



**European System of Evaluation
of Veterinary Training
(ESEVT)**

Manual of Standard Operating Procedure

**EUROPEAN ASSOCIATION OF ESTABLISHMENTS
FOR VETERINARY EDUCATION
(EAEVE)**

**FEDERATION OF VETERINARIANS
OF EUROPE
(FVE)**

Annex 8. Template and guidelines for the writing of the Visitation Report

(as approved by the EAEVE Executive Committee on 11 May 2016)

**European Association
of Establishments for Veterinary Education**

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



VISITATION REPORT

To *(official name and location of the Establishment)*

On *(date of Visitation)*

By the Visitation Team :

(First name, name, city, country): Visitor in Basic Sciences

(First name, name, city, country): Visitor in Clinical Sciences in Companion Animals

(First name, name, city, country): Visitor in Clinical Sciences in Food-Producing Animals

(First name, name, city, country): Visitor in Food Safety and Quality

(First name, name, city, country): Visitor in Quality Assurance

(First name, name, city, country): Practitioner

(First name, name, city, country): Student

(First name, name, city, country): ESEVT Coordinator

(Indicate the Chairperson)

Forewords (to be read by each Visitor before the writing of the Visitation Report)

The Visitation Report must be written in agreement with the ESEVT SOP (see chapter 2 paragraph 1.5). The version of the SOP used to write the Visitation Report must coincide with the version the Establishment followed when preparing its SER, as stated in the official Visitation agreement.

2,5 weeks before the Visitation at the latest, each Visitor must have read the full SER, completed the chapters which for he/she is the principal writer in the draft Visitation Report (at least the sections 'Findings' and 'Questions to be asked/issues to be clarified during the Visitation') and send his/her contribution to the Coordinator. Then, the Coordinator puts them together as Draft A, which is sent to all members of the Visitation Team.

The globalised list of questions is sent by the Coordinator to the Establishment before the start of the Visitation in order to allow the Liaison Officer sufficient time to collect the required data.

The Visitation Team is responsible for making an independent assessment and proposing an unambiguous statement on the adequacy of the Establishment against each ESEVT Standard, i.e. compliant, partly compliant (one or more Minor Deficiencies that does not significantly affect the quality of education and the Establishment's compliance with the ESEVT Standards) or not compliant (one or more Major Deficiencies that affect the quality of education and the Establishment's compliance with the ESEVT Standards).

Files must be written in plain UK English. Chapters should be consolidated but concise, i.e. by strictly comparing the on site situation to the EAEVE SOP and by avoiding redundant paragraphs (e.g. information already provided in the SER or in another paragraph of the report). Personal comments must be avoided in the 'Findings' section and findings must be avoided in the 'Comments' section. The international system of units (SI) and the ESEVT terminology must be used (e.g. Establishment instead of faculty/school/department, ..).

If some indicators are out of range, it is expected from the relevant Visitor to assess if it affects the quality of the education and the compliance of the Establishment with the SOP.

In case of non-compliance with the ESEVT Standards, the Major Deficiencies must be clearly listed in agreement with a standardised terminology.

The draft A Visitation Report (based on findings, comments, suggestions and identification of potential deficiencies) is amended during the Visitation by each Visitor, based on the on-site findings and the discussions within the Visitation Team. The resulting Draft B must be completed before the end of the Visitation and sent to the Coordinator.

The texts in italic in this template must be deleted in the final copy of the Visitation Report.

Contents of the Visitation Report

Introduction

1. Objectives and Organisation

2. Finances

3. Curriculum
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 10. Research programmes, continuing and postgraduate education
 11. Outcome Assessment and Quality Assurance
 12. ESEVT Indicators
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Introduction

Brief history of the Establishment and of its previous ESEVT Visitations (*if any*)

Main features of the Establishment

Main developments since the last Visitation (*or, if there has not been a previous one, in the period since the veterinary degree programme began*)

Version and date of the ESEVT SOP which is valid for the Visitation

1. Objectives and Organisation (see Standards 1.1 to 1.6 in Chapter 3)

1.1. Findings

1.1.1. Brief description of the Strategic Plan

Is a SWOT analysis available?

