

U.S. Department of Education Staff

European Association of Establishments for Veterinary Education Petition for Initial Recognition

Prepared May 2018

Background

Effective July 1, 2015, the U.S. Department of Education (Department) is charged with determining whether a foreign accrediting agency or organization (agency) is acceptable to the Secretary of Education for the purpose of evaluating veterinary programs and, therefore, access of those programs to participate in Federal student aid funding programs (Section 600.56(a)(4)).

The mission of the EAEVE is to evaluate, promote and further develop the quality and standard of veterinary medical establishments and their teaching within, but not limited to, the member states of the European Union (EU). The information submitted in this report is the agency's initial submission to the Department for recognition.

Summary of Findings

Based on its review of the information and documentation submitted by EAEVE, Department staff concludes that the agency has provided information in response to the Department's request in conjunction with the new U.S. regulatory requirement regarding the review of foreign veterinary accrediting agencies. Therefore, the agency can be determined to be acceptable to the Secretary of Education for the purpose of evaluating veterinary programs for Federal purposes. (See CFR §600.56(a)(4) for the guiding regulation). The agency will receive an official notification letter from the Department which will also explain the length of the acceptability determination.

Staff Analysis

PART 1: ACCREDITATION SYSTEM AND AUTHORITY

Accreditation System and Authority, Question 1

Agency Narrative

EAEVE was founded in 1988 in Paris, France and is governed by the French law of 1st July 1901 and the French Decree of 16th August 1901, having as its name the European Association of Establishments for Veterinary Education (E.A.E.V.E.). The registered offices of EAEVE shall be at the National Veterinary School of Alfort, 94704 MAISONS-ALFORT (Prefecture Du Val-De-Marne N° 0003019). Offices were first in Paris, then in Brussels and since 2007 in Vienna, Austria, where it was registered under Austrian law (ZVR-Zahl: 258866359) in order to employ supportive staff. The Association is a non- profit organization.

The formation of the Organization was based on a 3-year cross-national peer assessment, which started in 1985 on the initiative of, and financed by, the European Union (EU) Commission`s Advisory Committee on Veterinary Training (ACVT). Consequently, and upon recommendation of the study, ACVT installed a permanent evaluation system for European Veterinary Teaching Establishments and recognized EAEVE as the evaluating agency. In 1993, the European Commission withdrew its financial support and ACVT mandated EAEVE and the Federation of Veterinarians of Europe (FVE) to continue managing the evaluation system independently and with its own budget. The EAEVE Member Establishments decided to maintain the system by paying membership and evaluation fees, as they recognized the benefits of such a Europe-wide profession-specific evaluation system. In 2000, based on the EU-ACVT mandate, a Joint Educational Committee (now European Committee on Veterinary Education, ECOVE) was formed acting as an independent decision-making Evaluation/Accreditation Board within but independent of EAEVE, with the European System of Evaluation of Veterinary Training (ESEVT) as its accrediting system.

EAEVE is the only international or EU transnational non-governmental accrediting organization for veterinary medicine within Europe. Based on the yearly number of Visitations, it is the largest one in this field in the world. EAEVE membership is voluntary and currently has 96 Veterinary Education Establishments (VEEs) (75 within the EU, the rest in Albania, Bosnia-Herzegovina, FYROM, Israel, Jordan, Norway, Serbia, Switzerland and Turkey). Although all EU VEEs are members of EAEVE, membership is voluntary but evaluation is obligatory.

The vision for EAEVE is the harmonization and improvement of quality within all VEEs in agreement with the EU Directive 2005/36/EC partially amended by Directive 2013/55/EU and to be the official accreditation authority for VEEs within Europe. The mission of EAEVE is to evaluate, promote and further develop the quality and standard of VEEs within, but not limited to, the member states of the EU. The primary objective is to monitor the harmonization of the minimum standards set down in the study program for veterinarians or veterinary surgeons in the EU Directive 2005/36/EC partially amended by Directive 2013/55/EU, as well as monitoring the levels of quality assurance within these standards. This is enacted through the ESEVT, which is managed by the EAEVE in cooperation with FVE. The existing EAEVE evaluation system, ESEVT, is endorsed by many competent authorities such as the Directorate General Internal Market and Services (DG GROW) and Directorate General for Health and Consumers (DG SANTE) of the European Commission. At the European Commission level, the ESEVT applied by EAEVE in collaboration with the FVE is acknowledged but a formal status of EAEVE as official accreditor, with licensing consequences inside the EU, is not possible yet since there is free movement of professionals amongst the EU member states and the requisite for an ex-post evaluation system of veterinary training programs is working only for VEEs and not for the other health professions (or for architects), that are the regulated professions inside the EU (see page 46, point 8.4.4 "Ex-post evaluation

of training programmes” of the official document issued on 5th July 2011 by the Directorate General Internal Market and Services of the European Commission on the “Evaluation of the Professional Qualifications Directive (Directive 2005/36/EC)”
<http://ec.europa.eu/DocsRoom/documents/15384/attachments/1/translations>

The most important recognition of EAEVE as accreditor which guarantees that EAEVE fulfils the Standards and Guidelines for Quality Assurance applying for accreditors in the European Higher Education Area (ESG 2015) is the recent accreditation (final decision on 19 April 2018) by the European Network for Quality Assurance in Higher Education (ENQA). This accreditation by ENQA gives EAEVE authority to accredit veterinary schools in Europe, at the same level as given to the National QA agencies working in the different European countries that are also accredited by ENQA. See all documents about EAEVE accreditation by ENQA under <http://www.eaeve.org/about-eaeve/quality-assurance/external-quality-assurance.html>. The ENQA Review process is consistent and trusted, with a constant attention to the quality assurance and improvement of the method itself and the accreditation has serious consequences for EAEVE, not only in terms of granting access to membership of ENQA and inclusion in the European Quality Assurance Register (EQAR), but also in terms of indirect judgments on credibility, quality, and other predications of entire external review systems, or even the higher education system of a country or region.

Moreover, EAEVE accreditation through the ESEVT is seen as necessary to guarantee EU citizens' trust in veterinary services by the European Coordinating Committee on Veterinary Education (ECCVT), integrated by all branches dealing with Veterinary Education in Europe: EAEVE, FVE (licensing body) and the European Board of Veterinary Specialisation (EBVS) (see ECCVT statement under http://www.eaeve.org/fileadmin/downloads/eccvt/2015_1_Position_on_ESEVT_FINAL.pdf)

Provided documentation of the functional authority of the agency:

- EAEVE statutes;
 - ESG 2015 (http://www.enqa.eu/wp-content/uploads/2015/11/ESG_2015.pdf)
 - Official document by the Directorate General Internal Market and Services of the European European Commission on the “Evaluation of the Professional Qualifications Directive (Directive 2005/36/EC)”
<http://ec.europa.eu/DocsRoom/documents/15384/attachments/1/translations>
- ECCVT statement on Harmonisation of veterinary education: fundamental for establishing EU citizens' trust in veterinary services:
http://www.eaeve.org/fileadmin/downloads/eccvt/2015_1_Position_on_ESEVT_FINAL.pdf)

Analyst Remarks to Narrative

The agency is clearly designated as the entity responsible for evaluating the quality of veterinary education in Europe. Specifically, the agency provided the statute governing (first granted in 1988) the European Association of Establishments for Veterinary Education as the legal authority to evaluate and accredit veterinary schools across the EU. The agency is also designated as a trusted authority for citizens' trust in veterinary services by the European Coordinating Committee on Veterinary Education.

Accreditation System and Authority, Question 2

Agency Narrative

The main objective of the ESEVT, which is managed by EAEVE in association with FVE is to check if the professional qualifications provided by the VEEs are compliant with the relevant EU Directives and the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015). The EU Directives are at the basis and core of the evaluation and accreditation criteria of EAEVE, as laid down and published in the ESEVT Standard Operating Procedures, approved by the EAEVE General Assembly and by the FVE Board.

Minimum training requirements for veterinarians (i.e. conditions for admission to the training, the minimum duration of the training and list elements of knowledge and skills veterinary graduates have to acquire in the course of their training relevant for the automatic recognition of their qualification throughout the EU) are laid down in the EU Directives on the recognition of professional qualifications, i.e. article 38 (L255/44) and Annex V “Recognition on the basis of coordination of the minimum training conditions”, section “V.4 Veterinary Surgeon” (L255/120-122) of the Directive 2005/36/EC; article 38 is partially amended by Directive 2013/55/EU (L354/154-155). The Standards for Quality Assurance in the European Higher Education Area have been updated in September 2014 and have been approved by the Ministerial Conference in May 2015 (ESG 2015).

The SOP is the document that drives the accreditation process (ESEVT) during visitations to Establishments. The original SOP document evolved from the first working paper of EAEVE governed by the European Commission Document III/D/5056/5/89. This initial document was amended and published as an SOP in EU Doc XV/E/8488/2/98. Following the dissolution of ACVT in 2000, this SOP document was adopted by EAEVE and applied exclusively as of 2002. Since then, the SOP has been thoroughly revised and progressively updated under approval of the respective annual General Assemblies' (GA). The implementation of these revisions and updates followed circulation to stakeholders, the latter representing both the national Establishments themselves as well as European wide bodies such as FVE (licensing body).

The external quality assurance criteria used by EAEVE are defined and publicly available. The criteria are summarized in the SOP and are based on the requirements of EU Directives 2005/36/EC and 2013/55/EU and the ESG 2015 and embrace the following basic concepts:

- The use of generic frameworks and standards when assessing VEEs
- A single framework applies to both the theoretical and applied (clinical) parts of a professional program such as a veterinary qualification
- A recognition of the ownership shown by those within the Establishments who create and then manage quality
- Accountability and improvement are to be integrated in all quality assurance processes, and the development of a quality culture is

considered equally important as accountability

- Assessment panels to be composed of independent experts (peers), including student members, and subject to approval by stakeholders such as EAEVE, FVE (licensing body) and IVSA. Each team will have as a member an individual with experience and training in QA processes
- All assessment reports and all decisions of EAEVE on the basis of these reports are made public by EAEVE as well as by the visited Establishment.

The ESEVT evaluation process is a fully transparent Accreditation procedure based on a system of a Visitation program over one week, together with periodic Interim Reports provided by the Establishment. It is compulsory for EAEVE members, as stated in the EAEVE statutes. To be accredited by ESEVT, a veterinary degree provided by an Establishment must meet all the standards set out in the SOP, in order to be compliant with the EU Directives on the recognition of professional qualifications and the ESG 2015. If an establishment offers more than one veterinary program, e.g. in different languages, all programs must be evaluated.

The ESEVT evaluation system gives assurance to:

- The public – to know they can trust the quality of graduating veterinarians and the service they deliver
- Veterinary students – to know their education reaches agreed and acceptable standards
- Veterinary Establishments – to know that their curricula reach agreed benchmarked levels

A list of Evaluated and Approved/accredited Establishments is maintained and updated on the EAEVE website.

At the European Member State level, cooperation with the national academic quality assurance agencies is developing and intensifying. An increasing number of national authorities in Europe recognize EAEVE decisions and act accordingly. However, national academic quality assurance agencies are not always specialized in the field of veterinary medicine and during their accreditation process tend to apply more general principles of academic quality assurance and management, with a reduced emphasis on the professional competences of veterinary graduates. In Austria and Hungary, for instance, EAEVE is recognized as the legitimate accrediting agency for veterinary science in lieu of governmental quality assessment procedures. Another example is in Italy, where the Veterinary Teaching Establishments that are not accredited by EAEVE may not enrol first year students. It is anticipated, and this is endorsed by the DG MARKT and DG SANTE, that such agreements will be extended to all Member State authorities and that national veterinary licensing agencies could instigate consequences of any non-approved/non-accredited status of veterinary training Establishments under their jurisdiction.

EAEVE cooperates with national quality assurance agencies in order to contribute to the quality of the national Higher Education (HE) systems (e.g. in the UK and the Netherlands). After an evaluation visitation to an Establishment, the results and recommendations decided on by ECOVE and communicated back to the Establishment, are often not 'legally binding' in a number of European countries and it is up to the individual HE Institutions to react (or not to react) to these results. This of course is dependent on national policies, especially in terms of recognition and licensing of veterinarians, over which EAEVE itself does not have any direct power. Nevertheless, the decisions on accreditation status by ESEVT/ECOVE have an increasing level of influence through the widespread publicity of such decisions. The public availability of such findings associated with a VEE, has an increasing effect and far reaching consequences on the ability of graduates from such VEE to find a suitable career; this is especially of importance for those VEEs in the EU who are actively establishing courses with the prime designation to attract and then to train overseas applicants in veterinary science. VEEs are well aware of the risks involved in being a "non-accredited" school by EAEVE and are therefore incentivized to move as quickly as possible towards remedying both the major and minor deficiencies. In this sense, the ECCVT recommends all VEEs in Europe to follow the ESEVT accreditation as the best way to guarantee the achievement of minimum standards required to deliver quality veterinary services and ensure health and welfare of animals as well as public health in Europe.

Provided documentation of the accreditation system:

ESEVT SOP

<http://www.eaeve.org/esevt/establishments-status.html>

EU Directives 36 and 55

Analyst Remarks to Narrative

The statutes for EAEVE state that the objective of the Association shall be to maintain and develop the standards of veterinary education in Europe and so ensure that those trained in veterinary medicine meet the requirements of the society. The Association shall reinforce, particularly in Europe, co-operation between establishments for Higher Education in Veterinary Science and other relevant bodies. The Association should also act as a forum for the discussion of matters for Veterinary Education, in order to improve and harmonize veterinary education among the members.

To demonstrate the requirements that EAEVE follows the statutes, the agency has provided its SOP (exhibit 5) that documents the accreditation process it follows for the establishment and oversight of quality veterinary education programs. In addition, the agency has explained in its narrative the agency's cooperation with other groups, such as other higher education establishments in the U.K. and the Netherlands.

PART 2: ACCREDITATION STANDARDS

Mission and Objectives

Agency Narrative

Minimum training requirements for veterinarians (i.e. conditions for admission to the training, the minimum duration of the training and list elements of knowledge and skills veterinary graduates have to acquire in the course of their training relevant for the automatic recognition of their qualification throughout the EU) are laid down in the EU Directives on the recognition of professional qualifications, i.e. article 38 (L255/44) and Annex V "Recognition on the basis of coordination of the minimum training conditions", section "V.4 Veterinary Surgeon" (L255/120-122) of the Directive 2005/36/EC; article 38 is partially amended by Directive 2013/55/EU (L354/154-155). The Standards for Quality Assurance in the European Higher Education Area have been updated in September 2014 and have been approved by the Ministerial Conference in May 2015 (ESG 2015).

