

**European Association
of Establishments for Veterinary Education**

**Association Européenne
des Etablissements d'Enseignement Vétérinaire**



**REPORT ON THE RE-VISITATION TO THE FACULTY OF
VETERINARY MEDICINE, THESSALONIKI (FVMT)**

25-26 FEBRUARY 2014

Expert group:

**Prof Pierre Lekeux (University of Liege, Belgium)
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Introduction

On 29-30th November 2011, ECOVE had deliberated the status of Non Approved Faculty, due to the identification of three Major Deficiencies:

- ✓ Insufficient level of hands-on training in small animal medicine and surgery linked to a not fully functioning emergency service.
- ✓ Insufficient level of hands-on training in equine medicine and surgery linked to shortage of staff, inappropriate facilities and isolation facilities for horses.
- ✓ Lack of reaction and action by the Faculty to poor learning performance associated with long times to graduation and the scarce overall participation of students in any non-compulsory teaching and learning activities. Under these circumstances, the Faculty cannot assure, by the time students graduate, that all students have acquired the day+1 knowledge and skills listed in the EAEVE guidelines.

Programme of the re-visit

Previous to the re-visitation, the Dean of FVMT (Prof. Dinopoulos) had mailed an interim report on improvements implemented since the EAEVE visitation in May 2011 (Annex 1). An Agenda of the re-visitation was proposed in advance, and approved by visitors (Prof. Pierre Lekeux and Prof. Luca Rossi) on January 20th, 2014, after minor amendments.

During the re-visitation, the Dean (Prof. Karatzias) and his team (Prof. Rallis and Prof. Papazoglou) offered efficient collaboration, resulting in the accurate inspection of all expected premises and services, the visualization of relevant documents and the auditing of students and informed (senior and junior) staff.

Though improvements in national legislation dealing with students' careers were already discussed during the welcome dinner on February 25th, compensation of the fore mentioned deficiencies was investigated and debated during the second day of the re-visitation.

On February 26th, we first audited the students on several aspects of their academic life, including perception of the strengths and weaknesses of the course and faculty, critical interpretation of the unsatisfactory careers of the so called "non active" students (a

majority of the student population in 2011), and suggestions for improvement. An estimate number of >200 students of all curricular years was present and the audit did authentically participate.

After the audit of students, Dr. Diakakis, Equine specialist at FVMT, attended us during the visitation to the areas dedicated to clinical activities on equines, including the isolation premises. While visiting, we met the practitioner (Dr. Tirnenopoulou) that FVNT has hired in 2013 in support of Dr. Diakakis, and three graduated students registered for an internship at the "equine unit".

We were then assisted by Drs. Savvas, Mylonakis and Kazakos for visitation of the premises dedicated to the 24H/7D Emergency Service for Companion Animals, including the resting rooms for staff and students. During the visitation, we were made aware of the organization of this newly established service and simulated the admission of an out-of-hour "virtual" patient in the premises. We were also shown the logbook that students are bound to fill to be admitted at the exams in clinical disciplines, and the functioning of "e-vet", internally developed software utilized to store and retrieve clinical cases, in addition to paper files. Both are fully available to students.

Prof. Antonopoulos and Dr. Mylonakis offered us a presentation of the new veterinary curriculum developed on the basis of EU Directives and suggestions made by the national QA agency, an *ad hoc* Committee and the EAEVE experts who visited FVMT in May 2011.

Finally, we met the vice-Rector for Academic Affairs, Prof. Lialiou, and (briefly) the Rector for evaluating the motivation of the University authorities for their veterinary faculty and for a debriefing on preliminary findings and first-hand suggestions following the re-visitation.

Findings

Information which we deem most relevant for the purposes of this report is the following:

1. A 24 hour 7 days per week emergency service for companion animals has been implemented at the Veterinary Teaching Hospital. It is run by members of the junior staff (3 members/round, one each in the Internal Medicine, Surgery and

- Intensive Care sub-units) under the responsibility of on-call members of the senior staff;
2. Students join the fore mentioned service during their fourth and fifth year. A minimum of 8 compulsory rotations is requested, in parallel with rounds to assist hospitalized companion animal. Six students are involved per rotation;
 3. The emergency service is publicized in the Homepage of the Veterinary Teaching Hospital (<http://www.vet.auth.gr/en/the-school/clinics-labs/department-5/>). A contact phone number is accessible to the public (+302310994529; +302310994416);
 4. Reportedly, the new emergency service has been welcomed by practitioners operating in Thessaloniki and surroundings, where only two other similar services are available for an estimated canine and feline population of approximately 300,000 individuals;
 5. In the last 16 months since the opening of this emergency service (September 2012), the number of admitted canine and feline out-of-hour cases was 120 plus 10 exotic animals, a figure corresponding to approximately 2 cases/week. 50 patients were admitted during the last 4 months, which is suggestive of an increasing trend;
 6. Premises at the Veterinary Teaching Hospital, which were previously used for training in large animal reproduction, have been refurbished and destined to clinical visitation of equine patients. Safety aspects have been adequately cared for, namely the height of ceiling, the non-slip flooring and the escape routes for the students, staff and patients. Two boxes are also available for hospitalization and options do exist locally for an immediate increase in this number if requested by an increase in the equids case load ;
 7. The building which was previously used for clinical visitation/hospitalization of equine patients, has now been exclusively destined to isolation of infective and suspicious equines. The isolation facility has a separate access from the external perimeter of the Veterinary Teaching Hospital (at approximately 50 m from a secondary gate of the Campus). Anti-mosquito screens are present. An additional isolation facility is available in the Kolchiko Campus;
 8. In 2013, the equine caseload has raised to 370 patients (they averaged 254 in the three years prior to the visitation, in 2011), corresponding to a 4.03 caseload/final