Are the mission and the objectives clearly described?

1.1.2. Brief description of the Operating Plan

Are there timeframes and indicators of achievement of the objectives?

1.1.3. Brief description of the organisation of the Establishment

General organisation (departments/units/clinics, ..)

Operating bodies (councils/boards/committees, ..)

1.1.4. Brief description of the process and the implication of staff, students and stakeholders in the development, implementation, assessment and revision of the Strategic Plan and organisation of the Establishment

1.2. Comments

1.3. Suggestions for improvement

1.3'. Questions to be asked to the Establishment

1.3". Issues to be clarified on-site

1.4. Decision of the Visitation Team, *i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

2. Finances (see Standards 2.1 to 2.5 in Chapter 3)

2.1. Findings

2.1.1. Brief description of the global financial process of the Establishment and its autonomy on it

2.1.2. Brief description of the budget (expenditures, revenues, balance) of the last 3 years

2.1.3. Brief description of the projected budget (expenditures, revenues, balance) of the next 3 years

2.1.4. Brief description of the planned or on-going investments

2.1.5. Brief description of the process and the implication of staff, students and stakeholders in the development, implementation, assessment and revision of the budget of the Establishment

2.2. Comments

2.3. Suggestions for improvement

2.3'. Questions to be asked to the Establishment

2.3". Issues to be clarified on-site

2.4. Decision of the Visitation Team, *i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

3. Curriculum (see Standards 3.1 to 3.10 in Chapter 3)

3.1. General curriculum

3.1.1. Findings

3.1.1.1. Brief description of the educational aims and strategy in order to propose a cohesive framework and to achieve the learning outcome

3.1.1.2. Brief statement if all EU-listed subjects are taught in the core curriculum to each student (independently of the tracking system)

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

3.1.1.4. Description of the selection procedures of the Electives by the students and the degree of freedom in their choice (*e.g. what happens when too many students select one specific track*)

3.1.1.5. Brief description of the process and the implication of staff, students and stakeholders in the development, implementation, assessment and revision of the curriculum

3.1.2. Comments

3.1.3. Suggestions of improvement

3.1.3'. Questions to be asked to the Establishment

3.1.3". Issues to be clarified on-site

3.1.4. Decision of the Visitation Team, *i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

3.2. Basic sciences

3.2.1. Findings

3.2.1.1. Brief description of the theoretical and practical education in basic sciences

3.2.2. Comments

3.2.3. Suggestions of improvement

3.2.3'. Questions to be asked to the Establishment

3.2.3". Issues to be clarified on-site

3.2.4. Decision of the Visitation Team, *i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

3.3. Clinical Sciences in companion animals (including equine and exotic pets)

3.3.1. Findings

3.3.1.1. Brief description of the theoretical, practical and clinical education in Clinical Sciences in companion animals

3.3.1.2. Description of the core clinical exercises/practicals/seminars in companion animals prior to the start of the clinical rotations

3.3.1.3. Description of the core clinical rotations and emergency services (*both intramural VTH and ambulatory clinics*) in companion animals and the direct involvement of undergraduate students in it (*responsibilities, hands-on versus observation, report writing, ..*)

3.3.2. Comments

3.3.3. Suggestions of improvement

3.3.3'. Questions to be asked to the Establishment

3.3.3". Issues to be clarified on-site

3.3.4. Decision of the Visitation Team, *i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

3.4. Clinical Sciences in food-producing animals (including Animal Production)

3.4.1. Findings

3.4.1.1. Brief description of the theoretical, practical and clinical education in Clinical Sciences in food-producing animals

3.4.1.2. Description of the core clinical exercises/practicals/seminars in food-producing animals prior to the start of the clinical rotations