The external quality assurance criteria used by EAEVE are summarized in the SOP and are based on the requirements of EU Directives 2005/36/EC and 2013/55/EU and the ESG 2015. The principal aim of the European System of Evaluation of Veterinary Training (ESEVT) in setting standards, and evaluating the Establishment against them to ensure that the Establishment:

-) is well managed
-) has adequate financing to sustain its educational, research and social commitments
-) has appropriate resources of staff, facilities and animals
-) provides an up to date professional curriculum
-) provides an appropriate learning environment
-) operates a fair and reliable assessment system
-) operates ad hoc QA and quality enhancement mechanisms.

Compliance with all the ESEVT Standards taken together provides an assurance that the veterinary degree meets the requirements of the EU Directives and ESG recommendations and guarantees that its graduates will have acquired the relevant knowledge, skills and competences required for the entry-level of a veterinarian.

Standard 1, Objectives and Organization, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

- 1.1 The Establishment must have as its main objective to provide, in agreement with the EU Directives and ESG recommendations, adequate, ethical, research-based, evidence-based veterinary training that enables the new graduate to perform as a veterinarian capable of entering all commonly recognized branches of the veterinary profession and to be aware of the importance of lifelong learning.
- 1.2 The Establishment must develop and follow its mission statement which must embrace all the ESEVT standards.
- 1.3 The Establishment must be part of a university or a higher education institution providing training recognized as being of an equivalent level and formally recognized as such in the respective country.
- 1.4 The person responsible for the veterinary curriculum and the person(s) responsible for the professional, ethical, and academic affairs of the Veterinary Teaching Hospital (VTH) must hold a veterinary degree.
- 1.5 The organizational structure must allow input not only from staff and students but also from external stakeholders.
- 1.6 The Establishment must have a strategic plan, which includes a SWOT analysis of its current activities, a list of objectives, and an operating plan with timeframe and indicators for its implementation.

In the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

- 1.1.1. Details of the Establishment, i.e. official name, address, phone number, Email and website addresses, Establishment's Head, name and degrees of the person(s) responsible for the professional, ethical, and academic affairs of the VTH, official authority overseeing the Establishment
- 1.1.2. Summary of the Establishment Strategic Plan with an updated SWOT analysis (Strengths, Weaknesses, Opportunities and Threats), the mission and the objectives
- 1.1.3. Summary of the Establishment Operating Plan with timeframe and indicators of achievement of its objectives
- 1.1.4. Organizational chart (diagram) of the Establishment
- 1.1.5. List of departments/units/clinics and councils/boards/committees with a very brief description of their composition/function/responsibilities (further information may be provided in the appendices)
- 1.1.6. Description of how (procedures) and by who (description of the committee structure) the strategic plan and the organization of the Establishment are decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Provided documentation of the accreditation standards (a) Mission and Objectives: ESEVT SOP incl. Chapter 3, Standard 1: Objectives and Organisation and Annex 8 Template and guidelines for the writing of the Visitation Report

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the quality of the veterinary programs and that they are appropriate in light of the program's mission and objectives. Specifically, the agency requires that minimum training requirements for veterinarians are met (i.e. conditions for admission to the training, the minimum duration of the training and list elements of knowledge and skills veterinary graduates).

In addition, the agency has provided a copy of the SOP that outlines the review of the mission and objectives of a program during the accreditation visit. However, while it is explained that this is done in practice, the agency has not provided documentation demonstrating implementation of this review (such as the onsite visit team's review prescribed in the agency's SOP).

Agency Response

Provided documentation of the accreditation standards (a) Mission and Objectives: ESEVT SOP incl. Chapter 3, Standard 1: Objectives and Organisation and Annex 8 Template and guidelines for the writing of the Visitation Report.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/easevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided copies of the self evaluation report and a copy of the final report from two veterinary reviews conducted. The report includes documentation demonstrating the agency reviews mission and objectives based on their standards outlined in Chapter 3, Standard 1. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Governance

Agency Narrative

The EU Directive on the recognition of professional qualifications (Directive 2013/55/EU) declares that all professional veterinary degrees offered in the European Union are required to meet certain 'minimum training requirements'. These are set out in Article 38: 'The training of veterinarians shall comprise a total of at least five years of full-time theoretical and practical study, which may in addition be expressed with the equivalent ECTS credits, at a university or at a higher institute providing training recognized as being of an equivalent level, or under the supervision of a university, covering at least the study program referred to in point 5.4.1 of Annex V (of Directive 2005/36/EC). Point 5.4.2 of Annex V (of Directive 2005/36/EC) (L255/120-122) lists the Evidence of formal qualifications of veterinary surgeons officially recognized by the European Commission in the different countries (Country, Evidence of formal qualification, Body awarding the evidence of qualification, Certificate accompanying the evidence of qualifications, Reference date).

Standard 1, Objectives and Organization, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

1.3 The Establishment must be part of a university or a higher education institution providing training recognized as being of an equivalent level and formally recognized as such in the respective country.

In the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

1.1.1. Details of the Establishment, i.e. official name, address, phone number, Email and website addresses, Establishment's Head, name and degrees of the person(s) responsible for the professional, ethical, and academic affairs of the VTH, official authority overseeing the Establishment.

Provided documentation of the accreditation standards (a) Mission and Objectives: ESEVT SOP incl. Chapter 3, Standard 1: Objectives and Organisation and Annex 8 Template and guidelines for the writing of the Visitation Report Directives 36 and 55

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that require a veterinary school to be legally authorized to provide a program of veterinary education in the country in which it is located. Specifically, the agency's Standard 1.3 requires "the Establishment must be part of a university or a higher education institution providing training recognized as being of an equivalent level and formally recognized as such in the respective country."

Analyst Remarks to Response

Administrative and Fiscal Capacity, Question 1

Agency Narrative

Standard 2, Finances, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

2.1 Finances must be demonstrably adequate to sustain the requirements for the Establishment to meet its mission and to achieve its objectives for education, research and services.

2.2 The finance report must include both expenditures and revenues and must separate personnel costs, operating costs, maintenance costs and equipment.

2.3 Resources allocation must be regularly reviewed to ensure that available resources meet the requirements.

2.4 Clinical and field services must function as instructional resources. Instructional integrity of these resources must take priority over financial self-sufficiency of clinical services operations. Clinics must be run as efficiently as possible.

2.5 The Establishment must have sufficient autonomy in order to use the resources to implement its strategic plan and to meet the ESEVT Standards.

In the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

- 2.1.1. Description of the global financial process of the Establishment
- 2.1.2. Degree of autonomy of the Establishment on the financial process
- 2.1.3. % of overhead to be paid to the official authority overseeing the Establishment on revenues from services and research grants
- 2.1.4. Annual tuition fee for national and international students
- 2.1.5. Estimation of the utilities (e.g. water, electricity, gas, fuel) and other expenditures directly paid by the official authority and not included in the expenditure tables
- 2.1.6. List of the on-going and planned major investments for developing, improving and/or refurbishing facilities and equipment, and origin of the funding
- 2.1.7. Prospected expenditures and revenues for the next 3 academic years
- 2.1.8. Description of how (procedures) and by who (description of the committee structure) expenditures, investments and revenues are decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Provided documentation of the accreditation standards (c) Administrative and Fiscal Capacity: ESEVT SOP incl. Chapter 3, Standard 2: Finances and Annex 8 Template and guidelines for the writing of the Visitation Report

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the fiscal capacity of the veterinary school and that they are appropriate in light of the school's mission and objectives. Specifically, the agency's standards require veterinary schools to have adequate funding that is reviewed on a regular basis, that they maintain a list of developments, and a prospective list of expenses for next 3 years. It is further explained that the agency verifies the information during the Self Evaluation Report, but has not provided documentation demonstrating that review (such as a completed self-evaluation report or documentation demonstrating the review of this information).

In addition, information is needed that explains the administrative (non-fiscal) review of the veterinary school. The agency may wish to include additional details and documentation demonstrating implementation of the agency's review for administrative capacity.

Agency Response

Provided documentation of the accreditation standards (c) Administrative and Fiscal Capacity: ESEVT SOP incl. Chapter 3, Standard 2: Finances and Annex 8 Template and guidelines for the writing of the Visitation Report.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/easevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The reports include documentation demonstrating the agency reviews financial capacity based on their Standards outlined in Chapter 3, standard 2. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Administrative and Fiscal Capacity, Question 2

Agency Narrative

Standard 2, Finances, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

2.1 Finances of the Establishment must be demonstrably adequate to sustain the requirements for the Establishment to meet its mission and to achieve its objectives for education, research and services.

In the Self Evaluation Report (SER) the Establishment must provide factual information about:

- Annual expenditures during the last 3 academic years (in Euros)
- Annual revenues during the last 3 academic years (in Euros)
- Annual balance between expenditures and revenues (in Euros)

Provided documentation of the accreditation standards (c) Administrative and Fiscal Capacity: ESEVT SOP incl. Chapter 3, Standard 2: Finances

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the fiscal capacity of the veterinary school and that they are appropriate in light of the school's mission and objectives. Specifically, the agency's standards require veterinary schools to have adequate funding that is reviewed on a regular basis, that they maintain a list of developments, and a prospective list of expenses for next 3 years. It is further explained that the agency verifies the information during the Self Evaluation, but

has not provided documentation demonstrating that review (such as a completed Self Evaluation report).

Agency Response

Provided documentation of the accreditation standards (c) Administrative and Fiscal Capacity: ESEVT SOP incl. Chapter 3, Standard 2: Finances.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/easevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The report includes documentation demonstrating the agency review for fiscal capacity of the program based on their standards outlined in Chapter 3, Standard 2. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Faculty, Question 1

Agency Narrative

Standard 4, Facilities and equipment, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

- 4.1. All aspects of the physical facilities must provide an environment conducive to learning.
- 4.2. The veterinary Establishment must have a clear strategy and program for maintaining and upgrading its buildings and equipment.
- 4.3. Lecture theatres, teaching laboratories, tutorial rooms, clinical facilities and other teaching spaces must be adequate in number, size and equipped for the instructional purposes and must be well maintained. The facilities must be adapted for the number of students enrolled.
- 4.4. Students must have ready access to adequate and sufficient study, self-learning, recreation, locker, sanitary and food services facilities.
- 4.5. Offices, teaching preparation and research laboratories must be sufficient for the needs of the academic and support staff.
- 4.6. Facilities must comply with all relevant legislation including health, safety, biosecurity and EU animal welfare and care standards.
- 4.7. The Establishment's livestock facilities, animal housing, core clinical teaching facilities and equipment must:
 -) be sufficient in capacity and adapted for the number of students enrolled in order to allow hands-on training for all students
 -) be of a high standard, well maintained and fit for purpose
 -) promote best husbandry, welfare and management practices
 -) ensure relevant biosecurity and bio-containment
 -) be designed to enhance learning.
- 4.8. Core clinical teaching facilities must be provided in a VTH with 24/7 emergency services at least for companion animals and equines, where the Establishment can unequivocally demonstrate that standard of education and clinical research are compliant with all ESEVT Standards, e.g. research-based and evidence-based clinical training supervised by academic staff trained to teach and to assess, availability for staff and students of facilities and patients for performing clinical research and relevant QA procedures. For ruminants and pigs, on-call service must be available if emergency services do not exist for those species in a VTH. The Establishment must ensure state-of-the-art standards of teaching clinics which remain comparable with the best available in the private sector.
- 4.9. The VTH and any hospitals, practices and facilities (including EPT) which are involved with the curriculum must meet the relevant national Practice Standards.
- 4.10. All core teaching sites must provide dedicated learning spaces including adequate internet access.
- 4.11. The Establishment must ensure students have access to a broad range of diagnostic and therapeutic facilities, including but not limited to: pharmacy, diagnostic imaging, anaesthesia, clinical pathology, intensive/critical care, surgeries and treatment facilities, ambulatory services and necropsy facilities
- 4.12. Operational policies and procedures (including biosecurity, good laboratory practice and good clinical practice) must be taught and posted for students, staff and visitors.
- 4.13. Appropriate isolation facilities must be provided to meet the need for the isolation and containment of animals with communicable diseases. Such isolation facilities must be properly constructed, ventilated, maintained and operated to provide for animal care in accordance with updated methods for prevention of spread of infectious agents. They must be adapted to all animal types commonly handled in the VTH.
- 4.14. The Establishment must have an ambulatory clinic for production animals or equivalent facilities so that students can practice field veterinary medicine and Herd Health Management under academic supervision.
- 4.15. The transport of students, live animals, cadavers, materials from animal origin and other teaching materials must be done in agreement with national and EU standards, to ensure the safety of students and staff and to prevent the spread of infectious agents.

In the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

- 4.1.1. Description of the location and organization of the facilities used for the veterinary curriculum (surface area, distance from the main

campus for extramural facilities, ..) (maps to be provided as appendices)

4.1.2. Description (number, size, equipment, ..) of the premises for:

-) lecturing
-) group work (seminars, tutorials, ..) ESEVT 'Uppsala' SOP May 2016 50
-) practical work (laboratories, rooms for clinical skills room on dummies, ..)

4.1.3. Description (number, size, species, ..) of the premises for housing:

-) healthy animals
-) hospitalized animals
-) isolated animals

4.1.4. Description (number, size, equipment, species, disciplines, ..) of the premises for:

-) clinical activities
-) diagnostic services including necropsy -) FSQ & VPH (slaughterhouses, foodstuff processing units, ..)
-) others (specify)

4.1.5. Description (number of rooms and places, ..) of the premises for:

-) study and self-learning
-) catering
-) locker rooms
-) accommodation for on call students
-) leisure

4.1.6. Description (number, size, equipment, ..) of the vehicles used for:

-) students transportation (e.g. to extramural facilities)
-) ambulatory clinics
-) live animals transportation
-) cadavers transportation

4.1.7. Description of the equipment used for

-) teaching purposes
-) clinical services (diagnostic, treatment, prevention, surgery, anaesthesia, physiotherapy,

4.1.8. Description of the strategy and programme for maintaining and upgrading the current facilities and equipment and/or acquiring new ones.

