM) and the spectrum of care (range of diagnostic and treatment options together with how these can be adapted to the client and the animal circumstances) should be increased.

-) Students have to be prepared for a diversity of career options. The introduction of inter-professional education (IPE) may be useful in some tracks to prepare students for future cooperation with other professions. The VEE can provide CPD courses enhancing among others specialisation and work in telemedicine. The impact of such courses must be monitored.

-) VEEs must find ways for the realisation of diversity, equity and inclusion (DEI) in the veterinary setting from admission policies, through curriculum planning (e.g. learning outcomes) to teacher training, and faculty policies.

-) In a context of growing knowledge and evolving practices, particular attention should be paid to avoiding curriculum overload by adding new themes without compensation. Emphasis must be placed on maintaining a balanced curriculum to ensure the training of well-rounded generalist veterinarians. The integration of tools and sessions aiming to optimise students' day-to-day personal organisation, to personalise learning strategies, offering an integrative approach to managing physical constraints (heavy loads, etc.) and sleep deprivation, stress, work-life balance would also be a valuable addition.

5. Challenges for the future

5.1. Challenges for ESEVT

The main challenges for ESEVT in the near future are:

-) to implement the recommendations provided in this report;
-) to collaborate with the Directorate General GROW of the European Commission in order to amend the Annex 5.4.1 of the EU Directive 2013/55/EU (by inclusion of the list of Day One Competences as approved by ECCVT);
-) to further enhance the spotting and sharing of best practices and innovative solutions among its members.

5.2. Challenges for Veterinary Training in Europe

Based on experiences gained on Visitations and trends revealed in different studies (see *Annex 4*) VEEs still have to face most of the threats included in the previous SWA, and some have become more emphatic recently.

-) Coping with the integration of VEEs into large universities as relatively small units and ensuring the necessary support for the VEE with the highest cost of training in such a setting;
-) Operating a VTH (with high-level staff, state-of-the-art equipment and service level) in an academic environment and maintain a balance between state-of-the-art VTH models and real-world conditions;
-) Integrating into student training the ability to consider the challenges of an increasingly costly and technology-driven veterinary medicine that is no longer aligned with the financial capacities of some owners; develop the concept of constrained informed consent, meaning consent that is adapted to a realistic care pathway;
-) Occurrence of the new models of veterinary training in public and private VEEs, with possible associated risks such as insufficient research-based clinical training performed by well-trained academic staff;
-) Insufficient/inadequate staff, facilities and/or caseload (in all major species and disciplines) for the number of admitted undergraduate students;
-) Provision of extramural opportunities for clinical training in food producing animals and practical training in food hygiene and VPH;
-) Recruitment of high-level staff to VEEs with research orientation; making PhD and academic pathways feasible for all talented students; involving specialists in the development of soft (non-technical) skills;
-) Insufficient acquisition by all students of all D1C (i.e. basic competences in all domestic species and all disciplines), as a consequence of insufficient hands-on training or excessive tracking/electives for undergraduate students;

-) An overloaded study programme for undergraduate students, with a risk of burnout and insufficient time for self-learning, EPT and social activities;
-) Work on methods and systems in collaboration with the profession to continue improving support for newly graduated students, facilitating the transition from education to integration into the professional world, and the retention of young professionals in the veterinary area.

These threats need to be discussed both internally (mainly through EAEVE ExCom and the General Assembly) and externally with stakeholders (mainly through ECCVT).

Abbreviations

AI: Artificial Intelligence

CAI: Computer-aided Instruction

CIQA: Committee on Internal Quality Assurance (of EAEVE)

CPD: Continuing Professional Development

CV: Consultative visitation

D1C: Day One Competences

DEI: Diversity, Equity and Inclusion

EAEVE: European Association of Establishments for Veterinary Education

EASVO: European Association of State Veterinary Officers

EBVM: Evidence Based Veterinary Medicine

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 (Elective Practical Training in SOP)

ESEVT: European System of Evaluation of Veterinary Training

ESG: Standards and Guidelines for Quality Assurance in the European Higher Education Area

EVERI: European Veterinarians in Education, Research and Industry

ExCom: Executive Committee (of EAEVE)

FV: Full visitation

FVE: Federation of Veterinarians of Europe

GA: General Assembly (of EAEVE)

HACCP: Hazard Analysis Critical Control Point

ICU: Intensive Care Unit

IPE: Inter-professional Education

IT: Information Technology

IVSA: International Veterinary Students' Association

MOOC: Massive Open Online Course

PVQ: Post Visitation Questionnaire

QA: Quality Assurance

RV: Re-visitation

SER: Self Evaluation Report

SOP: Standard Operating Procedure

SWA: System-wide analysis

SWOT: Strengths, Weaknesses, Opportunities, Threats

UEVH: Union of European Veterinary Hygienists

UEVP: Union of European Veterinary Practitioners

VEE: Veterinary Education Establishment

VetCEE: Veterinary Continuing Education in Europe

VPH: Veterinary Public Health

VTH: Veterinary Teaching Hospital

WG: Working Group

Standardised terminology used in SOP 2019 as amended in 2021

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 academically trained teachers;

VEE's Head: the person who officially chairs the above described VEE, e.g. 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;

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.

Annex 1: List of comments/suggestions from Post-Visitation Questionnaires for the period 2020–2023

A1.1. Comments and suggestions for improvement from Visitors.

Comments/Suggestions related to pre-Visitation preparation/training of ESEVT Visitors:

- Criteria and SOPs for indicator excel file evaluation in the field are expected to be explicit. All the data presented in the Excel files should be accompanied by supporting evidence in advance for the team as the level of detail executed in the evaluation largely depends on the team's discretion.
- The number of corrections of tables and SER content allowed prior to the visit would make the process clearer.
- The number of Internet links in the SER should be limited, and an executive summary of the documents concerned should be available if they are not English.
- If there are multiple programs asking the VEE to complete a rubric showing differences between the programs for each standard would be useful. Much of the work was finding this out from the VEE.
- Changes in the core curriculum during the last 3 academic years (e.g., modalities for clinical rotations in this case) should be clearly described in the SER
- I would suggest to include in the preparatory presentation of coordinators that the report on a standard need not be limited to the information provided by the VEE under that particular standard, but may be supplemented with information taken from other parts of the SER or observations during the visitation.
- Improve information regarding SER for the VEEs so those can be more complete beforehand. This includes explaining or choosing different words for some things. For instance, "under/post-graduate student" which, with all the different ways of veterinary education in Europe, can be confusing.
- From a quality assurance point of view, it is essential to have evidence of everything that is written in the SER. Often these proofs are requested on the spot during the visit, but it would seem advisable to provide them to the visitors at the same time as the SER. But the electronic version of the SER now allows for hyperlinks to be attached to folders where the evidence could be archived and shared with visitors before the visit.
- The number of pages of the SER may be the reason for the absence of paragraphs ... So, a recommendation on characters and not in pages could be an improvement for readers.
- The implementation of webinars is very helpful, and may be developed.
- I am of the opinion that the communication of team members with each other should be increased before the visitations. The communication between visitors which not only informs and enlightens members but also allows information sharing. The

pooling of information allows teams to potentially consider a larger amount of information than would a lone individual.