3.4.1.3. Description of the core clinical rotations, emergency services (*both intramural VTH and ambulatory clinics*) and herd health visits in food-producing animals (*i.e. ruminants, pigs and poultry*) and the direct involvement of undergraduate students in it (*responsibilities, hands-on versus observation, report writing, ..*)

3.4.1.4. Brief description of the theoretical and practical education in Animal Production

3.4.2. Comments

3.4.3. Suggestions of improvement

3.4.3'. Questions to be asked to the Establishment

3.4.3". Issues to be clarified on-site

3.4.4. Decision of the Visitation Team, *i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

3.5. Food Safety and Quality (FSQ)

3.5.1. Findings

3.5.1.1. Brief description of the theoretical and practical education in FSQ

3.5.1.2. Description (*timing, group size per teacher,..*) of the teaching in slaughterhouses and in premises for the production, processing, distribution/sale or consumption of food of animal origin

3.5.2. Comments

3.5.3. Suggestions of improvement

3.5.3'. Questions to be asked to the Establishment

3.5.3". Issues to be clarified on-site

3.5.4. Decision of the Visitation Team, i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.

3.6. Professional knowledge

3.6.1. Findings

3.6.1.1. Brief description of the theoretical and practical education in professional Knowledge

3.6.1.2. Brief description of the organisation, selection procedures and supervision of the EPT

3.6.1.3. Description of the procedures (*e.g. logbooks*) used to ascertain the achievement of each core practical/clinical activity (*pre-clinical, clinical, ambulatory clinics, EPT*) and professional knowledge by each student (independently of the tracking system)

3.6.2. Comments

3.6.3. Suggestions of improvement

3.6.3'. Questions to be asked to the Establishment

3.6.3". Issues to be clarified on-site

3.6.4. Decision of the Visitation Team, i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.

4. Facilities and equipment (see Standards 4.1 to 4.15 in Chapter 3)

4.1. Findings

4.1.1. Brief description of the location and organisation of the facilities used for the veterinary curriculum

4.1.2. Description of the adequacy for the veterinary training of the premises for:

-) lecturing, group work and practical work
-) housing healthy, hospitalised and isolated animals
-) clinical activities, diagnostic services and necropsy
-) FSQ & VPH
-) study and self-learning, catering, locker rooms, accommodation for on call students and leisure

4.1.3. Description of the adequacy for the veterinary training of the vehicles used for students transportation, ambulatory clinic, live animals and cadavers transportation

4.1.4. Description of the adequacy for the veterinary training of the equipment used for teaching purposes and clinical services

4.1.5. Description of the adequacy of the biosecurity rules in the Establishment

4.1.6. Brief description of the process and the implication of staff, students and stakeholders in the development, implementation, assessment and revision of facilities, equipment and biosecurity rules of the Establishment

4.2. Comments

4.3 Suggestions for improvement

4.3'. Questions to be asked to the Establishment

4.3". Issues to be clarified on-site

4.4. Decision of the Visitation Team, i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.

5. Animal resources and teaching material of animal origin (see Standards 5.1 to 5.6 in Chapter 3)

5.1. Findings

5.1.1. Brief description of the global strategy of the Establishment about the use of animals and material of animal origin for the acquisition by each student of Day One Competences

5.1.2. Description of the adequacy for the veterinary training of the enrolled students of:

-) the number and diversity of cadavers and material of animal origin used in anatomy, necropsy and FSQ;
-) the number and diversity of healthy live animals used for pre-clinical training;
-) the number of visits in herds/flocks/units of food-producing animals;
-) the number and diversity of patients examined/treated by each student;
-) the balance between species, between clinical disciplines, between first opinion and referral cases, between acute and chronic cases, between consultations and hospitalisations, between individual medicine and population medicine