4.1.9. Description of how (procedures) and by who (description of the committee structure) changes in facilities, equipment and biosecurity procedures (health & safety management for people and animals, including waste management) are decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Provided documentation of the accreditation standards (d) Faculty: ESEVT SOP incl. Chapter 3, Standard 4, Facilities and equipment and Annex 8 Template and guidelines for the writing of the Visitation Report

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the quality of the veterinary programs and require the school's faculty to be of sufficient size, breadth, and depth to provide the scope of the educational program offered. The agency does not set a specific number for the size of the faculty, but determines sufficiency, primarily, in relation to the size of the student cohort.

The agency states that this information is verified through the Self Evaluation Report. Department staff requests that a completed self evaluation report be provided as an example to demonstrate implementation of these standards.

Agency Response

Provided documentation of the accreditation standards (d) Faculty: ESEVT SOP incl. Chapter 3, Standard 4, Facilities and equipment and Annex 8 Template and guidelines for the writing of the Visitation Report.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The report includes documentation demonstrating the agencies review of facilities and equipment based on their standards outlined in Chapter 3, Standard 4. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Faculty, Question 2

Agency Narrative

Standard 9: Academic and support staff, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

9.1. The Establishment must ensure that all staff are appropriately qualified and prepared for their roles, in agreement with the national and EU regulations. A formal training (including good teaching and evaluation practices, learning and e-learning resources, biosecurity and QA procedures) must be in place for all staff involved with teaching. Most FTE academic staff involved in veterinary training must be veterinarians. It is expected that greater than 2/3 of the instruction that the students receive, as determined by student teaching hours, is delivered by qualified veterinarians.

9.2. The total number, qualifications and skills of all staff involved with the program, including teaching staff, 'adjunct' staff, technical, administrative and support staff, must be sufficient and appropriate to deliver the educational program and fulfil the Establishment's mission.

9.3. Staff who participate in teaching must have received the relevant training and qualifications and must display competence and effective teaching skills in all relevant aspects of the curriculum that they teach, regardless of whether they are full or part time, residents, interns or other postgraduate students, adjuncts or off-campus contracted teachers.

9.4. Academic positions must offer the security and benefits necessary to maintain stability, continuity, and competence of the academic staff. Academic staff should have a balanced workload of teaching, research and service depending on their role; and should have reasonable opportunity and resources for participation in scholarly activities.

9.5. The Establishment must provide evidence that it utilizes a well-defined, comprehensive and publicized program for the professional growth and development of academic and support staff, including formal appraisal and informal mentoring procedures. Staff must have the opportunity to contribute to the Establishment's direction and decision making processes. 9.6. Promotion criteria for academic and support staff must be clear and explicit. Promotions for teaching staff must recognize excellence in, and (if permitted by the national or university law) place equal emphasis on all aspects of teaching (including clinical teaching), research, service and other scholarly activities.

Standard 11: Outcome Assessment and Quality Assurance, of the ESEVT SOP have the following QA components assessed by the ESEVT team during the accreditation Visitation:

11.5 The Establishment must assure themselves of the competence of their teachers. They must apply fair and transparent processes for the recruitment and development of staff.

In the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

9.1.1. Brief description of the global strategy in order to ensure that all requested competences for the veterinary program are covered for both academic and support and that they are properly qualified and prepared for their roles

9.1.2. Description of the adequacy of the number of academic and support staff in the different departments/units with the number of students to be taught.

9.1.3. Brief description of the process and the implication of staff, students and stakeholders in the development, implementation, assessment and revision of the strategy for allocating, recruiting, promoting, supporting and assessing academic and support staff
As annex, the Establishment must provide a list of the current academic staff, qualifications, their FTE, teaching responsibilities and departmental affiliations.

Provided documentation of the accreditation standards (d) Faculty: ESEVT SOP incl. Chapter 3, Standard 9, Academic and support staff and Standard 11, Outcome Assessment and Quality Assurance and Annex 8 Template and guidelines for the writing of the Visitation Report

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the quality of the veterinary programs and requires that 2/3rd of members of the veterinary school's faculty are appropriately qualified and effective to teach in a veterinary program. The other faculty should still be appropriate to the mission and objectives of the veterinary program.

While the agency has standards for qualifications for faculty it states that it verifies this information in the Self Evaluation Report. No report was included in the agency's submission.

Agency Response

Provided documentation of the accreditation standards (d) Faculty: ESEVT SOP incl. Chapter 3, Standard 9, Academic and support staff and Standard 11, Outcome Assessment and Quality Assurance and Annex 8 Template and guidelines for the writing of the Visitation Report.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The report includes documentation demonstrating the agency's review of faculty qualifications based on their standards outlined in Chapter 3, Standard 9. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Faculty, Question 3

Agency Narrative

An important part of the program at Veterinary Establishments is what is termed “External Practical Training (EPT)” or “Extra-Mural Studies (EMS)”, both of which refer to undergraduates spending time away from the Establishment to gain experience within a wide range of veterinary related providers such as Farms, Abattoirs, Clinics, Government institutes etc. If EPT is widely utilized within a program, the ESEVT team need to assess what are the QA mechanisms in place to:

- Ensure a similar quality/standard of provision for a particular skill
- Train EPT providers
- Provide feedback to the Establishment
- Ensure effective management of EPT program within the Establishment

EPT are training activities organized outside the Establishment, the student being under the direct supervision of a non academic person (e.g. a practitioner). EPT cannot replace the core intramural training nor the extramural training under the close supervision of academic staff (e.g. ambulatory clinics, herds visits, practical training in FSQ).

The EPT providers must have an agreement with the Establishment and the student (in order to fix their respective rights and duties, including insurance matters), provide a standardized evaluation of the performance of the student during their EPT and be allowed to provide feedback to the Establishment on the EPT program.

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

Provided documentation of the accreditation standards (d) Faculty: ESEVT SOP

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the quality of the veterinary programs and address the relationship between the instructional staff at remote sites and clinical locations and the veterinary school. Specifically, the agency's standards require that an agreement is in place with the student to provide a standardized evaluation of the performance of the student. Supervision of the academic staff in other locations is required.

While the agency states that they have standards for faculty who are located in other locations and agreements, the agency has not included documentation demonstrating implementation of this process (such as faculty agreements or some other form of documentation demonstrates how supervision of remote faculty occurs).

Agency Response

Due to the confidential nature of agreements between an Establishment and EPT provider, documentation demonstrating implementation of this process (an example agreement) cannot be provided. However, the contracts are available for the ESEVT teams to inspect them on site during the Visitation.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The reports include documentation indicating that the agency reviews the agreements based on their standards. A specific agreement was not included due to confidentiality concerns identified by the agency. However, the self evaluation report and the final report demonstrate that a review of this information has occurred and resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Faculty, Question 4

Agency Narrative

The Establishment must list the Indicators of animals/herds/units available for extra-mural clinical training:

-) n° of companion animal patients seen extra-murally / n° of students graduating annually;
-) n° of individual ruminants and pig patients seen extra-murally / n° of students graduating annually;
-) n° of equine patients seen extra-murally / n° of students graduating annually;
-) n° of visits to ruminant and pig herds / n° of students graduating annually;

-) n° of visits to poultry and farmed rabbit units / n° of students graduating annually.

Also, in the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

4.1.6. Description (number, size, equipment, ..) of the vehicles used for:

-) students transportation (e.g. to extramural facilities)

5.1.6. Description of the group size for the different types of clinical training (both intramurally and extra-murally)

5.1.7. Description of the hands-on involvement of students in clinical procedures in the different species, i.e. clinical examination, diagnostic tests, blood sampling, treatment, nursing and critical care, anaesthesia, routine surgery, euthanasia, necropsy, report writing, client communication, biosecurity procedures, .. (both intra-murally and extra-murally)

In a table form, the Establishment must report the number of (Cattle, Small ruminants, Pigs, Companion animals, Equine, Poultry & rabbits, Exotic pets and Other) patients seen extra-murally (in the ambulatory clinics) in the last 3 years.

Provided documentation of the accreditation standards (d) Faculty: ESEVT SOP incl. Annex 4, 5, 6 and 8

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the quality of the veterinary programs and assess the resources for instructional staff at remote sites and clinical locations and the veterinary school. Specifically, the agency's standards require that numerical reports indicating the number of patients seen are collected.

While the agency has standards that state this information is collected, the agency has not provided any documentation (such as a completed Self Evaluation) demonstrating that this collection has occurred.

Agency Response

Provided documentation of the accreditation standards 4 and 5 and Annexes 6 and 8 of the SOP.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of self evaluation report and the final report from two veterinary reviews conducted. The reports include documentation demonstrating the agency's review of faculty resources based on their standards outlined in Standard 4 and 5. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Curricula, Question 1

Agency Narrative

Although veterinary curricula in Europe share many similarities amongst the different countries, as a supra-national accrediting agency, EAEVE through its accrediting process, the European System of Evaluation of Veterinary Training (ESEVT), must take account of these national variations.

In addition to the diversity of the degree structure, the competent national authorities responsible for the quality of training in their respective Veterinary Education Establishment (VEE), and also for the issuing of the veterinary degrees, differ from State to State. Governmental structures, of which universities are in general part, usually oversee the delivery of the academic degrees; those governmental bodies may be ministries of science & research, of health, or agriculture. On the other hand, permission to practice the profession necessitates, in most countries, registration with and acceptance by a national professional organization (e.g. licensing bodies, veterinary chambers). In reality, the levels of communication, coordination and harmonization between and among these two entities of competent authorities on the national level is on occasion scarce, or sometimes nearly non-existent.

Traditionally, European VEEs are largely autonomous in generating, applying and transmitting veterinary curricula. Although governmental authorities endorse and approve curricula in most Member States, feedback and external quality control mechanisms of veterinary curricula (and their compatibility with both EU Directives) are infrequently applied in several member states; in fact, European legislation for establishing an academic quality assurance and control system is very recent and usually restricted to the national level. The Bologna declaration and subsequent development of the ESG has now created an active environment for the promotion of high quality QA processes within higher education. Incidentally, international and transnational evaluation of nearly all European VEEs has been carried out regularly and with full transparency by EAEVE for more than 33 years.

The ESEVT gives assurance to:

- The public – to know they can trust the quality of graduating veterinarians and the service they deliver
- Veterinary students – to know their education reaches agreed and acceptable standards
- Veterinary Establishments – to know that their curricula and school reach agreed benchmarked levels.

One of ESEVT's principal aim in setting standards, and evaluating the Establishment against them, is to ensure that the Establishment provides an up to date professional curriculum.

Standard 1 of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

1.4 The person responsible for the veterinary curriculum and the person(s) responsible for the professional, ethical, and academic affairs of the Veterinary Teaching Hospital (VTH) must hold a veterinary degree.

Standard 3 of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

3.1. The curriculum must be designed, resourced and managed to ensure all graduates have achieved the graduate attributes expected to be fully compliant with the EU Directive 2005/36/EC partially amended by directive 2013/55/EU and its Annex V.4.1.

3.2. The learning outcomes for the program must be explicitly articulated to form a cohesive framework.

3.3. Program learning outcomes must be communicated to staff and students and:

- underpin and ensure the effective alignment of all content, teaching, learning and assessment activities of the degree program

- form the basis for explicit statements of the objectives and learning outcomes of individual units of study

- be regularly reviewed, managed and updated to ensure they remain relevant, adequate and are effectively achieved.

3.4. The Establishment must have a formally constituted committee structure (which includes effective student representation), with clear and empowered reporting lines, to oversee and manage the curriculum and its delivery. The committee(s) must:

- determine the pedagogical basis, design, delivery methods and assessment methods of the curriculum

- oversee QA of the curriculum, particularly gathering, evaluating, making change and responding to feedback from stakeholders, peer reviewers and external assessors, and data from examination/assessment outcomes

- review the curriculum at least every seven years by involving staff, students and stakeholders

- identify and meet training needs for all types of staff, maintaining and enhancing their competence for the on-going curriculum development.

3.5. The curriculum must include the subjects (input) listed in Annex V of EU Directive 2005/36/EC and must allow the acquisition of the Day One Competences (output). This must concern all groups of subjects, i.e.:

- Basic Sciences

- Clinical Sciences

- Animal Production

- Food Safety and Quality

- Professional Knowledge.

3.6. External Practical Training (EPT) are training activities organized outside the Establishment, the student being under the direct supervision of a non-academic person (e.g. a practitioner). EPT cannot replace the core intramural training nor the extramural training under the close supervision of academic staff (e.g. ambulatory clinics, herds visits, practical training in FSQ)

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

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

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

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

In the SER the Establishment must provide factual information on the following points:

3.1.1. Description of the educational aims and strategy in order to propose a cohesive framework and to achieve the learning outcome

3.1.2. Description of the legal constraints imposed on curriculum by national/regional legislations and the degree of autonomy that the Establishment has to change the curriculum

3.1.3. Description of how curricular overlaps, redundancies, omissions and lack of consistency, transversality and/or integration of the curriculum are identified and corrected

3.1.4. Description of the core clinical exercises/practicals/seminars prior to the start of the clinical rotations

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Provided documentation of the accreditation standards (e) Curricula: ESEVT SOP incl. Standard 1 and 3, and Annex 8

Analyst Remarks to Narrative

The agency has accreditation standards that effectively address the quality of the veterinary programs and has requirements with regards to the design, implementation, and evaluation of a veterinary school's curriculum, though the specifics of that may vary depending on the country that program is located in. Specifically, the agency's standards require that the staff, students, and stakeholders have the opportunity to contribute to the curriculum and there must be on-going evaluation and continuous improvement based on evidence derived from outcome measures.

While the agency has a standard for this section, they have not provided documentation demonstrating implementation of this standard.

Agency Response

Provided documentation of the accreditation standards (e) Curricula: ESEVT SOP incl. Standard 1, Objectives and Organisation and

Standard 3, Curriculum and Annex 8 Template and guidelines for the writing of the Visitation Report.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The reports include documentation demonstrating the agency's review of the veterinary school curriculum based on their standards outlined in Standard 1 and 3. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Curricula, Question 2

Agency Narrative

The EU Directive on the recognition of professional qualifications (Directive 2013/55/EU) declares that all professional veterinary degrees offered in the European Union are required to meet certain 'minimum training requirements'. These are set out in Article 38 of the EU Directive 2005/36/EU (L255/44) partially amended by Directive 2013/55/EU (L354/ 154-155) as follows: 'The training of veterinarians shall comprise a total of at least five years of full-time theoretical and practical study, which may in addition be expressed with the equivalent ECTS credits, at a university or at a higher institute providing training recognized as being of an equivalent level, or under the supervision of a university, covering at least the study program referred to in point 5.4.1 of Annex V (of Directive 2005/36/EC).