- year student ratio. Approximately 8% of the equine patients are emergency cases. Lameness, colics and respiratory tract pathologies are the dominant caseload, while reproductive disorders are rarely handled;
9. An equine team has been created, which is composed of a permanent staff member, a hired practitioner and three graduated students in their internship. The unit is in charge of the clinical training of FMVT students, including electives and the emergency service;
 10. By check crossing information from students and staff, the exposure of the average FMVT student to equines in a clinical context has been reconstructed as follows: 5 to 7 daily rounds with the equine team (implying the exposure to an estimated number of a minimum of 13-14 patients) and additional involvement in the handling of a similar number of equine patients while on rotation in surgery, radiology, anaesthesiology and internal medicine. Overall the average student is exposed to an estimated number of 20 to 30 equine patients. Students taking the elective courses on equines receive additional 10 weeks of clinical training in this species;
 11. As of August 30th, 2011 a new state legislation has come into effect, limiting the maximum number of years of Veterinary studies to 7 (5 + 2). This is effective for the students having started their studies not earlier than the academic year 2012-2013. According to the new legislation, the existing "non-active" students have to graduate latest by 2015 (depending on the year of their enrolment) or they will be removed from the records of the Faculty. This will automatically decrease the number of "non-active" students at FMVT (their number has already decreased of approximately one third since 2011).
 12. The rule that students will not be admitted to their 4th curricular year, hence to clinical training, in default of "prerequisite" exams passed has been endorsed in the design of the new curriculum which started in the present academic year. Accordingly, students with insufficient background will no longer be admitted to hands-on clinical training and possible problems of graduate heterogeneity with regards to day+1 skills and time to graduation will be solved;
 13. As from the beginning of the academic year 2012-2013, each student attending the Clinics is provided with a log-book containing all the practicals he/she has to attend

in order to obtain the required training and clinical skills before being allowed to take the final exams. Verification of the attendance to each practical is made by the signature of the faculty member responsible for the specific part of clinical training. This has objectively improved the traceability of attendance to clinical training by the individual students and, reportedly, has put pressure on students to fulfill the expected duties. The permanent staff is officially in charge to attest the accuracy of the log-books;

14. An Examination Committee has been appointed to address all examination issues of the old and new curriculum. Students in the new curriculum will no longer be allowed to attend exams for an unlimited number of times but only for two (out of three) sessions in the year, with the exception of "prerequisite" exams. Moreover, students in the new curriculum will be offered interim exams (up to 50% of the learning material) and the continuous assessment of practical and clinical activities.

In passing, we were glad to be informed that i) the new curriculum will imply a 30% increase of hands-on clinical training compared with the previous one; ii) a discussion is in progress on teaching methodologies in first curricular years; and iii) new subjects have been identified in the new curriculum including Biology of Animals and Plants, Agronomy, Ethology and Welfare, Clinical Nutrition, Clinical Pharmacology, Clinical Biochemistry, Food Safety, Food Microbiology, Business Administration and Veterinary Forensics, most of which being previously taught as part of other subjects.

Suggestions

To further improve training in equine reproduction, we strongly recommend that several "teaching" mares are seasonally maintained at the already existing premises (to be refurbished) at the Thessaloniki Campus or, preferably, in Kolchiko.

Moreover, we recommend that biosafety and biosecurity rules are more clearly defined for emergency services (and for all clinical activities) and that compliance with these rules by all players is monitored.

Finally it is suggested to further improve the search by key words in the 'e-vet' software in order to make the database more easily available by the students.

Conclusions

Based on evidence and the information collected during the visitation, it is our opinion that the Faculty of Veterinary Medicine in Thessaloniki has positively reacted to requests by the ECOVE and has compensated for the former three Major Deficiencies which determined the Non Approval status.

Acknowledgements

The team would like to thank the FVMT for their kind hospitality and the excellent preparation of the re-visitation.

Yours faithfully

Thessaloniki/Liege/Torino, 27th February 2014



Prof. Pierre Lekeux



Prof. Luca Rossi

ECOVE DECISION:

No major deficiency has been found.

The status of the establishment is: approval.