- Use of Google docs greatly improved efficiency of team when working on B(?).
- To produce a one minute/one-page written training instruction in using Word track changes. It complicated the work for the Coordinator when team members don't understand how to exchange text changes using track changes.
- Avoid confusing / conflicting information from the EAEVE secretariat and the VEE regarding organisational issues such as travel insurance.
- A change of coordinator very close to a visitation should be avoided. (shortened)
- If there are more opportunities for training (e.g. QA), it would be great for any expert, as I think it would provide more reassurance and awareness to perform the task

Comments/Suggestions related to pre-Visitation preparation of the Student Visitor:

- Students should be prepared in advance to ensure higher contribution in text reviewing and in expressing their views.
- Despite having taken the e-learning course, I still felt uncertain about what to expect during the visitation and insecure about my role in the process. To address this, I recommend pairing each novice student with a more experienced "buddy" who has already conducted a visitation. This way, the novice student can ask their buddy about their experience and learn from their insights.
- The role and duties of the student should be clearly described. The student cannot be expected to participate in the whole report and in every standard
- I think the position of the student needs to be clarified. I have noticed that different coordinators expect different things from the student. Some expect them to play a part in the report on every standard, others just on one or two or indeed none at all. Then their role is just to meet students and talk to them. Also, if they are down as the second lead on chapters and then have no expectation to write anything, it puts more pressure on the lead writer. I think their role should be more consistent for all visits. It is not that each approach doesn't work, it does so but obviously in different ways.

Comments/Suggestions related to the main duties/conduct of the ESEVT Visitors during Visitations:

- In the long-term, the EAEVE should consider carrying out paid visitations to the Visitors, as it is a long week away from work and family arrangements, and with a high load of knowledge transfer.
- I realised, with this visit, that experts from different areas should have meetings with each other, outside of visits. As an example, meetings between experts in basic

sciences would help to improve their performance, exchange ideas about difficulties encountered in their assessments and learn from more experienced experts.

- There is a need to discuss (between Coordinators?) on the role of suggestions in the visitation report. During this visitation the Chairperson and Coordinator had somewhat different views on whether it is possible to give suggestions regarding Standards which have been found compliant.
- In my experience in other QA visitations (national, ENQA), I find in the ESEVT a too active role of the coordinator in the discussions, with too much influence in the decisions taken by the team.
- We should consider to be more detailed in our description of Coordinator's and Chair's tasks and responsibilities. Basically, is the Coordinator a Team member with expertise or is the Coordinator more of a "back office" person.

Comments/Suggestions related to Visitation Program/Timetable:

- It should be suggested to the VEE that as many students as possible participate in the QA session, and that they invite students in the final few years to join the visiting students during the informal dinner on Tuesday night.
- more time of interaction with students.
- The lunch with the alumni has a limited interest, and I always felt that we were wasting their time. An alternative could be a 45 min webinar.
- In my opinion the meeting with the alumni would be better performed in the meeting room and not during the lunch and all attendees should be introduced before the meeting
- As a first-time expert, I found the time to finish draft C very short, as on Friday, after a full week of visitation, I felt very tired mentally and thought that I could have done a better reporting job if only I had more time.
- start a little bit earlier
- The visitation program is really too short for the fully packed programmed activities to allow an in depth discussion of the team on the rubrics and final agreement with the potential minor and major deficiencies. It would be necessary to keep the whole Thursday for Team work, without any other programmed activity, for instance by starting the visitation on Monday morning. On Monday morning it would be useful to start with the visitation to the facilities, etc., until the end of the academic timetable, to continue on Tuesday morning, leaving the afternoons for the meetings. Now some facilities are visited on Tuesday afternoon while there are not in use by staff and students. (shortened)
- There was far too little time for report writing and especially for shared discussion on the report. Monday should be used more efficiently, and the breaks during the visitation should be used for team discussion. The visitation timetable needs to be

critically assessed before the visitation from the Team's point of view to maximise the working time.

- Knowing it would be very difficult for the Office to consider the dietary requirements of the team as a criterion upon selection, but this was a really weird team (with 7! types of diets) very hard on the VEE.
- Greater attention to the meeting room in the hotel (noisy and little cold).
- The team made a suggestion to the Coordinator regarding the final presentation, to include the number of compliant standards in the whole of the standards, to indicate more accurately how well the VEE is performing, apart from the fact that there may be partially compliant and/or non compliant ones.
- We discussed briefly the need for the two dinners on Monday and Wednesday. It is such a busy week, and the team needs time together in addition to the long days at the faculty. We understand that the dinner on Wednesday is important for the VEE and an occasion for them to promote both the faculty and the ESEVT system, but maybe the merging of the two dinners could be discussed.
- I found the first day (Monday) very difficult. We didn't have a minute alone between the arrival at the airport and the arrival of the management team in the late afternoon because the rooms were not available. Only after meeting with the Dean, we had less than half an hour to drop off the luggage in our bedroom and get ready for dinner. Waking up around 4am, it was a very long day especially since a lot of concentration is needed in the evening. The afternoon meeting could easily be shortened (as it repeats information we have already had or given) or put earlier to give the visitors time to freshen up before the Dean arrives.
- To move the meeting with the management of the VEE on Monday evening before dinner to allow an earlier start of the visit on Tuesday.
- More definite direction on attire for 'formal dinners' and opening and exit meetings.
- Zoom meetings with Alumni worked very well.
- Only 1 student came to the confidential session. I feel it can be very off putting/intimidating to go as a student to the EAEVE team for confidential complaints. Also, they may have the fear that their peers/teachers may see them. I feel it would be a good idea to have an anonymous online forum / google document that can be sent to the student body so students can write in complaints/worries to the EAVE team anonymously without fear. A written forum OR online forum (over zoom?) I think would increase the chances of feedback from 'normal/average' students and not just ones who may be more politically active.
- Coordinate better with the start and end times so as to avoid arriving 1 day early or leaving the next day as happened in this case, add to travel expenses
- The visitor team could arrive on Sunday. This should add to the visitation half a day (Monday morning) and would give some oxygen to a very dense week.

- Pay attention to inform all experts of changes in time.
- Personal interviews should be undertaken earlier in the visitation to give time to allow cross checking of facts should it be necessary.
- We felt that sometimes the internet connection in the hotel as well as in the Establishment was difficult. It is frustrating and makes us lose time. Although an IT person was on site (Establishment) to help us to get connected, some of us had firewalls installed on their computers, which made it impossible to connect to the local Wi-Fi. I think it would be great if EAEVE could provide some G4 dongles for ad hoc access in case of connection problems

Comments/Suggestions related to improvement of the SOP/Visitation Report:

- I would suggest to shorten the report again and remove the findings who are repetition of SER and that the comments section argue the decision.
- Should veterinary programs be approved by extrapolation - e.g., the VPHE English program had no final year students. This should be thought through carefully.
- In my opinion, Area 7 should be more detailed and specific. Having a harassment situation and not having a solution must be a deficiency. Secondly, SOP should also mention that VEEs must make sure to have an efficient way of announcement for Student opportunities (like Erasmus, IVSA Exchange Programs, association events...etc.).
- Although the SOP are explicit regarding the fact that the period of visitation must be a "full activity", it should be noted something in the SOP to allow the visitors to see how the teachings are carried out on site with students around (especially in the VTH).
- Most of the 19 EAEVE indicators are numbers divided by the number of students graduating annually, while in the STD 5.1 (in the SOPs 2019 and 2023), it is noted "number of students enrolled". When there is a big difference between these two numbers of students, the indicators do not reflect STD 5.1.
- Sometimes I would have liked more direction provided by the chairperson after having reached agreement with the coordinator.
- The situation of having a feeder university that provided 30% of the students after the Bachelor phase to the visited VEE and the uncertainty how to address that situation resulted in some ad-hoc adaptations and decisions and a more complex report to write. This could / should have in part been dealt with much earlier. (x 4, shortened)
- I feel more guidance on writing the report is important to ensure consistency in the product. Our report seems very long, repeating the SER in many cases and I think the coordinators can help here as I feel different ones give different advice as to what should be included or repeated from the SER. Everyone writes differently and so reports from one site team to another seem very different as does their content.