In the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

-) Curriculum hours in each academic year taken by each student
-) Curriculum hours in EU-listed subjects taken by each student
-) Curriculum hours taken as electives for each student
-) Curriculum days of External Practical Training (EPT) for each student
-) Optional courses proposed to students (not compulsory)
-) Average duration of veterinary studies

Provided documentation: ESEVT SOP incl. Annex 6

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the quality of the veterinary programs and has requirements with regards to program length. Specifically, the agency's standards require that all UK veterinary degrees must be at least 5 years in length.

This information is verified in the Self Evaluation Report, but the agency has not included a completed report to document this review.

Agency Response

Provided documentation: SOP and Annex 6.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of self evaluation report and the final report from two veterinary reviews conducted. The reports include documentation demonstrating the agency's verification of program length based on their standards outlined in the agency's SOP. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Curricula, Question 3

Agency Narrative

Annex V.4 (Recognition on the basis of coordination of the minimum training conditions for Veterinary Surgeon) of Directive 36/2005/EC (L255/120) under 5.4.1 lists the minimum content of the study program leading to the evidence of formal qualifications in veterinary medicine; in this list "Professional ethics" appears as a subject of the group of Basic Sciences in the Specific subjects that are obligatory for the instruction of veterinary surgeons in the EU. A list of subjects and Day One Competences was approved by the European

Coordination Committee on Veterinary Training (ECCVT) on 26 March 2015 (and applied by EAEVE in the ESEVT since, see Annex 2 of the ESEVT SOP 2016) and proposed to the EU DG Grow as amendment to update Annex V.4, 5.4.1 of the Directive 2005/36/EC (ECCVT Statement on Day-1 competences for Veterinarians

http://www.eaeve.org/fileadmin/downloads/eccvt/2015_2_D1C_Adopted_Annex_5.4.1.pdf)

The list of Day One Competences are (amongst others) to:

- 1.1 Understand the ethical and legal responsibilities of the veterinarian in relation to patients, clients, society and the environment.
- 1.16 Handle and restrain animal patients safely and with respect of the animal, and instruct others in helping the veterinarian perform these techniques.

In order to be able to undertake their professional duties effectively, new veterinary graduates will need a breadth of underpinning knowledge and understanding of the biological, animal and social sciences and laws related to the animal industries. This will include, amongst others:

- 2.3 The structure, function and behavior of animals and their physiological and welfare needs, including healthy common domestic animals, captive wildlife and laboratory-housed animals.
- 2.7 Legislation relating to animal care and welfare, animal movement, and notifiable and reportable diseases.
- 2.9 The principles of disease prevention and the promotion of health and welfare.
- 2.12 The ethical framework within which veterinarians should work, including important ethical theories that inform decision-making in professional and animal welfare-related ethics.

The ESEVT team during the accreditation Visitation verifies that the following subjects are included in the Curricula:

Basic Sciences:

-) Professional ethics
-) Animal welfare

Professional Knowledge

-)Professional ethics & behavior
-)Veterinary legislation

Provided documentation: ESEVT SOP incl. Annex 2, 6 and 8, Directive 36, and the ECCVT Statement on Day-1 competences for Veterinarians (http://www.eaeve.org/fileadmin/downloads/eccvt/2015_2_D1C_Adopted_Annex_5.4.1.pdf)

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the quality of the veterinary programs and has requirements with regards to the extent and nature of the educational experience in teaching ethics. Specifically, the agency's standards require the curriculum to cover handling animals safely and with respect to the animals.

The agency has further included documentation of their 'day one standards' (exhibit 10) that demonstrates that these expectations are present from the first day of the veterinary program, all the way to graduation.

Analyst Remarks to Response

Curricula, Question 4

Agency Narrative

The ESEVT team during the accreditation Visitation verifies that the EU Directives on the recognition of professional qualifications (Directives 2005/36/EC and 2013/55/EU) are implemented. As laid down in Article 38 of the EU Directive 2013/55/EU:

Training as a veterinarian shall provide an assurance that the professional in question has acquired:

- (b) adequate knowledge of the structure, functions, behaviour and physiological needs of animals, as well as the skills and competences needed for their husbandry, feeding, welfare, reproduction and hygiene in general.
- (c) the clinical, epidemiological and analytical skills and competences required for the prevention, diagnosis and treatment of the diseases of animals, including anaesthesia, aseptic surgery and painless death, whether considered individually or in groups, including specific knowledge of the diseases which may be transmitted to humans;
- (e) adequate knowledge of the hygiene and technology involved in the production, manufacture and putting into circulation of animal feedstuffs or foodstuffs of animal origin intended for human consumption, including the skills and competences required to understand and explain good practice in this regard;

As with all obligatory subjects listed in Annex V, 5.4.1 of the Directive 2005/36/EC, the ESEVT verifies the number of hours and type of training in Professional ethics, animal welfare, professional knowledge (ethics&behavior) and veterinary legislation. In the SER the VEE must show in table form the number of hours and type of training of these subjects and the team of experts verify on site the veracity of these statements (see Annex 6 "Template and guidelines for the writing of the SER", table 3.1.2 Curriculum hours in EU listed subjects taken by each student).

Provided documentation: ESEVT SOP incl. Annex 6 and 8, Directives 36 and 55

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the quality of the veterinary programs

and evaluates the mechanisms a veterinary school has in place to monitor and evaluate the success of the instruction in ethics. Specifically, the agency's standards require a veterinary school to have adequate knowledge of the animal patients that they are serving that includes skill and competency as it relates to ethics.

Analyst Remarks to Response

Curricula, Question 5

Agency Narrative

Standard 4: Facilities and equipment, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

4.6. Facilities must comply with all relevant legislation including health, safety, biosecurity and EU animal welfare and care standards.

4.7. The Establishment's livestock facilities, animal housing, core clinical teaching facilities and equipment must:

-) be sufficient in capacity and adapted for the number of students enrolled in order to allow hands-on training for all students

-) be of a high standard, well maintained and fit for purpose

-) promote best husbandry, welfare and management practices

4.12. Operational policies and procedures (including biosecurity, good laboratory practice and good clinical practice) must be taught and posted for students, staff and visitors.

In the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

5.1.6. Description of the procedures developed to ensure the welfare of animals used for educational and research activities

5.1.9. Description of the patient record system and how it is used to efficiently support the teaching, research, and service programs of the Establishment.

5.1.10. Description of the procedures developed to ensure the welfare of animals used for educational and research activities

5.1.11. Description of how (procedures) and by who (description of the committee structure) the number and variety of animals and material of animal origin for pre-clinical and clinical training, and the clinical services provided by the Establishment are decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Provided documentation of the accreditation standards (e) Curricula: ESEVT SOP incl. Standard 4, Facilities and equipment and Standard 5, Animal resources and teaching material of animal origin

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the quality of the veterinary programs and has requirements to ensure the humane care of animals when animals are used in teaching and research. Specifically, the agency's standards require a report regarding the procedures for providing for the welfare of the animals, how they ensure the welfare, and who has responsibility.

The agency's standards are verified through the Self Evaluation Report, but the agency has not provided a copy of that documentation demonstrating implementation of these standards (such as the completed self evaluation report).

Agency Response

Provided documentation of the accreditation standards (e) Curricula: ESEVT SOP incl. Standard 4, Facilities and equipment and Standard 5, Animal resources and teaching material of animal origin.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The reports include documentation demonstrating the agency's review of facilities and the humane care of animals based on their standards outlined in Standard 4. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Curricula, Question 6

Agency Narrative

The curriculum of all Establishments must include the subjects listed in Annex V.4, 5.4.1 of EU Directive 2005/36/EC and must allow the acquisition of the Day One Competences. This must concern all groups of subjects, i.e.:

A) Basic Subjects;

B) Specific Subjects: Basic sciences, Clinical sciences, Animal production, Food hygiene

Clinical Sciences including:

Obstetrics

- Pathology (including pathological anatomy)
- Parasitology
- Clinical medicine and surgery (including anaesthetics)
- Clinical lectures on the various domestic animals, poultry and other animal species
- Preventive medicine
- Radiology
- Reproduction and reproductive disorders
- Veterinary state medicine and public health
- Veterinary legislation and forensic medicine
- Therapeutics
- Propaedeutics

In the SER the Establishments must record in a list of Indicators the:

-) n° of hours of practical (non-clinical) training;
-) n° of hours of clinical training;
-) n° of hours of FSQ and VPH training;
-) n° of hours of extra-mural practical training in FSQ and VPH.

In the ESEVT SOP clinical training is defined as training that strictly focuses on hands-on procedures by students, which include the relevant diagnostic, preventive and therapeutic activities in the different species. It concerns individual patients, herds and production units and normal animals in a clinical environment. Propaedeutic, diagnostic necropsies, therapeutic and surgical hands-on activities on cadavers, organs and animal dummies are also classified as clinical training but may not replace the hands-on training on live patients. Simply observing the teacher doing clinical tasks is not considered as clinical training.

Furthermore, the Establishments must list the Indicators of patients available for intra-mural clinical training:

-) n° of companion animal patients seen intra-murally / n° of students graduating annually;
-) n° of ruminant and pig patients seen intra-murally / n° of students graduating annually;
-) n° of equine patients seen intra-murally / n° of students graduating annually;
-) n° of rabbit, rodent, bird and exotic patients seen intra-murally / n° of students graduating annually;

Also, the Establishments must list the Indicators of animals/herds/units available for extra-mural clinical training:

-) n° of companion animal patients seen extra-murally / n° of students graduating annually;
-) n° of individual ruminants and pig patients seen extra-murally / n° of students graduating annually;
-) n° of equine patients seen extra-murally / n° of students graduating annually;
-) n° of visits to ruminant and pig herds / n° of students graduating annually;
-) n° of visits to poultry and farmed rabbit units / n° of students graduating annually.

Establishments moreover must report on necropsies available for clinical training:

-) n° of companion animal necropsies / n° of students graduating annually;
-) n° of ruminant and pig necropsies / n° of students graduating annually;
-) n° of equine necropsies / n° of students graduating annually;
-) n° of rabbit, rodent, bird and exotic pet necropsies / n° of students graduating annually.

In the ESEVT SOP, clinical work are is defined as “strictly hands-on procedures by students both in the intramural clinical rotations and in the ambulatory clinics under the supervision of an academic teacher; it includes work on normal animals in a clinical environment, on organs and clinical subjects including individual patients and herds, making use of the relevant diagnostic data. Surgery and propaedeutical hands-on work on organ systems and on cadavers to practice clinical techniques, and diagnostic pathology are also classified as clinical work”.

In the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

- 5.1.2. Description of the specific strategy of the Establishment in order to ensure that each student receives the relevant core clinical training before graduation, e.g. numbers of patients examined/treated by each student, balance between species, balance between clinical disciplines, balance between first opinion and referral cases, balance between acute and chronic cases, balance between consultations (one-day clinic) and hospitalisations, balance between individual medicine and population medicine
- 5.1.6. Description of the group size for the different types of clinical training (both intramurally and extra-murally)
- 5.1.11. Description of how (procedures) and by who (description of the committee structure) the number and variety of animals and material of animal origin for pre-clinical and clinical training, and the clinical services provided by the Establishment are decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Regarding Research programs, continuing and postgraduate education, in the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

- 10.1.1. Description of how the research activities of the Establishment and the implication of most academic staff in it contribute to research-based undergraduate veterinary education

10.1.2. Description of how the postgraduate clinical trainings of the Establishment contribute to undergraduate veterinary education and how potential conflicts in relation to case management between post- and undergraduate students are avoided

10.1.3. Description of how undergraduate students:

-) are made aware of the importance of evidence-based medicine, scientific research and lifelong learning;

-) are initiated to bibliographic search, scientific methods and research techniques, and writing of scientific papers (e.g. through a graduation thesis);

-) are offered to participate to research programs on a non-compulsory basis

10.1.4. Description of how the continuing education programs provided by the Establishment are matched to the needs of the profession and the community

10.1.5. Prospected number of students registered at post-graduate programs for the next 3 academic years

10.1.6. Description of how (procedures) and by who (description of the committee structure) research, continuing and postgraduate education programs organized by the Establishment are decided, communicated to staff, students and stakeholders, implemented, assessed and revised.

Provided documentation: ESEVT SOP incl. Standard 5 and 10 and Annex 10, and Directive 36

Analyst Remarks to Narrative

The agency has standards that address the quality of the veterinary programs and has requirements with regards to inclusion of clinical training within a veterinary school's curriculum. Specifically, the agency has standards that require descriptions of the clinical training and how the continuing education programs contribute to the veterinary programs. The agency also provided information that they collect numerical information for postgraduate program offerings.

However, while the agency has standards and explained how this is done in practice, the agency has not provided documentation demonstrating implementation of this review.

Agency Response

Provided documentation of the SOP accreditation standards (5 & 10), annex 4, Directive 36.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The reports include documentation demonstrating the agency's review of clinical training based on their standards outlined in Standards 5 and 10. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Student Achievement, Question 1

Agency Narrative

Standard 7: Student admission, progression and welfare, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

7.8. The basis for decisions on progression (including academic progression and professional fitness to practice) must be explicit and readily available to the students. The Establishment must provide evidence that it has mechanisms in place to identify and provide remediation and appropriate support (including termination) for students who are not performing adequately.

7.9. The Establishment must have mechanisms in place to monitor attrition and progression and be able to respond and amend admission selection criteria (if permitted by national or university law) and student support if required.

7.10. Mechanisms for the exclusion of students from the program for any reason must be explicit.

7.11. Establishment policies for managing appeals against decisions, including admissions, academic and progression decisions and exclusion, must be transparent and publicly available.

7.12. Provisions must be made by the Establishment to support the physical, emotional and welfare needs of students. This includes, but is not limited to, learning support and counselling services, careers advice, and fair and transparent mechanisms for dealing with student illness, impairment and disability during the program. This shall include provision of reasonable accommodations/adjustments for disabled students, consistent with all relevant equality and/or human rights legislation.

