

**European Association  
of Establishments for Veterinary Education**



**RE-VISITATION REPORT**

**To the Faculty of Veterinary Medicine, University of Liège, Liège, Belgium**

**On 8 – 10 March 2022**

**By the Re-visitation Team:**

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## **Introduction**

The Faculty of Veterinary Medicine, University of Liège (called the Veterinary Education Establishment (VEE) in this Report) was evaluated by ESEVT on May 13-17, 2019.

The previous Visitation team considered that there was an insufficient number of cases and staff related to the number of students, combined with an uncertainty that these student numbers will be maintained to ensure compatibility with the caseload and staff existed. The strategy in place to develop and review the assessment methods was insufficient, coexisting with inability to change the methods applied when needed.

These findings led to the identification of two Major Deficiencies:

1. Major Deficiency 1: “Non-compliance with Substandards 5.1 and 9.2: Insufficient number of clinical cases and staff linked to the number of students, and absence of certainty that the number of students will be maintained at a level compatible with the caseload and staff”
2. Major Deficiency 2: “Non-compliance with Substandard 8.5: Insufficiency with the strategy for the development and review of assessment methods, and the inability to change such assessment methods when required”.

Additionally, these areas of concern (minor deficiencies) were identified by the team:

1. “Partial compliance with Substandard 1.5: Insufficient formal involvement with external stakeholders at the faculty-level; need to establish timetable of twice-yearly meetings with the minutes available to staff and students”.
2. “Partial compliance with Substandard 2.4: Need to clarify the allocation of funds raised through clinical income, including a greater distribution of funds to those areas responsible for raising such additional income”.
3. “Partial compliance with Substandard Basic Sciences at the four FMVs delivering the Bachelor course a continuing need to ensure quality education in the Master program by a continuation of the scheme limiting the number of students within the Bachelor programs”.
4. “Partial compliance with Substandard 3.3: Requirement that program learning outcomes must be clearly visible and all units of study should be aligned to these program outcomes. Achievement of the program learning outcomes must be supported by evidence”.
5. “Partial compliance with Substandard 3.4: Complex set of committee structures involved in evaluation, identification of content overlap, and revision of the curriculum should be streamlined (especially in ULiège)”.
6. “Partial compliance with Substandards 3.6 and 3.7: Need to formalise the clinical skills obtained during EPT in comparison to clinical skills obtained during the core intramural training”.

7. “Partial compliance with Substandard 3.10: Need to introduce a mandatory EPT logbook (either paper or online). Fulfilment of the logbook must also be checked after EPT”.
8. “Partial compliance with Substandards 6.2 and 6.3: Need to upgrade the library based at the FMV (the BSV) to provide a greater number of textbooks, longer opening hours and an increase in study places”.
9. “Partial compliance with Substandards 8.6, 8.8 and 8.9: Inadequate level of program learning outcomes covering professional knowledge, skills, competences and attributes, including allowing the school to certify the students’ achievements of the learning objectives”

The decision by ECOVE, who met on December 11, 2019, was Non-Accreditation status.

The Re-visitation Self Evaluation Report (RSER), and the Annexes, describing the progress and including the anti-COVID-19 measures applied to ensure the VEE’s appropriate functioning, were provided to the Re-visitation Team on time and contained relevant information. The RSER was informative, and some pending issues were answered before the on-site Re-visitation.

The Re-visitation was well prepared and well organised by the VEE. It was performed in a cordial working atmosphere, in agreement with the ESEVT 2016 SOP.

## **1. Correction of the Major Deficiencies**

### **1.1. Major Deficiency 1 (“Non-compliance with Substandards 5.1 and 9.2: Insufficient number of clinical cases and staff linked to the number of students and absence of certainty that the number of students will be maintained at a level compatible with the caseload and staff”)**

#### **1.1.1. Findings**

The number of students admitted to the VEE was at the time of the full Visitation (FV) regulated by a decree controlling the access to the veterinary curriculum, implemented in the academic year 2016-2017 and supposed to be in place until 2019-2020. During the gap of being in force of the decree, the decision was made to maintain the number of students of the second year at 276, and the final decision on that number was issued in June 2021. The decree in its current form is not limited in time, however, the decree will undergo an evaluation in 2025-2026.