- Hoping to be informed about the decision by ECOVE regarding VEE's status, as mentioned in the earlier discussions in GA.
- I think it would be nice if the visitors could receive a summarised report on their evaluation. Once the ECOVE has finalised the visitation with its decision, it would be fine if the final report would be sent to the visitors. I understand that the document is on line in the webpage, but as the final results is published some months later, I think it would be nice to have the report be sent by the office
- Include after restitution of the conclusion of the visitation team a short time for being able to explain a bit more in depth the putative deficiencies.
- Specific CPD for quality assurance evaluation by experts is needed.
- As always, the evaluation report can be improved by having a look at each of the many standards. Some are addressed in two or more areas, and it is not intuitive that Area 3 has focus on the more qualitative aspects whereas Area 4 has a more quantitative focus. As an example, the number and diversity of animals. Standard 7.2 is essentially a summary of findings in other standards – I suggest eliminating this standard.
- Providing a clear definition of intra- and extra-mural and that staff cannot be double counted if they do a larger amount of teaching than any national rules suggest is expected.
- The team found a potential major deficiency regarding Standard 3.1.3. (which the team linked to a potential partial compliance with standard 4.1. We had long discussions about how to interpret the SOP standard regarding equine VTH facilities, and if a VEE must have fully functional VTH for both dogs/cats/exotics and equines, respectively, or equine may be handled more like production animals, where e.g., diagnostics and treatments including surgeries are primarily performed and taught by faculty members in field practice. I and the Team think that the SOP is unclear on this point and therefore suggests that EAEVE revise standard 4.4 so it becomes more clear what facilities is necessary for dogs/cats/exotics, for equine and for production animals, respectively
- Hoping to be informed about the decision by ECOVE regarding VEE's status, as mentioned in the earlier discussions in GA.
- We have actually not seen the final visitation report.
- Most of the substandards contain more than one item which makes it extremely difficult to decide whether compliance, partial compliance or non-compliance is the result and there are overlapping issues between substandards. It is highly recommended that professional persons such as sociologists are asked for the improvement of the substandards.

Comments/Suggestions related to COVID-restrictions:

- I think a maximum of 50% virtual members is possible, others need to be on site. Future visits need to have more guidance for establishment to use 'share screen' view when presenting and have adequate Wi-Fi in all places where video call may be necessary.
- A virtual visit is not the best way to assess the standards, and it is good that not more than 3 persons are allowed to work remotely.
- Use of a multidirectional microphone and 1 single PC for the webinars in the team room.
- For other mixed hybrid visitations, the Team Meetings should be done in a conference mode for the members physically present, so that the contact with the on-line members does not have to be done with the individual computers, which causes many interferences.
- For revisit under COVID conditions a combination of one expert/coordinator onsite and one expert/coordinator in teleconference is a good and safe solution. It is important to be sure that the faculty has a solid safety concept and management during the whole visitation.
- 2-3 days visitation with 2 visitors onsite (incl. the coordinator) and one online is not optimal. I suggest that EAEVE postpone Consultative Visitations if not all visitors can attend.
- I believe the best efforts have been made to provide a competent hybrid visitation. As a student, I believe it would have been advantageous to have more informal moments with local students, maybe organised in small groups.

Comments/Suggestions related to requirements to be followed by the Establishments:

- Ensuring a broad representation of stakeholders at the meetings will be beneficial for the evaluation of the VEE. Further, it can be considered that the assignment information of the visitors is also reported to the VEE that they are affiliated with.
- There should be a policy to be considered for extra expenses or problems with flight cancellation to also help the visited establishment. The office was always very quick to answer and very reachable for every issue.
- The alumni/stakeholder lunch on Thursday can give the team valuable information. But the VEEs need to be informed that they must, beforehand, explain to the invitees why they are invited and the purpose of the lunch, and they must invite persons that speak English well.
- In the case of VEEs that want to do a re-visit (RV) very soon after a FV, it might be important to emphasise that the visiting teams only can evaluate what they see in place at the time of the RV, and not plans for the future.
- It was not my case, but maybe it can be useful if the VEE is previously informed that there can be extra-expenses for the evaluators (beside the plane ticket), such as, trips by train (from their residency to the airport), parking fees, COVID tests, etc.

- EAEVE can require the accredited VEE to have a minimum expert number. At the visitation the LO could be selected among them. If not, at least the on-line training can be required.
- Dinners without music are recommended.

A1.2. Comments and suggestions for improvement from visited Establishments

Comments/Suggestions to SOP:

- I would kindly suggest EAEVE to take care of the contract of a travel cancellation insurance, the same exact way that they do contract the health/accident insurance for its experts (advanced contract bought by EAEVE and later reimbursed by the VEE). (shortened)
- The only problem we had was the last-minute change of the student member of the visitation team on 9th March, when the visitation was meant to start on 28th March. We were told that she has been informed that her university has announced a new exam schedule and one of her exams was during the week of the Visitation. Unfortunately, this is not a reason included in the flight cancellation insurance, so we could not cancel her flight.
- Concerning the role of the practitioner in the group: Sometimes the understanding of the local system might be slightly different from the work environment of the practitioners involved and this might affect the evaluation of the current activities of the establishment visited. Each working environment should be better analysed/understood to better collocate the veterinary practice in the existing contest. It's not an easy task but what is conceived by the practitioners according with his/her practice experience might affect the evaluation in a diverse environment. The SER doesn't investigate the context in which the establishment work, at the same time the practitioners are asked on the one side to read the SER and on the other side to evaluate from a practical point the running activities according with the operative work. Might be his aspect could be better designed in the organization of EAEVE's visits. (shortened)
- The final exit presentation should include the possibility of discussion and questions. During the exit presentation there was a general feeling that "something wrong" was happening (RE-visitation)
- It could be considered by EAEVE to prepare some kind of "manual/guidelines" for the VEE and the visiting Team with regard to Wi-Fi connection at the VEE.
- The Post-Visitation Questionnaire should better be sent to each VEE after the Draft D of the visitation has been discussed by the ECOVE. By waiting until after the ECOVE has reached its decision, the VEE would feel more at ease in case a critique would need to be formulated towards members of the Visiting Team who attend the ECOVE session, thereby fearing to influence the final verdict.

Comments/Suggestions related to Visitation Program/Timetable:

- One of the members of the committee was not able to comply with the SOP, but compared with own VEE and spent a lot of time during the meetings to instruct us according to own experiences and not based on the standards.
- There was a lot of discussion during the preparation of the visitation about the way to visit a remote part of the VEE. The coordinator was very open and correctly mentioned that they had no clear idea how they should proceed. Finally, the hesitations about the way to visit this part of the VEE resulted in many changes of the travel plans and an extra-cost of more than 1000€ for the VEE. (shortened)
- The visit was quick, with little time to make many visits, trips and meetings. It could be thought of how to schedule the Timetable for the visitation in a less stressful way. Too many things to see in a short period of time. Simultaneous meetings are suggested, for example, so that the evaluation team is divided by the standards.
- One weak point in the scheme of the organisation of the visit is apparently related to the interaction with both stakeholders and alumni. This space should be better designed to capture the right elements by the interaction with both, otherwise I wonder if it could be skipped. I didn't perceive the value of such short and not finalised meetings.
- The current visitation schedule (3 full days) is hard work for both the visitation team and the VEE. Some consideration could be given to whether parts of the visitation could be substituted by other means (videos or live streaming). Also, allow more time for the Visitors to interact with the laboratories, the teaching staff and students. Also, the Visitor should have an agenda of topics to be discussed and thus avoid fixation on one or two topics only.