Standard 8: Student assessment, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

8.1. The Establishment must ensure that there is a clearly identified structure within the Establishment showing lines of responsibility for the assessment strategy to ensure coherence of the overall assessment regime and to allow the demonstration of progressive development across the program towards entry level competence.

8.2. The assessment tasks and grading criteria for each unit of study in the program must be clearly identified and available to students in a timely manner well in advance of the assessment.

- 8.3. Requirements to pass must be explicit.
- 8.4. Mechanisms for students to appeal against assessment outcomes must be explicit.
- 8.5. The Establishment must have a process in place to review assessment outcomes and to change assessment strategies when required.
- 8.6. Program learning outcomes covering the full range of professional knowledge, skills, competences and attributes must form the basis for assessment design and underpin decisions on progression.
- 8.7. Students must receive timely feedback on their assessments.
- 8.8. Assessment strategies must allow the Establishment to certify student achievement of learning objectives at the level of the program and individual units of study.
- 8.9. Methods of formative and summative assessment must be valid and reliable and comprise a variety of approaches. Direct assessment of clinical skills and Day One Competences (some of which may be on simulated patients), must form a significant component of the overall process of assessment. It must also include the quality control of the students logbooks in order to ensure that all clinical procedures, practical and hands-on training planned in the study program have been fully completed by each individual student.

In the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

7.1.5. Description of:

-) the progression criteria and procedures for all students;
-) the remediation and support for students who do not perform adequately;
-) the rate and main causes of attrition;
-) the exclusion and appeal procedures;
-) the advertisement to students and transparency of these criteria/procedures

Also, the Establishment must provide a table demonstrating the average duration of veterinary studies in the last 3 years.

Furthermore, in the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

8.1.1. Description of the global student's assessment strategy of the Establishment

8.1.2. Description of the specific methodologies for assessing:

-) theoretical knowledge;
-) pre-clinical practical skills;
-) clinical practical skills

8.1.3. Description of the assessment methodology to ensure that every graduate has achieved the minimum level of competence, as prescribed in the ESEVT Day One Competences (as approved by the ECCVT on 26 March 2015 and proposed to the EU DG Grow as amendment to update Annex 5.4.1 of the EU Directive 2005/36/EC)

8.1.4. Description of the processes for:

-) ensuring the advertising and transparency of the assessment criteria/procedures;
-) awarding grades, including explicit requirements for barrier assessments;
-) providing to students a feedback post-assessment and a guidance for requested improvement;
-) appealing

8.1.5. Description of how (procedures) and by who (description of the committee structure) the student's assessment strategy is decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Provided documentation of the accreditation standards (f) Student Achievement: ESEVT SOP incl. Chapter 3, Standard 7: Student admission, progression and welfare and Standard 8: Student assessment, and Directive 36

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the quality of the veterinary programs and that they require the evaluation of student achievement. Specifically, the agency's standards set requirements to identify and support students who are not performing adequately.

However, no information has been provided that demonstrates the student achievement review of the veterinary school. The agency should include additional details and documentation (such as the completed Self Evaluation report) demonstrating implementation of the agency's review for student achievement.

Agency Response

Provided documentation of the accreditation standards (f) Student Achievement: ESEVT SOP incl. Chapter 3, Standard 7: Student admission, progression and welfare and Standard 8: Student assessment, Directive 36.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeev.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and of the final report from two veterinary reviews conducted. The reports include documentation demonstrating the agency's review of student achievement based on

their standards outlined in Chapter 3, Standard 7. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Student Achievement, Question 2

Agency Narrative

There are no requirements laid down by the ESEVT SOP for preparing U.S. students for taking and passing the North American Veterinary Licensing Examination (NAVLE) since this task is not a mission and/or objective of EAEVE for the present or the near future.

Analyst Remarks to Narrative

The agency does not require its veterinary schools to prepare U.S. students to take and pass the North American Veterinary Licensing Examination (NAVLE).

Based on the information provided it is unclear to Department staff, how American students who attend veterinary school in Europe would be prepared for the workforce in the U.S. if the NAVLE is not a consideration. The agency should also provide additional details regarding the preparation of American students for NAVLE.

Agency Response

There are no requirements laid down by the ESEVT SOP for preparing U.S. students for taking and passing the North American Veterinary Licensing Examination (NAVLE) since this task is not a mission and/or objective of EAEVE for the present or the near future.

However, curriculum at EAEVE accredited programs is designed to prepare students to enter the veterinary workforce globally, not just in Europe or in the U.S. (see ESEVT SOP incl. Chapter 3, Standard 3: Curriculum and Standard 8: Student assessment). EAEVE is not aware of any substantive differences between entering the U.S. workforce and entering the European workforce (possible exception might be that more European graduates enter careers in public health and regulatory medicine, but they are well prepared for these careers), nor is aware of any evidence to suggest that a summative examination demonstrates preparedness to enter the workforce.

Regarding the preparedness of students for NAVLE, the ESEVT guarantees that the curriculum at each EAEVE accredited programs includes all core principles of veterinary medicine. As a summative examination, NAVLE is designed to measure basic understanding of core principles of veterinary medicine by new graduates. Therefore, graduates of EAEVE accredited programs are prepared to take the NAVLE. In addition, students wishing to take the NAVLE may do so at several testing locations in Europe (e.g. in Denmark, Germany, France, United Kingdom, etc. see <https://www.icva.net/faqs/>).

Analyst Remarks to Response

In response to the draft staff analysis, the agency has further explained its standards which ensure that students who participate in an EAEVE accredited program are prepared globally. This includes preparation for the NAVLE exam. While it is not a specific requirement of the agency, the core principals that students need to prepare for the NAVLE are taught in the classroom. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Student Achievement, Question 3

Agency Narrative

Standard 3: Curriculum, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

3.1. The curriculum must be designed, resourced and managed to ensure all graduates have achieved the graduate attributes expected to be fully compliant with article 38 of the EU Directive 2005/36/EC partially amended by directive 2013/55/EU and with Annex V.4.1. of the EU Directive 2005/36/EC.

3.2. The learning outcomes for the program must be explicitly articulated to form a cohesive framework.

3.3. Program learning outcomes must be communicated to staff and students and:

-) underpin and ensure the effective alignment of all content, teaching, learning and assessment activities of the degree program;
-) form the basis for explicit statements of the objectives and learning outcomes of individual units of study;
-) be regularly reviewed, managed and updated to ensure they remain relevant, adequate and are effectively achieved.

3.4. The Establishment must have a formally constituted committee structure (which includes effective student representation), with clear and empowered reporting lines, to oversee and manage the curriculum and its delivery. The committee(s) must:

-) determine the pedagogical basis, design, delivery methods and assessment methods of the curriculum,
-) oversee QA of the curriculum, particularly gathering, evaluating, making change and responding to feedback from stakeholders, peer reviewers and external assessors, and data from examination/assessment outcomes,

Standard 8: Student assessment, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

8.6. Program learning outcomes covering the full range of professional knowledge, skills, competences and attributes must form the basis

for assessment design and underpin decisions on progression.

Standard 11. Outcome Assessment and Quality Assurance, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

11.7 The Establishment must ensure that they collect, analyze and use relevant information for the effective management of their programs and other activities.

In the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

11.1.1. Description of the global strategy of the Establishment for outcome assessment and Quality Assurance (QA), in order to demonstrate that the Establishment:

-) operates ad hoc, cyclical, sustainable and transparent outcome assessment, QA and quality enhancement mechanisms;
-) collect, analyze and use relevant information from internal and external sources for the effective management of their programs and activities (teaching, research, services);
-) is compliant with ESG Standards.

A list of appendices must be provided by the Establishment in a separate document proving the:

-) Units of study of the core veterinary program (including clinical rotations, EPT and graduation thesis): title, reference number, ECTS value, position in curriculum (year, semester), whether it is compulsory or elective, hours and modes of instruction, learning outcomes and their alignment with the ESEVT Day One Competences.

Provided documentation of the accreditation standards (f) Student Achievement: ESEVT SOP incl. Chapter 3, Standard 3: Curriculum, 8: Student assessment, Standard 11: Outcome Assessment and Quality Assurance, and Directives 36 and 55.

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the quality of the veterinary programs and that they require the collection and evaluation of student performance outcomes. Specifically, the agency's standards require that program learning outcomes cover the full range of professional knowledge, skills, competences and attributes to form the basis for assessment design and underpin decisions on progression.

While the agency has a standard for assessing student achievement, the agency has not provided documentation demonstrating how it implements this standard (such as a completed Self Evaluation report).

Agency Response

Provided documentation of the accreditation standards (f) Student Achievement: ESEVT SOP incl. Chapter 3, Standard 3: Curriculum, 8: Student assessment, Standard 11: Outcome Assessment and Quality Assurance, Directive 36 and 55.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The reports include documentation demonstrating the agency's review of student achievement based on their standards outlined in Chapter 3, Standard 3. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Admissions and Recruiting, Question 1

Agency Narrative

Article 38 (L255/44) of the Directive 2005/36/EC states:

"2. Admission to veterinary training shall be contingent upon possession of a diploma or certificate entitling the holder to enter, for the studies in question, university establishments or institutes of higher education recognised by a Member State to be of an equivalent level for the purpose of the relevant study".

Standard 7: Student admission, progression and welfare, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

7.1. The selection criteria for admission to the program must be consistent with the mission of the Establishment. The number of students admitted must be consistent with the resources available at the Establishment for staff, buildings, equipment, healthy and diseased animals, and materials of animal origin.

7.2. In relation to enrolment, the Establishment must provide accurate information in all advertisements regarding the educational program by providing clear and current information for prospective students. Further, printed catalogue and electronic information must state the purpose and goals of the program, provide admission requirements, criteria and procedures, state degree requirements,

present Establishment descriptions, clearly state information on tuition and fees along with procedures for withdrawal, give necessary information for financial aid programs, and provide an accurate academic calendar.

7.3. The Establishment's website must mention the ESEVT Establishment's status and its last Self Evaluation Report and Visitation Report must be easily available for the public.

7.4. The selection and progression criteria must be clearly defined, consistent, and defensible, be free of discrimination or bias, and take account of the fact that students are admitted with a view to their entry to the veterinary profession in due course.

7.5. The Establishment must regularly review and reflect on the selection processes to ensure they are appropriate for students to complete the program successfully, including consideration of their potential to meet all the ESEVT Day One Competences in all common domestic species.

7.6. Adequate training (including periodic refresher training) must be provided for those involved in the selection process to ensure applicants are evaluated fairly and consistently.

7.7. There must be clear policies and procedures on how applicants with disabilities or illnesses will be considered and, if appropriate, accommodated in the program, taking into account the requirement that all students must be capable of meeting the ESEVT Day One Competences by the time they graduate.

7.8. The basis for decisions on progression (including academic progression and professional fitness to practice) must be explicit and readily available to the students. The Establishment must provide evidence that it has mechanisms in place to identify and provide remediation and appropriate support (including termination) for students who are not performing adequately.

7.9. The Establishment must have mechanisms in place to monitor attrition and progression and be able to respond and amend admission selection criteria (if permitted by national or university law) and student support if required.

7.10. Mechanisms for the exclusion of students from the program for any reason must be explicit.

7.11. Establishment policies for managing appeals against decisions, including admissions, academic and progression decisions and exclusion, must be transparent and publicly available.

7.12. Provisions must be made by the Establishment to support the physical, emotional and welfare needs of students. This includes, but is not limited to, learning support and counselling services, careers advice, and fair and transparent mechanisms for dealing with student illness, impairment and disability during the program. This shall include provision of reasonable accommodations/adjustments for disabled students, consistent with all relevant equality and/or human rights legislation.

7.13. There must be effective mechanisms for resolution of student grievances (e.g. interpersonal conflict or harassment).

7.14. Mechanisms must be in place by which students can convey their needs and wants to the Establishment.

7.15. The Establishment must provide students with a mechanism, anonymously if they wish, to offer suggestions, comments and complaints regarding compliance of the Establishment with the ESEVT standards.

11.4 The Establishment must consistently apply pre-defined and published regulations covering all phases of the student "life cycle", e.g. student admission, progression, recognition and certification.

In the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

7.1.1. Description of how the educational program proposed by the Establishment is advertised to prospective students

7.1.2. Description of the admission procedures for standard students:

-) selection criteria

-) policy for disable and ill students

-) composition and training of the selection committee ESEVT 'Uppsala

-) appeal process

-) advertisement of the criteria and transparency of the procedures

7.1.3. Description of the admission procedures for full fee students (if different from standard students)

7.1.4. Description of how the Establishment adapts the number of admitted students to the available educational resources (facilities and equipment, staff, healthy and diseased animals, material of animal origin) and the biosecurity and welfare requirements

7.1.5. Description of: -) the progression criteria and procedures for all students; -) the remediation and support for students who do not perform adequately; -) the rate and main causes of attrition; -) the exclusion and appeal procedures; -) the advertisement to students and transparency of these criteria/procedures

7.1.6. Description of the services available for students (i.e. registration, teaching administration, mentoring and tutoring, careers advice, listening and counselling, assistance in case of illness, impairment and disability, clubs and organizations, ..).

7.1.7. Prospected number of new students admitted by the Establishment for the next 3 academic years

7.1.8. Description of how (procedures) and by who (description of the committee structure) the admission procedures, the admission criteria, the number of admitted students and the services to students are decided, communicated to staff, students and stakeholders, implemented, assessed and revised Table

Provided documentation of the accreditation standards (g) Admissions and Recruiting: ESEVT SOP incl. Chapter 3, Standard 7: Student admission, progression and welfare, Standard 11: Outcome Assessment and Quality Assurance, and Directive 36

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address admission and recruiting requirements. Specifically, the agency's standards do not establish admissions requirements, but require veterinary schools to be consistent with the mission of the institution in which it is offered. The agency also requires that veterinary schools provide accurate recruiting and admissions information in all advertisements and publications.

While the agency states that this information is verified in the Self Evaluation Report, a completed report was not included demonstrating

implementation of this review.