During the last two years, five new tenure track positions were opened, allowing temporarily employed post-doc staff members to remain at the VEE. Additionally, 12 permanent FTE positions were attributed to various departments, further increasing the staff numbers of the VEE. A projection of the indicators I1, I2 and I3 (staff linked to number of students) from 2020/2021 and onwards shows a steady increase of the indicator values.

The number of cases in companion animals, including exotic species, were almost constantly maintained, despite the COVID-19 pandemic and administrative changes. A proactive strategy is in place to continuously increase the caseloads within small animals, horses, and farm animals. This includes newly established initiatives within all sectors, for example providing free small animal service to people in special needs, offering stable-side services to horses and working with a wildlife rescue centre.

### **1.1.2. Comments**

The new decree of 2021 in force, regulating student numbers guarantees that no major fluctuations will occur in the near future and that the number of students will level out to about 800 master students and 600 bachelor students, so, approximately 1400 undergraduate students altogether.

The VEE is committed to further ensure an appropriate caseload and staff numbers to provide best quality training to their students.

### **1.1.3. Suggestions**

None.

### **1.1.4. Decision**

Major Deficiency 1 (“5.1 and 9.2: Insufficient number of clinical cases and staff linked to the number of students, and absence of certainty that the number of students will be maintained at a level compatible with the caseload and staff”) has been fully corrected.

## **1.2. Major Deficiency 2 (“Non-compliance with Substandard 8.5: Insufficiency with the strategy for the development and review of assessment methods, and the inability to change such assessment methods when required”)**

### **1.2.1. Findings**

There was a substantial improvement in the VEE’s strategy in developing, implementing, reviewing and adjusting assessment methods. Teachers attended seminars on the quality of teaching, as part of their compulsory 40h of formal training in teaching methods. Minimal requirements for written and oral examination have been decided by the Faculty Council. One consequence of this decision is that all teachers now must use a new automatic evaluation system for MCQs, developed by the SMART unit (Methodological system for help to tests realization, Institute of Training and Research in Superior Education). The system involves a complex evaluation based on grading points and also the implicit answers ‘all correct’ or ‘nothing correct’. Open questions are also present with the students’ answers evaluated by using an optimal response scheme.

The transparency is ensured by the introduction of specific questions concerning the student satisfaction degree versus the examination procedure, as well as diversification of the assessment procedures. During oral exams, several teachers are involved in the examination, or witnesses, in case of need.

The EVALENS survey organised after each exam session was supplemented with 6 questions: on exam conditions, the guidelines stated correctly, the important subjects being mentioned during the course, the attitude of the staff involved in the exam, the correctness and fairness of the exam, the importance of feedbacks on self-correction. In case additional questions are considered fit by individual teachers, they must be approved by the Vice Dean for Education.

The strategy for improvement of ‘problem courses’ identified during these surveys was discussed by the Vice Dean for Education individually, with all involved teachers. As a result, clear improvement in the evaluation of these courses was identified at their re-evaluation in January 2020. All courses are now screened after every exam session by the procedure previously developed for the follow-up of EVALENS surveys.

### **1.2.2. Comments**

Feedbacks from the students to the teachers and from the teachers to the students helping self-correction of the students' performance close the loop in the QA process.

### **1.2.3. Suggestions**

The VEE should continue to work on the improvement of communication with students informing them about the system and adjusting their expectations to its outputs. The VEE should further educate their students on how to give constructive feedback based on the principles of academic ethics and deontology.

### **1.2.4. Decision**

Major Deficiency 2 (“Non-compliance with Substandard 8.5: Insufficiency with the strategy for the development and review of assessment methods, and the inability to change such assessment methods when required”) has been fully corrected.