A1.3. Feedback on on-line PVQ

- The text box for typing the strengths and weaknesses is very short and does not allow a view of the whole text. Could this box be increased to allow a complete display of the written text?
- For the sake of the quality assurance of these post visitation questionnaires, they should be anonymous.
- Give bigger boxes to write comments in during this questionnaire.
- Ideally, an additional line on the quality and adequacy of the written contribution of each expert to the Visitation Report could be added but only completed by the Chairperson and Coordinator (since the others don't read it). But I don't know if this is possible.
- Overall prefer the online. Minor point - Not all the options for the Likert scale displayed on my webpage until I reduced it to 80% (I couldn't see the RH option)

without scrolling at the bottom of the page and then I reduced the page size to save scrolling), not sure if the display setting is fixable in SurveyMonkey?

- Useful to know how long it would take and having the names of the panel already on the survey. I have cut and pasted them from the report. 8 of us will all do that rather than one administrator.
- Better than the previous one, it is faster and more sustainable
- It works very well and visibility of the scales is perfect.
- I still preferred the original feedback form! Also, we should have a signature
- indicate already the name of the visitors to save time
- quite long.
- Much better, with possibility to comment at every stage
- very comfortable, much better than the word format
- Page 1 should be amended so the full array of possibilities is shown - as it is now the possibilities 4 and n/a are "hidden" to the right. Only the first page, the others are fine (x4).
- Missing the N/A in the rest of the questionnaire
- Easy to answer as individual, complex if to be answered by the VEE. The feedback is though very important to develop the visitation procedure.
- Quick and easy (x 7)
- Keeping the timetable should be added to the feedback form.

Annex 2: List of Major Deficiencies (i.e. non-compliance with a standard) identified by ECOVE for the period 2020–2023

SOP 2016

- Non-compliance with Substandard 3.5 because of insufficient clinical training in food producing animals and insufficient integrated approach of herd health management, 'From Farm to Fork' and 'One Health' concept.
- Non-compliance with Substandards 4.6, 4.7 and 4.15 because of inadequate definition and implementation of biosecurity rules. (*SOP 2023 Standard 4.1, 4.3, 4.8*)
- Non-compliance with Substandard 4.6 because of overall insufficient application of the relevant legislation on health, safety, biosecurity and EU animal welfare and care standards.
- Non-compliance with Substandard 4.7 because of insufficient promotion of welfare and management practices in livestock facilities. (*SOP 2023 Standard 4.3*)
- Non-compliance with Substandard 4.7 because of inadequate facilities, equipment and biosecurity and safety measures in the building (n°10) currently used by the Department and Clinic of Animal Reproduction.
- Non-compliance with Sub-standard 4.12 and 4.13 because of inadequate teaching and display of biosecurity rules for students, staff and visitors and because of inappropriate isolation facilities for large animals.
- Non-compliance with Substandard 4.13 because isolation facilities for equine are not fully operational.
- Non-compliance with Substandard 5.2 because the students' clinical educational experience and hands-on training in equine is not sufficient.
- Non-compliance with Substandard 5.2 because of insufficient hands-on training of students in farm animal clinics under the supervision of academic staff.
- Non-compliance with Substandard 9.2 because the number of qualified teaching and support staff is insufficient in Clinical Sciences, especially in equines, to secure a group small enough to guarantee appropriate training of students.
- Non-compliance with Substandard 9.3 because postgraduate students used for training undergraduates do not receive proper training in teaching and assessment methods and they receive nil or small payment for delivering clinical (and other) teaching activities (enumerated under major deficiencies).

SOP 2019

- Non-compliance with Substandard 1.3 because of the need to implement a strategic plan on the VEE level in addition to the existing plans for the two departments.
- Non-compliance with Standard 1.3 because of the 4-year delay in the elaboration, discussion with internal and external stakeholders, and adoption by the Faculty Council of the new strategic plan and operating plan.
- Non-compliance with Substandard 3.1.2 for Clinical Sciences in companion animals because of insufficient number of hours of hands-on clinical training on real patients

under the supervision of academic staff in order to achieve Day One Competences for each individual student.

- Non-compliance with Substandard 3.1.3 because the curriculum does not allow sufficient acquisition of Day One Competences in Clinical Sciences in companion animals (including equine and exotic pets).
- Non-compliance with Standard 3.1.3 because of an inadequate exposure of students to a variety of equine clinical cases (including surgery).
- Non-compliance with Standard 3.1.3 because the current design of the curriculum is insufficient in allowing the students to equally acquire Day One Competences.
- Non-compliance with Standard 3.1.3. because of insufficient clinical training in the equine species, which may affect the acquisition of some Day One Competences by all students.
- Non-compliance with Standard 3.1.3. because of insufficient hands-on clinical training for all students in companion animals, including equine and exotic pets.
- Non-compliance with Substandard 3.1.4. because students do not consistently participate in herd health visits to carry out herd health investigations culminating in an integrated farm report.
- Non-compliance with Substandard 3.1.4 because the curriculum does not allow sufficient acquisition of Day One Competencies in Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management).
- Non-compliance with Standard 3.1.4 because the majority of students do not receive enough mandatory exposure on herd health management to allow acquisition of Day One Competences.
- Non-compliance with Standard 3.1.4 because of insufficient clinical training in individual medicine of Food Producing animals under supervision of academic staff, which may affect the acquisition by all students of Day One Competences in these species.
- Non-compliance with Standard 3.7 because of the absence of a robust system to monitor and assess the EPT activities.
- Non-compliance with Substandard 4.1 because of inadequate biosecurity and biosafety.
- Non-compliance with Substandard 4.1 because the facilities do not comply with all relevant legislation including health, safety, biosecurity, and animal welfare and care standards.
- Non-compliance with Standard 4.1 because of inadequate biosecurity procedures (facilities and equipment) for necropsies of large animals (>100 Kg).
- Non-compliance with Standard 4.1 because an inadequate intensive care/hospitalisation for equine cases.
- Non-compliance with Standard 4.1 because of inadequate compliance of the VEE with the EU legislation on the safe handling of chemicals.
- Non-compliance with Substandard 4.2 because of the surgery units of the small animals VTH being non-operational due to construction problems.
- Non-compliance with Standard 4.2 because of inadequate maintenance of some teaching laboratories and clinical facilities.

- Non-compliance with Substandard 4.3. because the ruminant core clinical facility is not of a high standard and does not promote the best husbandry, management, welfare and biosecurity practices.
- Non-compliance with Standard 4.3 because biosecurity and biosafety measures are not systematically implemented in the VTH, necropsy room, teaching farm and equine reproduction unit.
- Non-compliance with Standard 4.3 because of insufficient capacity of the livestock facilities, animal housing, core clinical teaching facilities and equipment to enhance learning.
- Non-compliance with Substandard 4.4 because of the absence of a 24/7 service for equine species at the VTH, an inadequate on-call service for ruminants and the absence of state-of-the-art standards in the ruminant and equine teaching clinics.
- Non-compliance with Substandard 4.4 because night duties in emergency services are not compulsory for undergraduate students.
- Non-compliance with Substandard 4.4 because of absence of emergency services for ruminants in the VTH, which is not compensated by an alternative on-call service.
- Non-compliance with Standard 4.4. because of absence of well-equipped surgical facilities for horses, which does not allow state-of-art teaching for this animal species.
- Non-compliance with Standard 4.4 because of insufficient exposure of the students to 24/7 emergency services.
- Non-compliance with Standard 4.4 because of the absence of 24/7 emergency services.
- Non-compliance with Substandard 4.5 because the students do not have access to all required diagnostic and therapeutic facilities (i.e., anaesthesia, intensive/critical care, ophthalmology, etc).
- Non-compliance with Substandard 4.6 because of inadequacy of isolation facilities for equine and ruminant species.
- Non-compliance with Substandard 4.6 because the isolation facilities did not meet the standards.
- Non-compliance with Substandard 4.6 because the isolation facilities do not meet the need for containment of animals with communicable diseases.
- Non-compliance with Standard 4.6 because of absence of isolation facilities for food producing animals and absence of evidence that the isolation unit for equine is present at the relevant campus.
- Non-compliance with Standard 4.6 because of inadequate isolation facilities for companion and farm animal species.
- Non-compliance with Standard 4.6 as although isolation facilities were provided, they were not maintained and operated to provide for animal care and for prevention of spread of infectious agents to modern standards.
- Non-compliance with Substandard 4.9 because biosafety manuals are often not present both in laboratories and clinical facilities, and there is insufficient information on biosafety requirements.
- Non-compliance with Substandard 5.1 because the number and variety of healthy and diseased animals, cadavers, and material of animal origin is not adequate for providing the practical and safe hands-on training to students.