Agency Response

Provided documentation of the accreditation standards (g) Admissions and Recruiting: ESEVT SOP incl. Chapter 3, Standard 7: Student admission, progression and welfare, Standard 11: Outcome Assessment and Quality Assurance, Directive 36.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of self evaluation report and the final report from two veterinary reviews conducted. The reports include documentation demonstrating the agency's review of admissions based on their standards outlined in Chapter 3, Standard 11. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Admissions and Recruiting, Question 2

Agency Narrative

When evaluating the Establishment against Standard 7 the ESEVT Visitation Experts examine the flowchart for student admission and progression with at least three years' worth of data:

-) Number of new veterinary students admitted by the Establishment
-) Number of veterinary undergraduate students registered at the Establishment
-) Number of veterinary students graduating annually
-) Average duration of veterinary studies
-) Number of postgraduate students registered at the Establishment

Furthermore, during the ESEVT Visitation the Experts examine:

-) the evidence provided on the regular review and subsequent reflection on the selection processes to ensure they are appropriate for students to complete the program successfully
-) that adequate training (including periodic refresher training) is provided for those involved in the selection process to ensure applicants are evaluated fairly and consistently
-) the basis for decisions on progression (including academic progression and professional fitness to practice) whether it is explicit and readily available to the students

Also the Establishment must provide evidence that it has:

-) mechanisms in place to identify and provide remediation and appropriate support (including termination) for students who are not performing adequately
-) Establishment policies for managing appeals against decisions, including admissions, academic and progression decisions and exclusion, which must be transparent and publicly available
-) Mechanisms by which students can convey their needs and wants to the Establishment
-) Mechanisms for students, anonymously if they wish, to offer suggestions, comments and complaints regarding compliance of the Establishment with the ESEVT standards

During the ESEVT Visitation the Experts examine the data provided to illustrate actions taken following the above student input including feedback to the students.

Provided documentation of the accreditation standards (g) Admissions and Recruiting: ESEVT SOP incl. Chapter 3, Standard 7: Student admission, progression and welfare and Annex 8 Template and guidelines for the writing of the Visitation Report

Analyst Remarks to Narrative

The agency has standards that require evaluation of the quality of the veterinary school's admission practices during the site visit and via self-study documentation. While it is stated that this information is collected, the agency has not provided documentation demonstrating this review (such as the completed Self Evaluation Report or onsite visit report).

Agency Response

Provided documentation of the accreditation standards (g) Admissions and Recruiting: ESEVT SOP incl. Chapter 3, Standard 7: Student admission, progression and welfare and Annex 8 Template and guidelines for the writing of the Visitation Report.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The reports include documentation demonstrating the agency's review of admissions and recruiting based on their standards outlined in Chapter 3, Standard 7. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Admissions and Recruiting, Question 3

Agency Narrative

Although veterinary curricula in Europe share many similarities amongst the different countries, as a supra-national accrediting agency, EAEVE through its accrediting process, the European System of Evaluation of Veterinary Training (ESEVT), must take account of these national variations. In addition to this diversity of the degree structure, the competent national authorities responsible for the quality of training in their respective veterinary Establishments, and also for the issuing of the veterinary degrees, differ from State to State. Governmental structures, of which universities are in general part, usually oversee the delivery of the academic degrees; those governmental bodies may be ministries of science & research, of health, or agriculture.

In practice, almost all visited and non-approved/non-accredited Establishments have undertaken every effort possible to correct deficiencies, with the aim for quality improvement and for being re-visited to reach full approval/accreditation. However, these efforts are also largely voluntary, as a negative outcome following an EAEVE evaluation has no legal effect in most Member States. Mutual recognition of veterinary degrees and free movement within the EU of graduates from non-approved/non-accredited Establishments is not impeded. There are, however, legal consequences on the national level in some Member States (Italy for instance) where competent authorities have decided not to assign students to non-EAEVE approved/accredited Establishments.

It is anticipated, and this is endorsed by the DG MARKT and DG SANTE, that such agreements will be extended to all Member State authorities and that national veterinary licensing agencies could instigate consequences of any non-approved/non-accredited status of veterinary training Establishments under their jurisdiction.

During the ESEVT Visitation the Experts examine:

-) the evidence provided on the regular review and subsequent reflection on the selection processes to ensure they are appropriate for students to complete the program successfully
-) that adequate training (including periodic refresher training) is provided for those involved in the selection process to ensure applicants are evaluated fairly and consistently

Provided documentation: ESEVT SOP incl. Annex 8 Template and guidelines for the writing of the Visitation Report

Analyst Remarks to Narrative

There are not universal admissions requirements set by EAEVE and therefore it varies by country in which the agency operates. The agency states in their narrative that the onsite visitors do reflect on the selection process set for each program and that they do look for inclusion of adequate training for the selection of the individuals for veterinary school.

Analyst Remarks to Response

Facilities, Question 1

Agency Narrative

Standard 4: Facilities and equipment, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

- 4.1. All aspects of the physical facilities must provide an environment conducive to learning.
- 4.2. The veterinary Establishment must have a clear strategy and program for maintaining and upgrading its buildings and equipment.
- 4.3. Lecture theatres, teaching laboratories, tutorial rooms, clinical facilities and other teaching spaces must be adequate in number, size and equipped for the instructional purposes and must be well maintained. The facilities must be adapted for the number of students enrolled.
- 4.4. Students must have ready access to adequate and sufficient study, self-learning, recreation, locker, sanitary and food services facilities.
- 4.5. Offices, teaching preparation and research laboratories must be sufficient for the needs of the academic and support staff.
- 4.6. Facilities must comply with all relevant legislation including health, safety, biosecurity and EU animal welfare and care standards.
- 4.7. The Establishment's livestock facilities, animal housing, core clinical teaching facilities and equipment must:
 -) be sufficient in capacity and adapted for the number of students enrolled in order to allow hands-on training for all students
 -) be of a high standard, well maintained and fit for purpose
 -) promote best husbandry, welfare and management practices
 -) ensure relevant biosecurity and bio-containment
 -) be designed to enhance learning.

4.8. Core clinical teaching facilities must be provided in a VTH with 24/7 emergency services at least for companion animals and equines, where the Establishment can unequivocally demonstrate that standard of education and clinical research are compliant with all ESEVT Standards, e.g. research-based and evidence-based clinical training supervised by academic staff trained to teach and to assess, availability for staff and students of facilities and patients for performing clinical research and relevant QA procedures. For ruminants and pigs, on-call service must be available if emergency services do not exist for those species in a VTH. The Establishment must ensure state-of-the-art standards of teaching clinics which remain comparable with the best available in the private sector.

4.9. The VTH and any hospitals, practices and facilities (including EPT) which are involved with the curriculum must meet the relevant national Practice Standards.

4.10. All core teaching sites must provide dedicated learning spaces including adequate internet access.

4.11. The Establishment must ensure students have access to a broad range of diagnostic and therapeutic facilities, including but not limited to: pharmacy, diagnostic imaging, anaesthesia, clinical pathology, intensive/critical care, surgeries and treatment facilities, ambulatory services and necropsy facilities.

4.12. Operational policies and procedures (including biosecurity, good laboratory practice and good clinical practice) must be taught and posted for students, staff and visitors.

4.13. Appropriate isolation facilities must be provided to meet the need for the isolation and containment of animals with communicable diseases. Such isolation facilities must be properly constructed, ventilated, maintained and operated to provide for animal care in accordance with updated methods for prevention of spread of infectious agents. They must be adapted to all animal types commonly handled in the VTH.

4.14. The Establishment must have an ambulatory clinic for production animals or equivalent facilities so that students can practice field veterinary medicine and Herd Health Management under academic supervision.

4.15. The transport of students, live animals, cadavers, materials from animal origin and other teaching materials must be done in agreement with national and EU standards, to ensure the safety of students and staff and to prevent the spread of infectious agents.

In the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

4.1.1. Description of the location and organization of the facilities used for the veterinary curriculum (surface area, distance from the main campus for extramural facilities, ..) (maps to be provided as appendices)

4.1.2. Description (number, size, equipment, ..) of the premises for:

-) lecturing

-) group work (seminars, tutorials, ..)

-) practical work (laboratories, rooms for clinical skills room on dummies, ..)

4.1.3. Description (number, size, species, ..) of the premises for housing:

-) healthy animals -) hospitalized animals

-) isolated animals

4.1.4. Description (number, size, equipment, species, disciplines, ..) of the premises for:

-) clinical activities

-) diagnostic services including necropsy

-) FSQ & VPH (slaughterhouses, foodstuff processing units, ..)

-) others (specify)

4.1.5. Description (number of rooms and places, ..) of the premises for:

-) study and self-learning

-) catering

-) locker rooms

-) accommodation for on call students

-) leisure

4.1.6. Description (number, size, equipment, ..) of the vehicles used for:

-) students transportation (e.g. to extramural facilities)

-) ambulatory clinics

-) live animals transportation -) cadavers transportation

4.1.7. Description of the equipment used for -) teaching purposes -) clinical services (diagnostic, treatment, prevention, surgery, anaesthesia, physiotherapy,

4.1.8. Description of the strategy and program for maintaining and upgrading the current facilities and equipment and/or acquiring new ones.

4.1.9. Description of how (procedures) and by who (description of the committee structure) changes in facilities, equipment and biosecurity procedures (health & safety management for people and animals, including waste management) are decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Provided documentation of the accreditation standards (h) Facilities: ESEVT SOP incl. Chapter 3, Standard 4 and Annex 6 and 8

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address facilities, equipment, and supplies. Specifically, the agency's standards require adequate facilities, equipment, and supplies to fulfill the veterinary schools' educational objectives for all aspects of the program.

While the agency has standards for qualifications for facilities, equipment, and supplies it states that it verifies this information in the Self Evaluation Report. No report was included in the agency's submission.

Agency Response

Provided documentation of the accreditation standard 4 and Annexes 6 and 8 of the SOP.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/easevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The reports include documentation demonstrating the agency's review of facilities and equipment based on their standards outlined in Standard 4. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Facilities, Question 2

Agency Narrative

An important part of the program at Veterinary Establishments is what is termed "External Practical Training (EPT)" or "Extra-Mural Studies (EMS)", both of which refer to undergraduates spending time away from the Establishment to gain experience within a wide range of veterinary related providers such as Farms, Abattoirs, Clinics, Government institutes etc. If EPT is widely utilized within a program, the ESEVT team need to assess what are the QA mechanisms in place to:

- Ensure a similar quality/standard of provision for a particular skill
- Train EPT providers
- Provide feedback to the Establishment
- Ensure effective management of EPT program within the Establishment

Standard 3: Curriculum, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

3.6. External Practical Training (EPT) are training activities organized outside the Establishment, the student being under the direct supervision of a non academic person (e.g. a practitioner). EPT cannot replace the core intramural training nor the extramural training under the close supervision of academic staff (e.g. ambulatory clinics, herds visits, practical training in FSQ).

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

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

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

Also, Standard 4: Facilities and Equipment prescribes that:

4.9. The VTH and any hospitals, practices and facilities (including EPT) which are involved with the curriculum must meet the relevant national Practice Standards.

Provided documentation of the accreditation standards (h) Facilities: ESEVT SOP incl. Standard 3: Curriculum and Standard 4: Facilities and Equipment

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address the quality of the veterinary programs and address the relationship between the remote sites/clinical locations and the veterinary school. Specifically, the agency's standards require that an agreement is in place with the student to provide a standardized evaluation of the remote site. Supervision of the academic staff in other locations is required.

While the agency states that they have standards for locations that are located in other places and agreements that outline the specifics of this relationship, the agency has not included documentation demonstrating implementation of this process (such as an example agreement).

Agency Response

Due to the confidential nature of agreements between an Establishment and EPT provider, documentation demonstrating implementation of this process (an example agreement) cannot be provided. However, the contracts are available for the ESEVT teams to inspect them on site during the Visitation.

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted (in prior sections of this petition). The report includes documentation indicating that the agency does review the agreements based on their standards. A specific agreement was not included due to confidentiality concerns identified by the agency. However, the inclusion of the aforementioned report is sufficient to demonstrate a review of this information has occurred, and resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Facilities, Question 3

Agency Narrative

External Practical Training (EPT) are training activities organized outside the Establishment, the student being under the direct supervision of a non- academic person (e.g. a practitioner). EPT cannot replace the core intramural training nor the extramural training under the close supervision of academic staff (e.g. ambulatory clinics, herds visits, practical training in FSQ).

Standard 3: Curriculum, of the ESEVT SOP has the following QA components assessed by the ESEVT team during the accreditation Visitation:

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

On the third Visitation day, the ESEVT Experts visit of the extra-mural facilities involved in the veterinary curriculum (clinics, dispensaries, teaching farms, slaughterhouses, ..) and verify that the above standards are compliant.

Provided documentation of the accreditation standards (h) Facilities: ESEVT SOP incl. Standard 3: Curriculum and Standard 4: Facilities and Equipment and Annexes 6 and 8 of the SOP

Analyst Remarks to Narrative

The agency requires written contacts/agreements by the veterinary school with each teaching hospital or clinical facility it uses that define the responsibilities of each party, and the agency inspects the contracts/agreements during on-site visits.

While the agency states that they have standards for locations that are located in other places and agreements that outline the specifics of this relationship, the agency has not included documentation demonstrating implementation of this process (such as an example agreement).

Agency Response

Due to the confidential nature of agreements between an Establishment and EPT provider, documentation demonstrating implementation of this process (an example agreement) cannot be provided. However, the contracts are available for the ESEVT teams to inspect them on site during the Visitation.

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided (in a prior section) a copy of the self evaluation report and the final report from two veterinary reviews conducted. The report includes documentation indicating that the agency does review of the agreements based on their standards. A specific agreement was not included due to confidentiality concerns identified by the agency. However the inclusion of the aforementioned reports is sufficient to demonstrate a review of this information has occurred, and resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Facilities, Question 4

Agency Narrative

In the ESEVT SOP External Practical Training (EPT) is defined as clinical and practical training done extra-murally and fully supervised by non academic staff (e.g. practitioners).

In the Self Evaluation Report (SER) the Establishment must provide factual information on the following points:

4.1.1. Description of the location and organization of the facilities used for the veterinary curriculum (surface area, distance from the main campus for extramural facilities, ..). Also, the Establishments must provide maps as appendices of the Establishment and the intra-mural and extra-mural facilities used in the core veterinary program.

4.1.6. Description (number, size, equipment, ..) of the vehicles used for:

-) students transportation (e.g. to extramural facilities)

Furthermore, the Establishments must provide tables indicating the number of patients seen extra-murally (in the ambulatory clinics) in the last 3 years.