## **2. Correction of the Minor Deficiencies**

### **2.1. Minor Deficiency 1: “Partial compliance with Substandard 1.5: Insufficient formal involvement with external stakeholders at the faculty-level; need to establish timetable of twice-yearly meetings with the minutes available to staff and students”.**

#### **2.1.1. Findings**

Subsequent to the 2019 ESEVT Visitation, the VEE set up an external advisory board (EAB), composed of veterinary practitioners (equine, companion animals, production animals) as well as veterinarians working in public bodies, private companies, research and industry. Amongst its contributions to the VEE's educational strategy, the EAB also provides an insight in the actual problems of the veterinary education SWOT profile to ensure adjustments to both the students' and the labour market needs. EAB meets twice a year, along with the Faculty internal members, when new courses, changes to the curriculum are proposed or when other educational matters are discussed. Overall, the VEE has improved and structured the involvement of external stakeholders with a more sustainable system as a result.

#### **2.1.2. Comments**

The participation in the EAB is considered as positive by the participants, and the input from EAB is regarded as highly valuable from the VEE's side.

#### **2.1.3. Suggestions**

After the post-pandemic opening of the society, the representatives of the EAB could be given the opportunity to interact more with students.

### **2.2. Minor Deficiency 2: “Partial compliance with Substandard 2.4: Need to clarify the allocation of funds raised through clinical income, including a greater distribution of funds to those areas responsible for raising such additional income”**

#### **2.2.1. Findings**

Since 2020, when the Clinical department for companion animals and horses was divided into two autonomous departments, there are three separate clinical departments; one for companion animals, one for equids and one for production animals which are, independently from one another, responsible for their financial management, as well as for their teaching, research, and clinical activity. This involves that the funds raised through the clinical activity of one of the

departments will be returned to the same department. The Permanent Faculty Commission for Clinics (CPFC) was created since the reorganization in 2020 and is managing a ‘solidarity fund’ meant to support the development of new clinical services, clinical research, or replacement of equipment for clinical activity, jointly supported by the three departments by a yearly contribution based on their gross income per capita.

### **2.2.2. Comments**

The administrative changes involving the clinics not only simplified the management of the teaching and clinical activities, but also made the flow of money more transparent.

### **2.2.3. Suggestions**

None.

## **2.3. Minor Deficiency 3: “Partial compliance with Basic Sciences at the four FMVs delivering the Bachelor course due to the continuing need to ensure quality education in the Master program by a continuation of the scheme limiting the number of students within the Bachelor programs”**

### **2.3.1. Findings**

The number of students enrolled in each of the four institutions delivering the Bachelor course (40 for ULB, 51 for UCLouvain, 80 for UNamur, and 105 for ULiège) is well-established in advance and based on the 1<sup>st</sup> year enrolments of the past year. The Steering Group including the four Deans and four faculty members chosen by the Deans meets on a regular basis to discuss issues arising from the complexity of the study program. The new decree of 2021 now permanently limits the number of students having access to the second year of the bachelor courses to 276.

The Steering Group is also exploring new options for further harmonizing the bachelor programmes at the four universities, for example, by employing the new digital tools for online teaching used during the COVID-19 pandemic. No discrimination between the levels of the students entering the master programme from any of the four universities was identified any.

### **2.3.2. Comments**

The working atmosphere in the Steering Group is crucial for the coordination of the bachelor programmes and the quality of the students entering the master programme in Liège. This group is now functioning very well, and it is important that the group nourishes and maintains this constructive working environment for the future.

### **2.3.3. Suggestions**

None.