- Non-compliance with Standard 5.1 because the number of bovine cadavers in pathology as well as the clinical caseload of bovines are insufficient to guarantee training for every student, with no clear procedure in place for correcting this deficiency.
- Non-compliance with Substandard 5.1 because the number and variety of healthy and diseased animals, cadavers, and material of animal origin is not adequate for providing the practical and safe hands-on training to students.
- Non-compliance with Standard 5.1 because of an insufficient number and variety of healthy and diseased animals and cadavers.
- Non-compliance with Standard 5.1 because of insufficient caseload of companion animal patients in the VTH and insufficient number of necropsies in companion and food producing animals.
- Non-compliance with Standard 5.1. because of insufficient number of companion animal patients (including equine and exotic pets) and insufficient number of food-producing animal necropsies in relation to the number of students enrolled.
- Non-compliance with Standard 5.3 due to insufficient active participation by students in the clinical workup of patients in a number of situations, not allowing the acquisition of Day One Competences.
- Non-compliance with Substandard 5.4 because there is no functional case records system to allow effective retrieval of comprehensive medical records to efficiently support the teaching, research and service programmes of the VEE.
- Non-compliance with Standard 8.5 because of insufficient direct assessment of clinical skills in the overall process of assessment, and insufficient quality control of logbooks to ensure all clinical procedures, practical and hands-on training have been fully completed by each individual student.
- Non-compliance with Standard 9.1. because of non-compulsory formal training to teach and assess for staff involved with core teaching.
- ... are non-compliant with Substandard 9.2 because of insufficient numbers of teaching and technical and support staff.
- Non-compliance with Standard 9.2 because of insufficient numbers of permanent technical and support staff dedicated to clinical and practical education.
- Non-compliance with Standard 9.2 because of insufficient number of teaching and support staff in the VTH.

Annex 3: List of Minor Deficiencies (i.e. partial compliance with a substandard) identified by ECOVE for the period 2020–2023

SOP 2016

- Partial compliance with Substandard 1.5 because of suboptimal organisational structure with numerous departments and sub-departments, which may negatively affect the cohesion of the study programme, the interdisciplinary collaborations and the optimal use of facilities and equipment.
- Partial compliance with Substandard 2.1 because of suboptimal public funding, which doesn't sufficiently take into account the higher cost of veterinary training when compared to other professions.
- Partial compliance with Substandard 2.1 because of suboptimal financing.
- Partial compliance with Substandard 3.1 because of the inaccurate data addressed in Table 3.1.2 of the SER regarding the hours of training in all groups of subjects addressed on p.20 of the SOP 2016 and listed in the Annex V.4.1 of the Directive 36/2005/EC in order to demonstrate compliance with the EU Directive.
- Partial compliance with Substandard 3.5 because of suboptimal balance between mandatory and elective subjects in diagnostic imaging, equine clinical sciences and food hygiene and sub-optimal compensation for the insufficient clinical training in pigs.
- Partial compliance with Substandard 3.5 because of suboptimal training in some subjects, i.e. anaesthesiology and analytical chemistry in food technology.
- Partial compliance with Substandard 4.3. because of sub-optimal size of some buildings, in view of the expected increase in caseload and junior staff.
- Partial compliance with Substandard 4.6. because of sub-optimal storage and recording of pharmaceutical products and sub-optimal first-aid boxes.
- Partial compliance with Substandard 4.6 because of sub-optimal handling of pharmaceutical products and because of suboptimal safety measures in a few rooms.
- Partial compliance with Substandard 4.7. because of sub-optimal recording of the use of teaching animals.
- Partial compliance with Substandard 4.7 because of sub-optimal recording of the use of teaching animals.
- Partial compliance with Substandard 4.13 because of suboptimal isolation facilities for companion animals.
- Partial compliance with Substandard 5.1 because the number of pigs and diseased equine is low.
- Partial compliance with Substandard 5.1 because of suboptimal number of necropsies in food-producing animals and absence of healthy pigs in the teaching farm for pre-clinical training.
- Partial compliance with Substandard 5.1 because of insufficient number and variety of cadavers for hands-on training in Pathology and of equines in Propaedeutics.
- Partial compliance with Substandard 5.3 because EU Regulations about GMP/GHP and HACCP rules (EU Reg 852/2004 and 853/2004) are not fully observed in the

external slaughterhouse, so that it provides a suboptimal environment for students' visits.

- Partial compliance with Sub-standard 5.6 was found because the medical records of equine and ruminants seen extramurally are not effectively retrievable.
- Partial compliance with Substandard 5.6 because of no formal clinical recording in food animal patients.
- Partial compliance with Substandard 7.3. because the SER and Visitation Report of the previous ESEVT Visitation are not easily available on the VEE website.
- Partial compliance with Substandards 8.5, 8.6 and 8.9 because of suboptimal assessment of learning outcomes.
- Partial compliance with Substandard 8.8. because of no coordinated overall assessment strategy.
- Partial compliance with Substandard 8.9 because of the lack of a record of the individual skills acquired by the student within a logbook in farm animal clinics.
- Partial compliance with Substandard 10.4 because of very few formal postgraduate training programmes.
- Partial compliance with Substandard 11.8 because of the suboptimal SER, which contains a number of inconsistencies and inaccuracies, and requires a substantial revision, since this document will be publicly available.

SOP 2019

- Partial compliance with Substandard 1.2. because of sub-optimal collaboration between the departments in order to ensure the consistency of the core curriculum.
- Partial compliance with Standard 1.2 because of suboptimal monitoring of the implementation of the previous strategic plan.
- Partial compliance with Substandard 1.3 because the SWOT analysis within the strategic plan should cover both current activities as well as an "operating plan" document with a defined timeframe for each activity, and targets for each indicator, including a general description of key players, roles and responsibilities.
- Partial compliance with Standard 1.3 because the operating plan, including timeframe and implementation indicators, has suboptimal reference to the SWOT analysis.
- Partial compliance with Standard 1.3 because of suboptimal implementation of an overall publicly available Strategic Plan with a timeframe and indicators.
- The four programmes are partially compliant with Standard 1.4. because of suboptimal closing of the QA loop in some areas, e.g. monitoring of assessment strategy.
- Partial compliance with Standard 1.5 because of suboptimal SER (confusing titles and numbering of standards, especially in areas 1.3.4).
- Partial compliance with Standard 1.6 because of limited monitoring of the activities of the Strategic Plan.