ESEVT has also indicators that the VEE must state in the SER and the experts must verify on site:
I7: n° of hours of extramural practical training in FSQ and VPH

Animals/herds/units available for extramural clinical training

I12: n° of companion animal patients seen extramurally/n° of students graduating annually

I13: n° of individual ruminants and pig patients seen extramurally/n° of students graduating annually

I14: n° of equine patients seen extramurally/n° of students graduating annually

I15: n° of visits to ruminant and pig herds/n° of students graduating annually

I16: n° of visits to poultry and farmed rabbit units/n° of students graduating annually

Provided documentation of the accreditation standards (h) Facilities: ESEVT SOP incl. Standard 4: Facilities and Equipment and Annexes 4, 6 and 8 of the SOP

Analyst Remarks to Narrative

The agency has standards that require it to collect numerical data about the resources utilized at affiliated locations. However, while the agency has standards, they have not demonstrated the implementation of these standards by providing a copy of the completed Self Evaluation Report in which this information is collected.

Agency Response

Provided documentation of the accreditation standard 4 and Annex 4, 6 and 8 of the SOP.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The report includes documentation demonstrating the agency's review of resources available for facilities based on their standards outlined in standard 4. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Student Complaints

Agency Narrative

Standard 7: Student admission, progression and welfare and Standard 8: Student assessment, of the ESEVT SOP have the following QA components assessed by the ESEVT team during the accreditation Visitation:

7.11. Establishment policies for managing appeals against decisions, including admissions, academic and progression decisions and exclusion, must be transparent and publicly available.

7.15. The Establishment must provide students with a mechanism, anonymously if they wish, to offer suggestions, comments and complaints regarding compliance of the Establishment with the ESEVT standards.

8.4. Mechanisms for students to appeal against assessment outcomes must be explicit.

Provided documentation of the accreditation standards (i) Student Complaints: ESEVT SOP incl. Chapter 3, Standard 7: Student admission, progression and welfare, Standard 8: Student assessment

Analyst Remarks to Narrative

The agency has demonstrated that it has accreditation standards that effectively address student complaints related to admissions, academic and progression decisions and exclusions. Specifically, the agency's standards also require that there is a mechanism in place in which students may offer suggestions, comments, and complaints.

Analyst Remarks to Response

PART 3: ACCREDITATION PROCESSES AND PROCEDURES

Accreditation Process and Procedures, Question 1

Agency Narrative

ESEVT EXPERTS

Quality assurance within EAEVE is based on the principles found in the ESG 2015, and as a result is interwoven into the agency's SOP embracing the composition of Visiting Teams. The Team consists of six experts, including the Chair, plus one student proposed by the

International Veterinary Student Association (IVSA) and one of the ESEVT Coordinators. The students from IVSA are chosen from final year students or new graduates within one year of graduating from an accredited European Establishment. The team of experts are chosen to represent experience in the following areas:

- Basic Sciences
- Companion animals Clinical Sciences [academic]
- Food-producing animals Clinical Sciences [academic]
- Professional knowledge [practitioner]
- Food Safety and Quality and Veterinary Public Health
- Quality Assurance

The experts involved in the evaluation process are proposed by both the EAEVE member Establishments through their dean's offices, by individuals themselves and by the FVE. Internationally acknowledged experts employed in academia are only accepted when coming from EAEVE approved/accredited Establishments. FVE nominate experts in the field of clinical sciences (practitioners, official veterinarians, QA experts). All expert candidates are required to complete an application form with an up to date curriculum vitae. Applications are screened by a procedure described in a document 'ESEVT Expert Application and Acceptance Procedure' which is available on the EAEVE website.

It is a prerequisite that each of the experts go through and successfully pass an E-learning course before acceptance as an ESEVT expert and being proposed to be a formal member of a Visitation Team. The E-learning platform for the training contains Multiple Choice Questions; each candidate expert must have read and understood the ESEVT SOP 2016, including its annexes, and the EAEVE Code of Conduct. Upon successful completion, the accepted experts are listed and the document is continuously up-dated and is published on the EAEVE website. Presently there are nearly 100 experts available and listed.

The European Committee of Veterinary Education (ECOVE) selects the Experts through the EAEVE office to be part of the visiting team. As part of the quality assurance activities within EAEVE, the members have developed a code of conduct for all activities within the organisation.

To provide a level of uniformity amongst the experts on the team as they embark on the week of assessment, and also to produce a similar level of uniformity amongst other ESEVT visitations, the Coordinator holds a briefing session at this time. The main areas covered are:

- What are the main duties of all Visitors on site
- What is expected from all Visitors concerning the Visitation
- What is expected from all Visitors concerning the writing of the Visitation Report
- What is expected about the exit presentation on Friday morning
- What is expected from all Visitors after the Visitation.

STAKEHOLDERS

The accreditation standards are laid down in the Standard Operating Procedures (SOP) of the European System of Evaluation of Veterinary Training (ESEVT) which is managed by the European Association of Establishments for Veterinary Education (EAEVE) in association with the Federation of Veterinarians of Europe (FVE). The current SOP 2016 was approved by the EAEVE General Assembly on 12 May 2016 and by the FVE Board on 12 April 2016. The annexes of the document are approved by the EAEVE Executive Committee.

A revision of the SOP involves a series of iterations with detailed input from stakeholders such as EAEVE member Establishments, committee members, and FVE (UEVP, EVERI, UEVH, EASVO), EBVS, IVSA.

The external quality assurance criteria used by EAEVE are defined and publicly available. The criteria are summarized in the SOP and are based on the requirements of the European Directives 2005/36/EC and 2013/55/EU, as well as the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015). All these documents are available on the EAEVE website.

ECOVE

The European Committee of Veterinary Education (ECOVE) is an independent decision maker within EAEVE. It is the decision-making body in the framework of ESEVT.

ECOVE consists of 7 members coming from 7 different countries; all have to have been experts of at least 2 on-site Visitations of veterinary teaching Establishments within the past 5 years before taking office. Four members are appointed by the Executive Committee (ExCom) of EAEVE; 3 members are nominated by the Board of the FVE. The Chair and vice chair are elected by its members from among its members for a 2-year term, renewable once. While serving on the Committee, members shall not act as team members in any full on-site Visitation.

The primary tasks of ECOVE are:

- Approve the Visitation Programs of Veterinary Educational Establishments for Evaluation,
- Approve the selection of both Chair and members of visiting teams,
- Make the final decision on the visitation report, giving full justice to the suggestions made by the Chair and his/her visiting team, and based thereupon, decide whether "Accreditation", "Conditional Accreditation" or "Non-Accreditation" should be assigned to the Establishment, or any other approval status, as defined in the SOP,
- Decisions concerning the results of evaluations and accreditations are based uniquely on the suggestions made by the visiting team in the visitation report, the Self Evaluation Report (SER) and on the verbal report given by the Chair. In the case of voting, each full member

has one vote; a simple majority prevails; the Chair has a casting vote.

EAEVE has a Committee of Internal Quality Assurance (CIQA). The main tasks of CIQA is checking the procedures of EAEVE from a QA point, giving suggestions for improvement and providing guidance on QA. CIQA performs a critical review on the development, results and persons involved in all steps of the annual evaluation processes, including the final decisions taken by European Committee of Veterinary Education (ECOVE). CIQA's review includes as a minimum an evaluation of the procedures followed during the on-site visits, the composition and quality of the site visit reports and the quality assurance feed-back from Establishments and team members. Furthermore, CIQA looks for an equal application of the system to all the members without any type of discrimination and checks potential conflicts of interest.

Provided documentation of the Accreditation Process and Procedures: ESEVT SOP incl. Chapter 2 and Annex 15;

-ECOVE Rules of Operation

-EAEVE Code of Conduct

-EAEVE list of experts

-CIQA Rules of Operation

Analyst Remarks to Narrative

The agency provided its requirements regarding the qualification and training of the individuals who participate in on-site evaluations of veterinary schools, the individuals who establish the accreditation standards for veterinary schools, and the individuals who decide whether a specific veterinary school should be accredited.

On-site visitors (exhibit 14) comprise a panel with expertise in veterinary basic sciences, companion animals clinical sciences [academic], food-producing animals clinical sciences [academic], professional knowledge [practitioner], food safety and quality and veterinary public health, and quality assurance. A briefing session is provided to all on-site visitors on an initial and continuing basis.

Analyst Remarks to Response

Accreditation Process and Procedures, Question 2

Agency Narrative

All ESEVT Experts must sign a declaration confirming that they have no conflict of interest with the visited Establishment and a commitment to strictly follow the ESEVT SOP and the EAEVE code of Conduct.

By signing the form, the Experts declare that they have no direct connection to personal interest in the Establishment to be visited; not having studied at or having been employed by the Establishment; none of the close family are studying at or being employed by the Establishment; that the expert has neither received nor been promised any gifts or benefits of any nature by the Establishment; that the expert is not a citizen of the country where the Establishment to be visited is situated in.

In case the visited Establishment considers that there is a conflict of interest with one of the selected Visitors, it may inform ECOVE through the EAEVE Office 2 weeks after receiving the Visitation team list at the latest. If the conflict of interest is obviously justified by the Establishment, ECOVE decides to replace this Visitor.

Further to the ESEVT Experts, the ECOVE members must also sign a declaration before their meeting and state the lack of conflict of interest e.g. they are not a national of the country in which the Establishment in question is located or currently working in that country or having worked or studied at the Establishment in question for a significant period of time. In case of conflict of interest, the ECOVE Member in question must not participate in the evaluation, has no voting rights and shall leave the room and shall be replaced by an alternate member.

Provided documentation of the Accreditation Process and Procedures: ESEVT SOP incl. Annex 15. Declaration stating the lack of conflicts of interest with the visited Establishment and the commitment to strictly respect the ESEVT SOP and the EAEVE Code of Conduct

Analyst Remarks to Narrative

The agency has and provided its standards regarding conflict of interest and the procedures the agency uses to ensure the individuals involved in the accreditation process do not have a conflict of interest.

However, while the agency has explained that they have standards for preventing conflict of interest it has not provided documentation demonstrating the application of this standard.

Agency Response

Provided documentation of the Accreditation Process and Procedures: ESEVT SOP incl. Annex 15. Declaration stating the lack of conflicts of interest with the visited Establishment and the commitment to strictly respect the ESEVT SOP and the EAEVE Code of Conduct.

In addition, two signed (and anonymized) Conflict of Interest statements for the Hanover Visitations and two signed (and anonymized) Conflict of Interest statements for the May 2017 ECOVE meeting are provided.

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided signed conflict of interest statements from both ECOVE members and from its ESEVT experts (who conduct the on site review). The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Accreditation Process and Procedures, Question 3

Agency Narrative

ESEVT acting as the accrediting arm of the independent decision-making body, ECOVE, is able to offer a visitation scheme to the members of EAEVE to consistently evaluate the Establishments in their ability to deliver such quality aspects. This consistent evaluation scheme operating within the EAEVE/FVE standard operating procedures (SOP), supports such harmonization of veterinary education and in that way, improves trust in veterinary services throughout the European Community.

The external quality assurance criteria used by EAEVE are defined and publicly available. The criteria are summarized in the SOP and are based on the requirements of EU Directives 2005/36/EC and 2013/55/EU and the ESG 2015. All these documents are available on the EAEVE website.

The ESEVT evaluation process is a fully transparent accreditation procedure based on a system of Visitations together with periodic Interim Reports provided by the Establishment. It is compulsory for EAEVE members, as stated in the EAEVE statutes. All documents and results of the evaluations done by EAEVE and the activity of the Association are publicly available on the homepage, so not only the evaluation processes, the Standard Operating Procedure, rules, self-evaluation reports, final reports and results but most documents of the Association can be assessed.

With respect to the consistency of the application of the standards by the ESEVT Experts during a Visitation, the whole team (8 members) must reach a unanimous decision on the grade of compliance of the Establishment with the 90 standards (11 standards and sub-standards) compiled in the rubrics in the SOP.

EAEVE applies fair, transparent and evidence-based judgments on the evaluations of veterinary Establishments. In addition, EAEVE has a well-developed and transparent appeal mechanism and is determined to actively promote the QA culture in Higher Education in Europe and beyond.

For the Establishments not agreeing with or not accepting the decision of ECOVE, a formal appeal mechanism is in place. Any Establishment may appeal an ECOVE decision. If ECOVE rejects the appeal, an independent Appeal Panel will be set up whose decision will be final. The appeal mechanism is described in chapter 9.7 and Chapter 1.8 of the SOP .

Being an agency involved primarily in evaluating and assessing teaching quality and outcomes assessment of its member Establishments, EAEVE submits itself to an internal quality assessment and assurance control. To that end the Committee on Internal Quality Assessment (CIQA) was brought into existence in 2009. CIQA consists of five members not involved in any other EAEVE governance bodies and while "owned" by EAEVE is independent in formulating its opinion. CIQA's responsibilities (amongst others) are:

- To direct the development, implementation, revision and improvement of quality in the ESEVT
- To present to the EAEVE GA an annual report on the fulfilment of the policies and objectives of quality, the follow up system and the proposals for improvement
- To control the effective management of the post-on-site-Visitation questionnaire
- To perform a critical review on the development, results and personnel involved in all the steps of the annual evaluation processes, including the final decisions taken by ECOVE, looking for the equal application of the system to all the members without any type of discrimination, and controlling absence of conflict of interest. The review should include as a minimum an evaluation of the procedures followed at the site Visitations
- The composition and quality of the site Visitation reports
- The quality assurance feed-back from faculties and team members
- To evaluate the composition of the visiting groups.

