FINAL REPORT AS ISSUED BY ECOVE ON 28 NOVEMBER 2017

European Association
of Establishments for Veterinary Education

Association Européenne
des Etablissements d'Enseignement Vétérinaire

REPORT ON THE RE-VISITATION TO
Koret School of Veterinary Medicine, The Hebrew University of Jerusalem

ON

24 – 25 November 2016

by the Visitation Team:

Professor Marc Gogny, Paris, France: Chairperson

Professor Philip Duffus, Bristol, United Kingdom: ESEVT Coordinator

Contents of the Re-visitation Report

Introduction

The Koret School of Veterinary Medicine in Rehovot (KSVM), Hebrew University of Jerusalem, Israel, was revisited on November 24th - 25 th, 2016 by the team of experts:
Professor Dr. Marc Gogny (France) Expert visitor on training in clinical sciences & chairman, and Professor Dr. Philip Duffus (United Kingdom), coordinator of the ESEVT program.

The previous Evaluation Report on the KSVM was published on 21-25 February 2011 and the Faculty received conditional approval by EAEVE and FVE ECOVE on May 2011.

The Category 1 deficiency in the report and the final ECOVE decision was:

Insufficiency in bio-security, bio-safety and general hygiene in different areas and facilities, among them, in specific, necropsy rooms and the large animal isolation ward.

Attempts to correct the category 1 deficiencies have been made according to an overall biosecurity plan that the KSVM have developed after the evaluation visit in February 2011. This plan together with a new SER was sent to the visiting team prior to the re-visitation

1. Correction of the Major Deficiency

1.1. Findings

During 2011 The KSVM launched an ambitious plan in order to improve the overall biosecurity situation in the School.

Rehovot campus

On the Rehovot campus, where the first three years are taught and where the research labs are located, health and safety are now under the supervision of Dr. Kenny Schneider, who serves as safety officer for all the campus including the Faculty of Agriculture, Food and Environment; although in the 2011 report, there was no specific remark on biosecurity in the Rehovat campus. However, the KSVM have made further improvements; for example, by an upgraded marking and pictogram system in both the labs and classrooms. Specific health and safety procedures are displayed in any room where required. In case of projectile or spraying of corrosive liquids, emergency showers and eye washers are available in each and every corridor close to the rooms and labs. Generally speaking, all buildings, gardens and roads in the campus are in excellent condition and very clean.

VTH campus

For all clinical activities, the School launched a steering group in charge of preparing a Biosecurity Protocol, dedicated to the Veterinary Teaching Hospital (VTH). This group is headed by Dr D. Berlin (Dip. ECVEIM), who as been appointed as biosecurity officer. The Biosecurity Protocol has been written and developed in 2012, according to international recommendations, and updated. Its procedures are well implemented in the clinics.

The necessary procedures and/or pictograms have been adequately displayed where required in the VTH. A colour system with stripes of orange/red adhesive tape has been installed on the floor and doors of the rooms where the access is restricted.

In the diagnostic imaging rooms, the radioprotection procedures comply with the local regulations.

Isolation facilities
The large animal isolation ward has been renovated and partly extended with a new build. The access of animals and people have been separated. A changing room has been added, with sufficient space to allow students and staff to change or to put on available disposable overalls and overshoes. However, despite these improvements the clean and dirty areas are not clearly separated. A footbath separates the changing room from the large room where three new boxes have been installed. Horses with suspected or evident infectious diseases are unloaded from the truck into this large room through a specific door which can only be opened from inside by authorized staff. The room can easily be cleansed and there are dedicated tools and bins. The animal care staff cannot observe the isolated horses as there is no window from outside the ward. An external buried tank has been especially installed to receive waste material, before final removal by a specialised company, which is under contract for all the site.

Inside the small animal clinics, a new room with six cages for small animal isolation has been created. Adequate pictograms and red lines are displayed on the door. Behind this door, there is a connecting zone, where people has to change before entering the room via a footbath. A cupboard with disposable clothes and specific bins is available.

Student and staff education on biosecurity
In addition to the biosecurity protocol that is available on site and online, specific lectures and e-learning resources have been created. First year students are taught about biosecurity from their first day in the KSVM. They have to pass the e-learning course. It is the same for the staff, who have to sign a specific form on that topic.

A colour dress code has been introduced, in order to quickly identify students when necessary in a restricted access area.

Kimron Institute necropsy hall
The only facility that is not owned nor run by the KSVM is the necropsy hall, which is under the responsibility of the Kimron Veterinary Institute, which comes under the jurisdiction of the Israeli Veterinary Service. During their clinical year, the students have a two-week rotation there, where they undertake necropsies under close supervision of the Kimron staff, amongst whom is a veterinarian who is a diplomate of the American College of Veterinary Pathology. The staff, despite of not being members of the academic staff of the KSVM, are enthusiastic in teaching the students. As it is the only animal post mortem facility in Israel, they receive enough necropsies to adequately teach the students.