- Partial compliance with Substandard 2.1 because of insufficient evidence of available funding to carry out essential maintenance work in the companion animal surgery complex within the VTH.
- Partial compliance with Substandard 2.1 because of the need to reallocate the budget within SUND to deliver sustainable funding for the VEE.
- Partial compliance with Substandard 2.1 because of sub-optimal financing of activities of the VEE.
- Partial compliance with Standard 2.1 because of suboptimal provision of funding to sustain the requirements for the VEE to achieve its objectives.
- Partial compliance with Standard 2.1. because of suboptimal distribution of funding resulting in inadequate staffing.
- Partial compliance with Substandard 3.1 because of sub-optimal training of soft skills.
- Partial compliance with Standard 3.1 because of inaccurate data addressed in Table 3.1.1 and 3.1.2 of the SER and Appendix 2, regarding the total number of hours in the curriculum and the partial number of hours of training in all groups of subjects:
 - the core subjects as addressed in p32 of the SOP 2019 as amended in September 2021 and listed in the Annex 5.4.1 of the Directive 36/2005/EC,
 - the electives,
 - and the Dissertation (Final degree) thesis.
- Partial compliance with Standard 3.1 because the current design of the curriculum is suboptimal in the provision of equal training to all students.
- Partial compliance with Standard 3.1.1. because of suboptimal distinction between core, elective and optional activities in the curriculum.
- Partial compliance with Substandard 3.1.2 because of sub-optimal practical training in anatomy.
- Partial compliance with Substandard 3.1.2 because of suboptimal practical training in physiology and pharmacology.
- Partial compliance with Standard 3.1.2. because of suboptimal teaching of some essential basic subjects.
- Partial compliance with Substandard 3.1.3 because of the low number of teaching hours in exotic animal medicine (physiology, handling, medicine and clinical skills) within the veterinary curriculum.
- Partial compliance with Substandard 3.1.3 because of the limited access for students in the core companion animal rotation to more advanced medical and surgical cases.
- Partial compliance with Substandard 3.1.3 because of the number of horses seen is suboptimal to ensure clinical competency of all students in this area.

- Partial compliance with Standard 3.1.3 because of suboptimal clinical training in exotic pets.
- Partial compliance with Standard 3.1.3. because of suboptimal hands-on training in Companion Animal surgery..
- Partial compliance with Standard 3.1.3. because of suboptimal clinical training in the equine species provided to all undergraduate students
- The VEE is partially compliant with Standard 3.1.3. because of suboptimal clinical training in companion animals.
- The FVHE-CSP and FVHE-ESP are partially compliant with Standard 3.1.3. because of suboptimal training in clinical pathology and exotic animals for FVHE students.
- Partial compliance with Substandard 3.1.4 because of suboptimal clinical training in food producing animals and integration of herd health management teaching.
- Partial compliance with Substandard 3.1.4 because of suboptimal practical training in pigs.
- Partial compliance with Standard 3.1.4 because there is suboptimal focus on medical and surgical teaching regarding ruminants within the curriculum.
- Partial compliance with Substandard 3.1.4 because of suboptimal time spent in farm animal clinical training to achieve day one competencies for each individual student.
- Partial compliance with Standard 3.1.4. because of suboptimal clinical training in ruminants.
- Partial compliance with Standard 3.1.5. because of suboptimal FSQ practical training in poultry.
- Partial compliance with Standard 3.1.5. because of suboptimal FSQ practical training in pigs and poultry for all students.
- Partial compliance with Substandard 3.1.6 because suboptimal acquisition of understanding and use of principles of clinical governance, and practice evidence-based veterinary medicine.
- Partial compliance with Standard 3.1.6 because of suboptimal training in professional communication.
- Partial compliance with Substandard 3.3., because of suboptimal description of learning outcomes of some of the individual units of study.
- The VEE is partially compliant with Substandard 3.4 because of the suboptimal function of the study programme committee with regard to the detection of overlapping and redundant areas of the curriculum and the fostering of horizontal and vertical integration between several curriculum subjects.
- Partial compliance with Standard 3.4. because of suboptimal alignment of some teaching activities, e.g. anatomy, diagnostic imaging and surgery.

- Partial compliance with Standard 3.5 because of an absence of academic supervision of practical training in FSQ and VPH.
- Partial compliance with Substandard 3.6 and 3.7 because of suboptimal EPT organisation
- Partial compliance with Standard 3.6 because of the absence of a standardised evaluation of the performance of the student during their EPT.
- Partial compliance with Standard 3.6 because of suboptimal evaluation of the performance of the student by the EPT provider.
- Partial compliance with Standard 3.6. because of suboptimal evaluation of students during EPT.
- Partial compliance with Substandard 3.6 and 3.7 because of suboptimal EPT organisation
- Partial compliance with Standard 3.7 because of the absence of QA to monitor the feedback within the EPT activities.
- Partial compliance with Standard 3.7., due to suboptimal recording and quality control of EPT.
- Partial compliance with Substandard 4.1 because of sub-optimal compliance of some of the physical facilities with relevant legislation concerning biosecurity and EU animal welfare and care standards.
- Partial compliance with Substandard 4.1 because of no formal recording of the use of teaching animals.
- Partial compliance with Standard 4.1 because the servicing of occasional items of equipment has lapsed (including fire extinguishers, oxygen cylinders, water cleansing systems). Some disposable clinical items (e.g., hand hygiene equipment, hypodermic needles, some pharmaceuticals) are out of date.
- Partial compliance with Standard 4.1 because of suboptimal waste management.
- The VEE is partially compliant with Standard 4.2. because of insufficient number of lockers for students and suboptimal onsite food services.
- Partial compliance with Substandard 4.3 because of suboptimal application of biosecurity measures in some facilities, e.g. inappropriate system for cleaning the boots in necropsy rooms and in farms.
- Partial compliance with Substandard 4.3 because of suboptimal standards of radiation safety measures regarding holding animals in radiology.
- Partial compliance with Substandard 4.3 because the standards and the capacity of livestock facilities are suboptimal.
- Partial compliance with Substandard 4.3 because the core clinical teaching facilities do not offer sufficient education support for best husbandry, management, biosafety and biosecurity, and animal welfare practices.

- Partial compliance with Standard 4.3 due to suboptimal biosecurity in ambulatory clinic vehicles, concession veterinary practice and protective clothing used on farms.
- Partial compliance with Substandard 4.3 because of suboptimal compliance with the biosecurity manual and procedures in some areas, especially during the necropsy activities.
- The VEE is partially compliant with Standard 4.3. because of suboptimal organisation of the hospitalisation spaces for companion animals.
- Partial compliance with Standard 4.3. because of suboptimal separation in the equine stables between teaching animals and patients.
- The ... programmes are partially compliant with Standard 4.3. because of suboptimal biosecurity procedures in the necropsy room.
- Partial compliance with Substandard 4.4 because the new surgery units for small animals at the VTH are not operational. This issue is also addressed at Substandard 4.2.
- Partial compliance with Substandard 4.4 because the high level of expertise that is provided in the equine and farm animal services at a 24/7 standard is not always provided at the same level of expertise in the small animal hospital.
- Partial compliance with Substandard 4.4 because the out-of-hour service of the companion animal hospital is not always functioning at the 'standard of care' level that would be expected from a modern university teaching hospital and senior clinicians are only available for advice on the phone and clients are occasionally redirected to a private animal clinic.
- Partial compliance with Substandard 4.4. because research-based and evidence-based clinical training is sub-optimal.
- Partial compliance with Standard 4.4 because of suboptimal collaboration between internal medicine and surgery departments in CA.
- The VEE is partially compliant with Standard 4.5 because of suboptimal X-ray facilities and equipment for the equine species.
- The ... programmes are partially compliant with Standard 4.5. because of suboptimal Good Pharmacy Practices in some clinics.
- Partial compliance with Substandard 4.6 because the hospitalization in the isolation facilities is not performed according to adequate, standardized protocols.
- Partial compliance with Substandard 4.7 because herd health management is not delivered under academic supervision at the farm level.
- Partial compliance with Substandard 4.7 because not all, but only volunteer students, can practise field veterinary medicine and Herd Health Management under academic supervision within the ambulatory clinic.
- Partial compliance with Standard 4.7 because of suboptimal ambulatory clinic for ruminants.