## **2.4. Minor Deficiency 4: “Partial compliance with Substandard 3.3: Requirement that program learning outcomes must be clearly visible and all units of study should be aligned to these program outcomes. Achievement of the program learning outcomes must be supported by evidence”**

### **2.4.1. Findings**

The repository of competences defined by the four institutions (ULB, UCLouvain, UNamur, ULiège) in 2013 and approved by the FMV, describes six major competences, based on range of contexts where the student will implement those, and also the trajectories, and levels of

development. The ‘program reform’ group is in charge with the analysis of different possibilities of organizing the program around the six competences, assuring that every course is harmonised to lead to the global program learning outcomes. Learning outcomes for individual courses are defined and assessed by the teachers in the ‘engagements pédagogiques’. For the clinical rotations, the final year students are examined orally towards their theoretical knowledge and broader competences (communication, problem solving capacities) by a group of clinicians. To guarantee the comparable standards for the exams in all subjects, an evaluation grid is in place.

#### **2.4.2. Comments**

None.

#### **2.4.3. Suggestions**

None.

### **2.5. Minor Deficiency 5: “Partial compliance with Substandard 3.4: Complex set of committee structures involved in evaluation, identification of content overlap, and revision of the curriculum should be streamlined (especially in ULiège)”**

#### **2.5.1. Findings**

The procedure to revise the curriculum, evaluate it and identify the overlaps is still complex (Permanent Faculty Commission of Education, board of teaching 1<sup>st</sup> and 2<sup>nd</sup> cycle, ‘study program reform’, Steering Group, External Advisory Board, the Dean’s team). However, since the full Visitation individual roles of each committee have been identified, as well as the connections between them. The VEE considers that the current structure provides different points of view from different categories (teachers, students, stakeholders) on the structure, organisation and upgrading of the educational process.

#### **2.5.2. Comments**

None.

#### **2.5.3. Suggestions**

None.

### **2.6. Minor Deficiency 6: “Partial compliance with Substandards 3.6 and 3.7: Need to formalise the clinical skills obtained during EPT in comparison to clinical skills obtained during the core intramural training”**

#### **2.6.1. Findings**

The EPT takes place in the last year of studies, as a single 12 weeks or two 6 weeks stages, based on the students’ options, in either of companion animal clinic, in the equine clinic or in clinic for ruminants and pigs or any two of those. The learning outcomes and the clinical skills to be obtained during the EPT are described and defined in 11 bullet points, by which each student is also evaluated by their EPT responsible veterinarian. The students report their clinical caseload back to the faculty in a detailed Excel-based online format. This system provides the VEE with useful data for further improvement of the EPT training.

#### **2.6.2. Comments**

None.

### **2.6.3. Suggestions**

None.

## **2.7. Minor Deficiency 7: “Partial compliance with Substandard 3.10: Need to introduce a mandatory EPT logbook (either paper or online). Fulfilment of the logbook must also be checked after EPT”**

### **2.7.1. Findings**

An electronic logbook for validation of the student activities and for recording the acquisition of the clinical skills has been developed and is in full use. The system is adapted to be used by Smart phones. The teacher or the clinician validate, based on a QR code of identification, the participation of the student in solving clinical cases and acquiring the corresponding clinical skills. The system is completely IT-based and the interface between student and validator is a specific and unique QR-code.

For EPT, the abovementioned Excel file listing the clinical caseload followed by the student during his/her EPT under the supervision of the EPT supervisor serves as a logbook. It can be downloaded from eCampus, VETE000-4 Master Logbook, Part 3 (book of clinical cases seen during EPT) for each EPT period. This includes the active participation in the monitoring or treatment of cases and is sent at the end of the EPT as a computer version, to the same section of eCampus.

### **2.7.2. Comments**

The VEE should be commended for the development of the fully electronically and Smart phone-based system. The system is very easily accessible and user-friendly.

### **2.7.3. Suggestions**

None.