External QA is at the heart of EAEVE's essential purpose. As such, it remains vital that EAEVE retains an ongoing ambition to reflect on the effectiveness of its own external QA procedures by delivering a series of analyses. EAEVE relies on an integrated system of checks and balances which are widely discussed and then implemented by:

- The General Assembly of EAEVE
- CIQA
- ECOVE
- Assessment of visitations by the Experts within that particular visitation
- Assessment of visitations by the Establishment itself

Even though there exists no formal requirement for EAEVE to undergo a periodic external review, EAEVE considers it vital to demonstrate that its activities comply with international standards such as the ESG 2015. EAEVE was assessed by an ENQA review panel in November

2017 and got the accreditation by the ENQA Board on 19th April 2018 (see all documents related to the accreditation of EAEVE by ENQA (<https://www.eaeve.org/about-eaeve/quality-assurance/external-quality-assurance.html>))

As a QA agency working for more than 32 years in the accreditation of Establishments for Veterinary Education in Europe and beyond, EAEVE has learnt that QA is a continuous process that requires, amongst many actions, of the periodic update of the procedures (SOP), improvement of the recruitment and training of experts, and fulfilment of QA Standards (ESG 2015). EAEVE's constant commitment to improve the ESEVT, makes it being perceived as a reliable, transparent and easy-going process that has increased substantially the quality of the Establishments for Veterinary Education in Europe, contributing to the harmonisation of Veterinary Education, as stated by the European Coordinating Committee on Veterinary Education (ECCVT):

http://www.eaeve.org/fileadmin/downloads/eccvt/2015_1_Position_on_ESEVT_FINAL.pdf

Provided documentation of the Accreditation Process and Procedures: ESEVT SOP, CIQA Rules of Operation, EAEVE Policy on Quality Assurance

Analyst Remarks to Narrative

The agency provided its policies, procedures and guidance to ensure the consistent application of standards. The agency has demonstrated that it has and applies effective controls against the inconsistent application of its standards, to include: written standards, policies, and procedures; guidance provided via written materials; standardized on-site review documents; training of onsite visitors and members.

Analyst Remarks to Response

Staff Conclusion: Comprehensive response provided

Accreditation Process and Procedures, Question 4

Agency Narrative

The ESEVT evaluation process is a fully transparent accreditation procedure based on a system of Visitations together with periodic Interim Reports provided by the Establishment. It is compulsory for EAEVE members, as stated in the EAEVE statutes.

To be accredited by ESEVT, a veterinary degree provided by an Establishment must meet all the standards set out in the SOP, in order to be compliant with the EU Directives on the recognition of professional qualifications and the ESG. If an establishment offers more than one veterinary program, e.g. in different languages, all programs must be evaluated. Four types of evaluation are organized by ESEVT, i.e.:

1. Full Visitation
2. Re-visitation
3. Consultative Visitation
4. Interim Report

The major aim of the Full Visitation is to establish whether the Establishment complies with the ESEVT Standards described in chapter 3 of the SOP. During the 5-day evaluation, the Visitation Team must verify and supplement the information presented in the Self Evaluation Report (SER) by visiting the facilities, consulting the databases and meeting the relevant individuals. The program of the Visitation must be in compliance with the timetable and guideline proposed at Annex 7 of the SOP. The Visitation Team must meet groups of teaching staff who represent a broad range of disciplines and levels of experience, as well as support staff, students and external stakeholders. An opportunity is provided during the Visitation for any staff member or student to meet confidentially with the Visitation Team and/or to send confidential communications to the Team by e-mail.

Two month before the Visitation, at the latest, the Establishment must submit its SER. The SER must be the result of an objective, accurate and in-depth review of the Establishment and the education it provides. It must contain accurate factual information together with a SWOT analysis, including the measures proposed to address the weaknesses and threats identified by the Establishment. Major points for the SER to follow include:

- The SER must demonstrate how the Establishment meets the ESEVT Standards described in the SOP
- The SER must closely follow the template and guidance provided in Annex 6 of the current SOP

Upon the Visitation, a Visitation Report must be completed in agreement with the template and guidance provided in Annex 8 of the SOP.

Provided documentation of the Accreditation Process and Procedures: ESEVT SOP incl. Chapter 2 and Annex 6. Template and guidelines for the writing of the SER, Annex 7. Timetable and guidelines for the Visitation, Annex 8. Template and guidelines for the writing of the Visitation Report.

Furthermore, the SER and Visitation Reports of all EAEVE member Establishments are publicly available on the EAEVE website (<https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>)

Analyst Remarks to Narrative

The agency provided its standards to ensure the consistent application of standards for onsite visitations that it conducts to veterinary programs.

While the agency has standards in place, it has not provided an actual copy of a completed self evaluation report that demonstrates how it applies the standards in this section.

Agency Response

Provided documentation of the Accreditation Process and Procedures: ESEVT SOP, chapter 2, incl. Annex 6. Template and guidelines for the writing of the SER, Annex 7. Timetable and guidelines for the Visitation, Annex 8. Template and guidelines for the writing of the Visitation Report.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esevt/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The report includes documentation demonstrating the agency conducts its site visit reviews based on their standards. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Accreditation Process and Procedures, Question 5

Agency Narrative

Accredited Establishments undergo mandatory (full) Visitations every 7 years. Conditional Accreditation (in case of 1 single Major Deficiency) is valid for 3 years from the date of the (full) Visitation. When the validity period is exceeded, the Establishment automatically reverts to Non-Accreditation status.

Re-Visitation:

Two years after the previous (full) Visitation at the latest, an Establishment that considers that it has rectified its Major Deficiencies may ask ECOVE through the EAEVE Office for a Re-visitation. The duty of the Visitors during the Re-Visitation is mainly to evaluate whether the Major Deficiencies identified by ECOVE after the Visitation have been corrected. It is also to evaluate if an on-going process is in place in order to correct the Minor Deficiencies.

The Re-visitation Team is composed of a minimum of 2 Visitors, i.e. 1 member of the previous Visitation Team (most often the Chair, who will chair the Re-visitation Team) and a Coordinator. The number and specific expertise of Visitors are decided by ECOVE on the basis of the number, type and complexity of the Major Deficiencies identified during the (full) Visitation.

For each revisited Establishment, the ECOVE analyses the Re-visitation Report and decides to confirm or amend the recommendations proposed by the Re-visitation Team. The new granted status lasts 7 years from the date of the original (full) Visitation (and not from the date of the Re-visitation).

Interim Report:

In the case of Non-Accreditation (in case of several Major Deficiencies) or Conditional Accreditation Establishments, Establishments must submit regular follow-up reports (Interim Report) 3,5 years after the (full) Visitation to EAEVE in order to monitor the progress in the correction of Minor Deficiencies and to identify the occurrence of potential new issues. The Interim Report must include:

-) the name and details of the current Establishment's Head;
-) any major changes in each ESEVT Standard since the previous SER;
-) progress in the correction of Deficiencies (if any) and plans for the near future;
-) the expected date of the next evaluation (Consultative Visitation, Visitation or Re-visitation);
-) updated list of Indicators

The Interim Report must be completed in agreement with the template and guidance provided in Annex 14 of the SOP 2016. After being reviewed by an ESEVT Coordinator designated by ECOVE, the Interim Report is sent by the EAEVE Office to ECOVE for consideration during its next meeting. In case of a lack of Interim Report or evidences in the Interim Report of the occurrence of potential major issues, ECOVE may send a warning to the Establishment.

Provided documentation of the Accreditation Process and Procedures: ESEVT SOP chapter 2, incl. Chapter 2.2. Re-Visitation and Chapter 2.4 Interim Report

Analyst Remarks to Narrative

The agency provided its standards to ensure the consistent application of standards for monitoring and evaluation of veterinary programs.

While the agency has standards in place, it has not provided an actual copy of a completed self evaluation report that demonstrates how it applies the standards in this section.

Agency Response

Provided documentation of the Accreditation Process and Procedures: ESEVT SOP chapter 2, incl. Chapter 2.2. Re-Visitation and Chapter 2.4 Interim Report.

In addition, the Self-Evaluation Report and Final Report of the Lisbon and VetSuisse Visitations as issued by ECOVE in November 2017 are provided.

All further Self-Evaluation Reports and Final Reports are publicly available on the EAEVE website: <https://www.eaeve.org/esept/ser-and-visitation-report-of-visited-establishments.html>

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of the self evaluation report and the final report from two veterinary reviews conducted. The reports include documentation demonstrating the agency monitors each veterinary program based on their standards outlined in Chapter 2 of the agency's SOP. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Accreditation Process and Procedures, Question 6

Agency Narrative

Interim Report:

In the case of Non-Accreditation (in case of several Major Deficiencies) or Conditional Accreditation Establishments, Establishments must submit regular follow-up reports (Interim Report) 3,5 years after the (full) Visitation to EAEVE in order to monitor the progress in the correction of Minor Deficiencies and to identify the occurrence of potential new issues. The Interim Report must include:

-) the name and details of the current Establishment's Head;
-) any major changes in each ESEVT Standard since the previous SER;
-) progress in the correction of Deficiencies (if any) and plans for the near future;
-) the expected date of the next evaluation (Consultative Visitation, Visitation or Re-visitation);
-) updated list of Indicators

The Interim Report must be completed in agreement with the template and guidance provided in Annex 14 of the SOP 2016. After being reviewed by an ESEVT Coordinator designated by ECOVE, the Interim Report is sent by the EAEVE Office to ECOVE for consideration during its next meeting. In case of a lack of Interim Report or evidences in the Interim Report of the occurrence of potential major issues, ECOVE may send a warning to the Establishment.

Provided documentation of the Accreditation Process and Procedures: ESEVT SOP incl. Chapter 2.4 Interim Report

Analyst Remarks to Narrative

The agency provided its standards to ensure the consistent application of standards for substantive changes made by the veterinary programs.

While the agency has standards in place, it has not provided an actual copy of a completed self evaluation report that demonstrates how it applies the standards in this section.

Agency Response

Provided documentation of the Accreditation Process and Procedures: ESEVT SOP chapter 2 incl. Chapter 2.4 Interim Report.

In addition, the Interim Report of Turin including the Review is provided.

Analyst Remarks to Response

In response to the draft staff analysis, the agency has provided a copy of an interim report from a veterinary program. The report includes documentation demonstrating the agency reviews programs for substantive change. The inclusion of this information resolves the concerns raised in the draft staff analysis.

Staff Conclusion: Comprehensive response provided

Accreditation Process and Procedures, Question 7

Agency Narrative

It is vital that the Standards that form the basis of the ESEVT process are fully understood by stakeholders, especially including the visited Establishments, and the processes involved in their assessment are also fully understood by both the establishments and the expert assessors. It is also obviously vital that decisions made following such assessments must be reliable and similarly applied on all visitations. The success of such an approach should convince the body of stakeholders, involved in both the delivery and then

dependence on veterinary higher education, that the evaluation of the standards is both fair and “standardized” across the sector.

With respect to the consistency of the application of the standards by the team of visitors, the whole team (8 members) must reach a unanimous decision on the grade of compliance of the Establishment with the 90 standards (11 standards and sub-standards) compiled in the rubrics in the SOP. Such an approach on the grade of compliance by the establishment, based on scoring the rubrics, remains the most effective and objective way for the team to reach collective decisions, adopted not only by EAEVE but also by other International Accrediting bodies of Veterinary Establishments outside Europe (ABVC Australasian Boards Veterinary Council and AVMA, American Veterinary Medical Association).

Decisions concerning the results of evaluations and accreditations are based uniquely on the suggestions made by the visiting team in the visitation report, the Self Evaluation Report (SER) and on the verbal report given by the Chair at the ECOVE meeting. ECOVE must base its decision on the SOP which was valid at the time of the agreement between the Establishment and EAEVE. For each visited Establishment, the ECOVE analyses and discusses the draft D Visitation Report and decides to confirm or amend the recommendations of the Visitation Team. The Chairperson and/or the Coordinator must be available to ECOVE for discussing the Visitation Report and for answering any questions that may arise. The Major Deficiencies must be clearly listed in agreement with a standardized terminology and the Establishment's status clearly identified, i.e.: -) Accreditation in case of no Major Deficiency; -) Conditional Accreditation in case of 1 single Major Deficiency; -) Non-Accreditation in case of several Major Deficiencies.

All assessment reports and all decisions of EAEVE on the basis of these reports are made public by EAEVE as well as by the visited Establishment.

The Committee on Internal Quality Assurance of EAEVE (CIQA) consists of five members not involved in any other EAEVE governance bodies and while “owned” by EAEVE is independent in formulating its opinion. CIQA's main responsibilities (amongst others) are:

- To direct the development, implementation, revision and improvement of quality in the ESEVT;
- To present to the EAEVE GA an annual report on the fulfilment of the policies and objectives of quality, the follow up system and the proposals for improvement;
- To control the effective management of the post-on-site-Visitation questionnaire;
- To perform a critical review on the development, results and personnel involved in all the steps of the annual evaluation processes, including the final decisions taken by ECOVE, looking for the equal application of the system to all the members without any type of discrimination, and controlling absence of conflict of interest. The review should include as a minimum an evaluation of the procedures followed at the site Visitations;
- The composition and quality of the site Visitation reports;
- The quality assurance feed-back from faculties and team members;
- To evaluate the composition of the visiting groups.

Post Visitation questionnaires form an important part of the quality assurance tools utilized for internal quality assurance in EAEVE. The questionnaires are filled in by both the visited Establishment and the members of the team. The questionnaire involves critique of the team, individuals and procedures, and invites the visited Establishment to suggest improvements. All evaluation forms are forwarded to and collected by the EAEVE office for analysis (internal feedback mechanism) and final evaluation by CIQA. CIQA in turn reports outcomes and makes suggestions for changes and improvements and checks their effectuation (internal reflection mechanism). A feedback evaluation system has been implemented and is used on a regular basis.

CIQA has the responsibility of analyzing and then reporting the various feedbacks following a visitation to an Establishment, feedback from both the visiting team members as well as from the Establishment itself. For example, in 2016/2017 CIQA analyzed 31 separate feedback forms from Establishments and 58 separate feedback forms from individual team members.

Even though there exists no formal requirement for EAEVE to undergo a periodic external review, EAEVE considers it vital to demonstrate that its activities comply with international standards. It was confirmed by the European Association for Quality Assurance in Higher Education (ENQA) in April 2018 that EAEVE is compliant with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015) which may stimulate trust in the ESEVT and support and add to the legitimacy of EAEVE as the only international or EU transnational non-governmental accrediting organisation for veterinary medicine within Europe.

Provided documentation of the Accreditation Process and Procedures: ESEVT SOP incl. Annex 8.13 ESEVT Rubrics, Annex 16., CIQA Rules of Operation, CIQA annual reports

Analyst Remarks to Narrative

The agency has explained in its narrative about how it has standards to ensure that all of its assessments are reliable and applied similarly to all of the veterinary programs. The agency further explains the role of the Committee on Internal Quality Assurance (CIQA) in providing oversight. The agency has provided examples of the annual reports collected from the CIQA that demonstrate how reviews for ensuring consistency happen within the agency.

PART III: THIRD PARTY COMMENTS

The Department did not receive any written third - party comments regarding this agency.