The building is old-fashioned but some improvements have been made since the 2011 visitation. A changing room, similar to the previously described one, has been added at the students and staff entrance. In the room itself, the floor has been replaced by an adapted resin which is also coated to about 15 cms up to the walls in order to allow efficient cleansing. Red marks and specific pictograms have been displayed. An adjoining room, dedicated to collection and storage of carcasses and tissues before evacuation by a specialised company, has been added.

The team, however, had some concerns on the fact that, despite these obvious improvements, the facility still needs further renovation in order to meet the international standards and to be cleansed and disinfected. The doors have to be replaced, there are some outdated pieces of furniture that are not possible to cleanse properly, the cold room has to be totally renovated and the adjoining room has to be sealed, not allowing effluents and small pieces of biological tissue to flow outside the facility. Effluents are not collected and isolated in case of needed decontamination. Some windows also need to be repaired, in order not to allow insects to fly in and out the facility.

1.2. Comments

- In both small and large animal isolation facilities, there is no real distinction between people coming into the changing area and out of the isolation unit to change there. In the small animal one, the changing area is quite small, and there is a risk that the interior of the changing room may be contaminated by people coming out from it.
- In the large animal facility, there is much more space but no complete one-way changing area was created.
- The necropsy facility still needs further renovation, or to be rebuilt. Facing the fact that the KSVM has no control on that facility and wasn't successful in obtaining permission for such a renovation since the full 2011 visit, the expert team asked if it would be possible to organize an extemporaneous meeting with the Israeli Chief Veterinary Officer and with the Head of the Kimron Veterinary Institute, both of them having their office on the same site as the VTH and the necropsy hall. Thanks to them, it was possible.
- The team explained the ESEVT SOP and organisation to the CVO and his colleague. Both people had limited previous comprehension of the latter system. These two senior individuals within the Israeli Veterinary Service proved very receptive to the discussion and explained that they had to face other investment priorities during the last five years, but that the renovation of the necropsy building was budgeted and scheduled to be completed in 2017. They both accepted to write and sign an official letter by which they emphasised that strong commitment (see annex).

1.3. Suggestions

- The first suggestion is to create, in both isolation facilities, a real clean/dirty separation in the changing room. As a second point, it is always better to be able to visually observe the animals from the outside of the isolation unit, and any solution in that aspect should be considered.

- It would be preferable to resurface the road giving access to the large animal isolation ward from the street, and the walkway to the container for waste from the boxes. This external waste container has to be repaired (lid and hole on the top).

- In the isolation facilities and in the necropsy room, all cleaning tools and bins could be marked (for example by a red stripe), in order to clearly identify that they must not be taken out the facility.

- Generally speaking, it is important that the maintenance of the Biosecurity Protocol and the intentions behind it are closely followed up. To follow the intentions behind the Biosecurity Protocol a new way of working and thinking in several areas over several years is needed. The procedures have to be defined, displayed AND observed.

Especially, the restriction of circulation between the different zones have to be really observed. Additionally, the team recommend that long-haired women systematically tie their hair when working in the VTH. People should not be allowed to go outside, or in the cafeteria, when wearing their coverall or gown.

- Concerning the renovation of the necropsy building, the team is of the opinion that senior staff from KSVM, and definitely including Dr D. Berlin, should meet with senior staff from the Kimron Veterinary Institute to initiate the total upgrade/rebuilding of the necropsy facility. The team understood that detailed plans were already available. The upgrade/rebuilding should follow a strict timetable to allow completion by the end of November 2017.

1.4. Decision

Despite the above suggestions, and considering the following points:

- The KSVM had only one Cat.1 deficiency;
- The overall scientific and teaching level is excellent and the number of specialists (American or European) is very high indeed (more than 30) when compared to the size of the school;
- The academic and support staff are extremely enthusiastic in the education of students and they have faced the deficiency on biosecurity very seriously and with efficacy;
- The KSVM made a lot of overall improvements in terms of biosecurity (procedures are defined, displayed and generally observed) and implemented a specific culture in that aspect;
- All changes that were needed (biosecurity) were done by KSVM;
- Both small and large animal isolation wards have been greatly improved;

And considering that:

- the necropsy facility in Kimron Institute isn't optimal in terms of biosecurity;
- KSVM and Kimron Institute are independent structures, so that the necropsy hall is not under the control of the KSVM;
- Both the CVO and Head of Kimron Institute wrote a unified letter with a strong commitment to deeply renovate the facility before the end of November 2017;
- Since the revisit, KSVM has given evidence (detailed pictures and video) that a temporary necropsy building has been installed, that the budget for a complete renovation of the KVI necropsy hall has been found and that the renovation plan of the building already is under process.