## **2.8. Minor Deficiency 8: “Partial compliance with Substandards 6.2 and 6.3: Need to upgrade the library based at the FMV (the BSV) to provide a greater number of textbooks, longer opening hours and an increase in study places”**

### **2.8.1. Findings**

The library service at ULiège has been totally revised since the FV. The Library of Life Sciences (BSV) of the University of Liège has now one single location, at the “Centre Hospitalier Universitaire”. The old library became a part of the VEE’s “Vet Learning Space”, that contains specifically dedicated recent paper textbooks, still spaces for individual or group work, and a computer room with access to 75 computers. The learning space is open from 8.00-18.00 Monday-Friday, while the computer room is accessible only with a professor or assistant present.

At BSV, there is a continuous acquisition of collections and all recent veterinary books, and periodicals in paper format, where suggestions from teachers and students are also considered after a thorough metadata research by the librarians. Help to access materials for specific training activities about research, scientific and medical information is provided by the library staff, which in addition to librarians consist of veterinarians with PhD. Study rooms at the same floor level with the library along with the increasing numbers of books and periodicals available allow the students to access all needed information for their training.

All Uliège libraries are accessible to the veterinary students, and books and scanned book chapters can be ordered online by the students and picked up at the specified facility the same day or day after. The library is continuously working to develop their online services based on analyses of the students' needs.

### **2.8.2. Comments**

The COVID-19 pandemic has changed the need for and use of the online service. This is a change that probably will remain and not change back to "pre-pandemic times". The library services seem to be well adapted to meet current and future need of the students.

### **2.8.3. Suggestions**

As suggested by the VEE themselves, finding solutions for extended opening hours and free and safe access to workspaces etc. should be emphasized.

## **2.9. Minor Deficiency 9: "Partial compliance with Substandards 8.6, 8.8 and 8.9: Inadequate level of program learning outcomes covering professional knowledge, skills, competences and attributes, including allowing the school to certify the students' achievements of the learning objectives"**

### **2.9.1. Findings**

Since the last visitation, the study program was supplemented with a Para-clinical Module of Transversal Competences (decisional and relational) which envisages professional knowledge and communication and focusses on the development of soft skills. It consists of three courses: Veterinary management of Animal Resources, Building a shared decision in veterinary consultation and Veterinary professional management.

### **2.9.2. Comments**

Although apparently, the teaching of soft skills is scattered throughout the program, in different disciplines, the three modules mentioned above manage to provide professional knowledge to the students in all areas in a way that allows an adequate level of achievement of the learning objectives. Role-plays introduced to the students as innovative learning methods facilitate the acquisition of soft skills managing the relationships with clients/owners, as well as inter- and intra-professional relationships.

### **2.9.3. Suggestions**

None.

## **3. ESEVT Indicators**

The FV of 2019 revealed that some of the indicators were below the minimal requirements indicated in the 2016 SOP, due to the large number of students admitted to the master's programme. Further to the introduction of the B1 competitive exam as a permanent measure, the newly issued Decree of 2021, already in force, regulating student numbers in Bachelor year 2, guarantees that no major fluctuations will occur in the near future and that the number of students will level out. Moreover, the number of FTE staff increased and a continuous increase in case numbers was recorded. Subsequently, an increase in almost all indicators could be observed. The strategy in place to continue increasing the caseloads within all species of animals, along with the balanced numbers of students will ensure that the VEE meets the requirements outlined in the SOP.

#### **4. Conclusions**

The VEE is to be commended for significant improvements which were noticed by the Re-visitation team in all areas of concern. The VEE is committed to continue the process of improvement in all fields of their activity.

The Re-visitation Team considers that the Major Deficiencies identified during the Visitation done on May 13-17, 2019 have been addressed and fully corrected by the VEE.

Improvements were observed in all areas related to all Minor Deficiencies, some of them being entirely corrected. For some of them, conceptual follow-ups are recommended to further develop the corresponding fields.

## **Decision of ECOVE**

The Committee concluded that the Major Deficiencies identified after the full Visitation on 13 – 17 May 2019 had been corrected.

The Veterinary Education Establishment (VEE) of the University of Liège is therefore classified as holding the status of: **ACCREDITATION**.