- Partial compliance with Substandard 4.8 because of non-optimal biosecurity procedures in transportation of students to/from food-producing animal facilities.
- Partial compliance with Standard 4.8 because of the need to replace the damaged safety devices in the student transport and because of suboptimal respect of biosafety rules in the pickup truck serving as a mobile clinic.
- The VEE is partially compliant with Standard 4.8. because of suboptimal transportation of students to extra-mural facilities.
- Partial compliance with Sub-standard 4.9 because of sub-optimal posting of biosecurity signs in some areas where students are trained.
- Partial compliance with Substandard 4.9 because of suboptimal use of personal protective equipment for necropsy and some farm work.
- Partial compliance with Substandard 4.9 because operational policies and procedures are not fully posted for students, staff and visitors.
- Partial compliance with substandard 4.9 because of sub-optimal delivery of biosafety and biosecurity in all departments.
- The VEE is partially compliant with Standard 4.9.4. (as mentioned under Standard 3.1.2.3) because of suboptimal implementation of biosecurity procedures for necropsy of mammalian origin in a room other than the major necropsy room.
- Partial compliance with Standard 4.9 because of suboptimal Good Pharmacy Practice
- Partial compliance with Standard 4.9. because of suboptimal pharmacy practices observed in some units.
- Partial compliance of the VEE at Ghent with Standard 4.9 because of sub-optimal posting of biosecurity signs, and other procedures not being adhered to, in a number of areas where students are trained.
- Partial compliance with Substandard 4.9 because of suboptimal implementation of biosecurity measures in training in basic sciences.
- Partial compliance with Standard 4.9. because of suboptimal posting of biosecurity rules in clinical and laboratory facilities.
- The ... programmes are partially compliant with Standard 4.9 because of suboptimal posting of biosecurity rules in the English language in some areas.
- Partial compliance with Substandard 5.1 because there was a sub-optimal number and variety of cadavers for anatomy and necropsy.
- Partial compliance with Substandard 10.4 due to the need to increase the participation of undergraduates in research projects and to increase the awareness of research careers.
- Partial compliance with Substandard 5.1 because of suboptimal number of production animal anatomical parts for practicals.

- Partial compliance with Substandard 5.1 because of the need to both increase the number/distribution of small animal surgical cases as well as to provide an increased teaching for exotic animals.
- The VEE is Partially compliant with Substandard 5.1 because
 - the number of the rabbits, rodents, birds and exotic patients is not adequate for the number of the students involved,
 - The number of poultry provided to the students is not sufficient for an adequate hands-on exposure to poultry.
- The VEE is partially compliant with Standard 5.1 because of a non-systematic recording of the use of teaching animals during practical training.
- Partial compliance with Substandard 5.1 because the number of rabbits, rodents, birds and exotic patients is not adequate for the number of students involved and the number of companion animal (including equine and exotics) necropsies provided to the students is suboptimal.
- Partial compliance with Standard 5.1 because of suboptimal diversity of cadavers for anatomical dissections and suboptimal caseload in necropsy.
- Partial compliance with Standard 5.1. because of suboptimal caseload in equine and ruminant surgery.
- Partial compliance with Substandard 5.1., because of suboptimal number and variety of some of the materials of animal origin, especially the number of necropsies in food producing animals.
- Partial compliance with Standard 5.1. because of suboptimal compensation for the absence of whole-body dissection in large animals and suboptimal number of necropsies in ruminants and pigs.
- Partial compliance with Standard 5.1. because of suboptimal number of bovine and equine necropsies.
- Partial compliance with Standard 5.1 because the number of companion animal patients seen intramurally (#8) is suboptimal in relation to the number of students enrolled.
- Partial compliance with Standard 5.1 because the number of ruminant and pig necropsies (#18) is suboptimal in relation to the number of students enrolled.
- Partial compliance with Standard 5.1. because of suboptimal number of necropsies for companion animals (excluding equine).
- Partial compliance with Substandard 5.3 because not under all circumstances students are active participants in the clinical workup of patients.
- Partial compliance with Substandard 5.4 because of non-optimal case recording.
- Partial compliance with Substandard 5.4 because of suboptimal patient recording system.

- Partial compliance with Standard 5.4 due to a suboptimal retrieval system of VTH clinical records to efficiently support the teaching, research, and service programmes of the VEE.).
- Partial compliance with Standard 5.4. because of suboptimal implementation of the electronic patient recording system.
- Partial compliance with Standard 5.4 because of suboptimal access for students to some clinical data (necropsy files and diagnostic imaging files).
- Partial compliance with Standard 5.4. because medical records for extramural patients are not systematically maintained in an effective retrieval system.
- The ... programmes are partially compliant with Standard 5.4. because medical records for necropsy cases are not maintained in an effective retrieval system.
- Partial compliance with Substandard 6.2 because of the need to provide a more focused IT support for the two veterinary departments.
- Partial compliance with Substandard 6.3 because of suboptimal skill lab.
- Partial compliance with Standard 6.3 because of an inadequate clinical skills lab to practise procedures prior to performing on live animals.
- The VEE is partially compliant with Standard 6.3. because of suboptimal access of students to equipment for the development of procedural skills.
- Partial compliance with Substandard 7.2 because the number of students admitted is sub-optimally consistent with the resources available at the VEE for staff, buildings, equipment, healthy and diseased animals, and materials of animal origin.
- Partial compliance with Standard 7.2 because the resources allocated are suboptimal relative to the number of students.
- Partial compliance with Substandard 7.5 because of sub-optimal mechanisms in place to reduce the abnormally long duration of the study programme for many students.
- Partial compliance with Standard 7.5. because of suboptimal monitoring of student's progression.
- Partial compliance with Standard 7.7 because of a suboptimal effective mechanism for resolution of student grievances.
- Partial compliance with Substandard 7.8 and Substandard 9.5 due to a need for an increase in the students' analysis of both teaching and teaching staff.
- The VEE is partially compliant with Standard 8.1. because of suboptimal strategy to ensure coherence of the overall assessment regime.
- Partial compliance with Substandard 8.5 because the logbook does not sufficiently cover both the academic oversight of this practice as well as an indication where the different skills should be learned or acquired.