2. Correction of the Minor Deficiencies

Many other improvements have been made since the primary visit in 2011. It is beyond the scope of the re-evaluation visit to report here all these positive adaptations. However, the Team focuses here on the previous strong recommendations.

2.1. Increase representation of support staff in the school's committees

2.1.1. Findings

Since 2012, the Department Head Committee now includes the head technician, the chief pharmacist and the reception secretary. In addition, the curriculum committee of the school includes a student, the secretary for academic affairs and the School and VTH administrative director. The Academic Development Committee of the school also includes the School and VTH administrative director.

2.1.2. Comments

This suggestion has been addressed by the Faculty.

2.1.3. Suggestion

None

2.2. Make investments into the surgery suite for horses

2.2.1 Findings

The equine part of the VTH has been significantly improved since the full visitation. A four stage renovation and extension programme was defined. The team had access to the plans of the first stage, which consists of adding a brand new diagnostic imaging extension between the small and large animal aisles of the VTH.

2.2.2. Comments

This suggestion has been addressed by the Faculty.

2.2.3. Suggestion

None

2.3. Overall teaching in the porcine species has to be increased and mandatory clinical rotations in the pig species introduced

2.3.1 Findings

The overall teaching in the porcine species has been significantly increased since the ESEVT visit in 2011:

- The first year anatomy course now includes specific chapters on the anatomy of pigs. During the anatomy practical's they dissect porcine specimens. In addition, the first year physiology course includes a chapter on porcine. Furthermore, in first and second years, as part of the microbiology courses, viruses, bacteria and fungi that are specific to pigs are mandatory parts of the curriculum. In the third year, porcine medicine is taught as part of the farm animal medicine and surgery course (18 full lecture hours of 45 min each, specifically dedicated to pig medicine and surgery). All above mentioned courses are core courses, hence mandatory to all veterinary students.

- As from 2012, during the fourth clinical year, "hands on" experience in porcine medicine is achieved by bi-weekly visits (2 days a week) to a local pig farm which raises pigs for food as well as for research purposes. During the visits, the students are exposed to porcine husbandry, slaughtering methods and inspect a slaughter facility. These two days/week visits are part of the two weeks poultry and porcine rotation and is obligatory to all students.

2.3.2 Comments
This suggestion has been addressed by the Faculty.

2.3.3 Suggestions
None

2.4. Improve the evaluation of each clinical rotation by students and interns

2.4.1 Findings
The VTH has formalised a revised system for evaluation of clinical rotations:

- At the end of each clinical rotation, the head of the service has a final "wrap-up" meeting with all students and staff involved with the rotation, including the technicians. During this meeting, the students are asked for their opinion on the rotations and they are provided with general feedback on their performance from each clinician.

- Anonymous forms are also filled by each student and sent to the office of student affairs in Rehovot. In these forms, students are requested to evaluate the overall rotation in terms of academic value, technical skills acquired during the rotation and staff attitude toward students and teaching. They are also asked to do the same for the clinicians and technicians with whom they worked during the rotation. The forms are then uploaded to the personal file of each clinician who gets access to this file every

three months. A copy of these reports is also sent to the school's dean and the head of the curriculum committee.

2.4.2 Comments
This suggestion has been addressed by the Faculty.

2.4.3 Suggestions
None

2.5. Implement a computerized medical records system

2.5.1 Findings

- A computerized system named "Chameleon" was purchased in 2014. The system is an Israeli developed system already in place at several human hospitals. The system was "adjusted" for veterinary use and planned to be implemented on the 1st of February 2016; however there were problems that were not anticipated, mainly with the financial system and the laboratory equipment.

- All those problems are now resolved and three months ago a pilot operation was started in several departments (dermatology, oncology and exotic animals). During December/January it will be implemented in the large animal and the small animal internal medicine departments.

- To fully utilise this system dozens of new computers and additional hardware have been installed all over the individual hospital departments. Hospital staff have received training with this system as well as the new fourth year students.

2.5.2 Comments
This suggestion has been addressed by the Faculty.

2.5.3 Suggestions
None

3. ESEVT Indicators

As the team focused on the 2011 Major Deficiency (Budapest SOP), the ESEVT indicators have not been recalculated.

Decision of ECOVE

The Committee concluded that the Major Deficiency, identified in 2011, had not been fully corrected:

-) Insufficiency in bio-security, bio-safety and general hygiene in different areas and facilities, among them, in specific, necropsy rooms and the large animal isolation ward.

The 'Koret School of Veterinary Medicine, The Hebrew University of Jerusalem' is therefore classified as holding the status of: **CONDITIONAL APPROVAL**.