- Partial compliance with Substandard 8.5 was found because of sub-optimal use of a logbook system for recording of clinical skills.
- Partial compliance with Substandard 8.5 due to the need, from a quality control point of view, to fully record the clinical skills of students.
- Partial compliance with Substandard 8.5 because of a sub-optimal implementation of Day One Competencies in the assessment of clinical skills.
- Partial compliance with Standard 8.5 because the competence in performing a number of practical skills is not objectively assessed. Furthermore, the quality control of clinical skills (via logbooks) is suboptimal.
- Partial compliance with Standard 8.5 because of suboptimal assessment of the acquisition of some Day One Competences.
- Partial compliance with Standard 8.5 because of suboptimal formal assessment of the acquisition by all students of D1C.
- Partial compliance with Standard 8.5 because of (at the current time) a sub-optimal use of a logbook system for the recording of clinical skills.
- Partial compliance with Standard 8.5., because of suboptimal formal monitoring of individual performance and quality control of the logbooks.
- Partial compliance with Substandard 9.1 because of sub-optimal training to teach and to assess for the temporary staff involved with teaching.
- The VEE is partially compliant with Standard 9.1 because of suboptimal formal assessment of the expertise in their discipline of the new teachers and of the proficiency in English for the teachers involved with the international curriculum.
- Partial compliance with Standard 9.1 because of suboptimal formal teaching training for staff involved with teaching.
- The VEE is partially compliant with Standard 9.1. because of non-compulsory training in teaching and assessment for all teaching staff.
- The ... programmes are partially compliant with Standard 9.1 because of suboptimal training of junior staff in teaching techniques.
- Partial compliance with Standard 9.1. because of suboptimal training to teach and to assess for teaching staff involved with extramural clinical training.
- Partial compliance with Substandard 9.2 because of suboptimal academic staffing in food producing animals teaching and support staffing in nursing care.
- Partial compliance with Standard 9.2. because of suboptimal number of specialists in clinical sciences.
- The four programmes are partially compliant with Standard 9.2 because of suboptimal ratio of students to teaching staff in general and in the necropsy room and some clinical rotations in particular.

- Partial compliance with Substandard 9.3 because the balance of the workload of teaching, research and service and the rewarding system for teaching excellence are suboptimal.
- The VEE is partially compliant with Standard 9.3 because of an overload of teaching duties for most academic staff, which may reduce their available time for research and other scholarly activities.
- Partial compliance with Standard 9.3 because of the suboptimal use of opportunities by academic staff to develop and extend their teaching, research and assessment knowledge.
- Partial compliance with Standard 9.3. because of a suboptimal system of rewarding teaching excellence
- The four programmes are partially compliant with Standard 9.3 because of an imbalanced workload of teaching, research and services for many teachers.
- Partial compliance with Substandard 9.2 because of suboptimal number of specialised clinicians, e.g. in diagnostic imaging and equine surgery
- Partial compliance with Substandard 9.4 because the program for professional growth and development of academic and support staff is sub-optimal.
- Partial compliance with Substandard 9.4., because of suboptimal comprehensiveness and publicising of the programme for professional growth and development of academic staff.
- Partial compliance with Substandard 7.8 and Substandard 9.5 due to a need for an increase in the students' analysis of both teaching and teaching staff.
- Partial compliance with Substandard 10.1., because the spectrum of research activities of staff that integrate with the veterinary degree is suboptimal .
- Partial compliance with Substandard 10.2 and Substandard 10.4 due to the need to increase the participation of undergraduates in research projects and to increase the awareness of research careers.
- Partial compliance with Substandard 10.3 because of suboptimal numbers of students involved in postgraduate programmes.
- Partial compliance with Substandard 10.3 because of suboptimal numbers of students involved in postgraduate programmes, e.g. PhD and specialisation.
- Partial compliance with Standard 10.3. because of suboptimal number of students completing post-graduate studies.
- The ... programmes are partially compliant with Standard 10.3 because of excessive teaching workload for PhD students and suboptimal supervision of their research programmes.

Annex 4: Trends and challenges – selected literature from 2020–2024

Byrnes, M. K. (2022). Professional skills teaching within veterinary education and possible future directions. *Journal of Veterinary Medical Education*, 49(6), 686–692. <https://jvme.utpjournals.press/doi/pdf/10.3138/jvme-2021-0038?role=tab>

Estrada, A. H., Samper, J., Stefanou, C., & Blue, A. (2022). Contemporary challenges for veterinary medical education: Examining the state of inter-professional education in veterinary medicine. *Journal of Veterinary Medical Education*, 49(1), 71–79. https://jvme.utpjournals.press/doi/10.3138/jvme-2020-0066?url_ver=Z39.88-2003&rfr_id=ori%3Arid%3Acrossref.org&rfr_dat=cr_pub++0pubmed

Gates, M. C., McLachlan, I., Butler, S., & Weston, J. F. (2021). Building veterinarians beyond veterinary school: challenges and opportunities for continuing professional development in veterinary medicine. *Journal of Veterinary Medical Education*, 48(4), 383–400. <https://jvme.utpjournals.press/doi/pdf/10.3138/jvme.2019-0148?download=true>

Gordon, S., Gardner, D., Weston, J., Bolwell, C., Benschop, J., & Parkinson, T. (2021). Fostering the development of professionalism in veterinary students: challenges and implications for veterinary professionalism curricula. *Education Sciences*, 11(11), 720. <https://www.mdpi.com/2227-7102/11/11/720/pdf>

Gordon, S., Parkinson, T., Byers, S., Nigito, K., Rodriguez, A., Werners-Butler, C., ... & Guttin, T. (2023). The changing face of veterinary professionalism—implications for veterinary education. *Education Sciences*, 13(2), 182. <https://www.mdpi.com/2227-7102/13/2/182/pdf>

Harden, R. M., Lilley, P., & Yıldız, S. (2024). The curriculum: The heart and soul of a medical school. *Medical Teacher*, 1–5. <https://doi.org/10.1080/0142159X.2024.2416307>

Noyes, J. A., Carbonneau, K. J., & Matthew, S. M. (2022). Comparative effectiveness of training with simulators versus traditional instruction in veterinary education: meta-analysis and systematic review. *Journal of Veterinary Medical Education*, 49(1), 25–38. <https://jvme.utpjournals.press/doi/pdf/10.3138/jvme-2020-0026?role=tab>

Palacios-Díaz, M. D. P., & Mendoza-Grimón, V. (2023). Environment in veterinary education. *Veterinary sciences*, 10(2), 146. <https://www.mdpi.com/2306-7381/10/2/146/pdf>

Patterson, Gilbert, et al. (2022) "Challenges and opportunities in modern swine veterinary education." *Journal of the American Veterinary Medical Association* 260(7) 711–713. https://avmajournals.avma.org/view/journals/javma/260/7/javma.21.10.0443.xml?tab_body=fulltext

Routh, J., Paramasivam, S. J., Cockcroft, P., Nadarajah, V. D., & Jeevaratnam, K. (2021). Veterinary education during COVID-19 and beyond—challenges and mitigating approaches. *Animals*, 11(6), 1818. <https://www.mdpi.com/2076-2615/11/6/1818/pdf>

Sacchini, S., & Castro-Alonso, A. eds. (2024). Veterinary Medical Education: Challenges and Perspectives. Special Issue of *Veterinary Sciences*.
<https://doi.org/10.3390/books978-3-7258-1399-5>

Thornton, Kim Campbell. "10 industry reps identify what's big trending." *Veterinary Practice News*, 2022, Vol. 34, No. 1, 20–21.
<https://www.veterinarypracticenews.com/publications/de/202201/index.html#>

Varner, C., Dixon, L., & Simons, M. C. (2021). The past, present, and future: a discussion of cadaver use in medical and veterinary education. *Frontiers in Veterinary Science*, 8, 720740. <https://www.frontiersin.org/journals/veterinary-science/articles/10.3389/fvets.2021.720740/pdf>

Varnum, A. T., West, A. B., & Hendrickson, D. A. (2020). A competency-guided veterinary curriculum review process. *Journal of Veterinary Medical Education*, 47(2), 137–147. <https://jvme.utpjournals.press/doi/pdf/10.3138/jvme.1217-183r1>

Tracking system

System-wide analysis of ESEVT for the period 2020–2023

	Name:	Date
Prepared by:	CIQA	Between: 10 October - November 9 2024
Reviewed by:	Coordinators' group, EAEVE Office, ECOVE, CIQA, FVE, EBVS, IVSA, EAEVE members and ExCom	Between: 9 December 2024 – 15 January 2025
Approved by:	EAEVE ExCom	4 February 2025