5.1.3. Description of the organisation and management of the VTH and ambulatory clinics

5.1.4. Description of the group size for the different types of clinical training and of the hands-on involvement of students in clinical procedures in the different species

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

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

5.1.7. Brief description of the process and the implication of staff, students and stakeholders in the development, implementation, assessment and revision of 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

5.2. Comments

5.3. Suggestions for improvement

5.3'. Questions to be asked to the Establishment

5.3". Issues to be clarified on-site

5.4. Decision of the Visitation Team, *i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

6. Learning resources (see Standards 6.1 to 6.4 in Chapter 3)

6.1 Finding

6.1.1. Brief description of the main library (facilities, equipment, staff, (e)books and (e)periodicals, software for databases)

6.1.2. Description of the available electronic information and e-learning courses, and their role in supporting student learning and teaching in the core curriculum

6.1.3. Description of the accessibility for staff and students to electronic learning resources both on and off campus

6.1.4. Description of how the procedures for access to and use of learning resources are taught to students.

6.1.5. Brief description of the process and the implication of staff, students and stakeholders in the development, implementation, assessment and revision of learning resources

6.2. Comments

6.3. Suggestions for improvement

6.3'. Questions to be asked to the Establishment

6.3". Issues to be clarified on-site

6.4. Decision of the Visitation Team, *i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

7. Student admission, progression and welfare (see Standards 7.1 to 7.15 in Chapter 3)

7.1. Finding

7.1.1. Brief description of the admission procedures for standard and for full-fee students

7.1.2. Description of how the Establishment adapts the number of admitted students to the available educational resources and the biosecurity and welfare requirements

7.1.5. Description of the progression criteria and procedures, the available remediation and supports, the rate and main causes of attrition

7.1.6. Brief description of the services available for students

7.1.7. Brief description of the process and the implication of staff, students and stakeholders in the development, implementation, assessment and revision of the admission procedures, the admission criteria, the number of admitted students and the services to students

7.2. Comments

7.3. Suggestions for improvement

7.3'. Questions to be asked to the Establishment

7.3". Issues to be clarified on-site

7.4. Decision of the Visitation Team, *i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

8. Student assessment (see Standards 8.1 to 8.9 in Chapter 3)

8.1. Findings

8.1.1. Brief description of the student's assessment strategy of the Establishment

8.1.2. 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

8.1.4. Description of the processes for providing to students a feedback post-assessment and a guidance for requested improvement

8.1.5. Brief description of the process and the implication of staff, students and stakeholders in

the development, implementation, assessment and revision of the student's assessment strategy

8.2. Comments

8.3. Suggestions for improvement

8.3'. Questions to be asked to the Establishment

8.3". Issues to be clarified on-site

8.4. Decision of the Visitation Team, *i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

9. Academic and support staff (see Standards 9.1 to 9.6 in Chapter 3)

9.1. Findings

9.1.1. Brief description of the global strategy in order to ensure that all requested competences for the veterinary programme 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

9.2. Comments

9.3. Suggestions for improvement

9.3'. Questions to be asked to the Establishment

9.3". Issues to be clarified on-site

9.4. Decision of the Visitation Team, *i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

10. Research programmes, continuing and postgraduate education (see Standards 10.1 to 10.4 in Chapter 3)

10.1. Findings

10.1.1. Brief 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 positively to undergraduate veterinary education and how potential conflicts in relation to case management between post- and undergraduate students are avoided

10.1.3. Brief description of the process and the implication of staff, students and stakeholders in the development, implementation, assessment and revision of research, continuing and postgraduate education programmes organised by the Establishment

10.2. Comments

10.3. Suggestions for improvement

10.3'. Questions to be asked to the Establishment

10.3". Issues to be clarified on-site

10.4. Decision of the Visitation Team, *i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

11. Outcome Assessment and Quality Assurance (see Standards 11.1 to 11.10 in Chapter 3)

11.1. Findings

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:

-) has a culture of QA and continued enhancement of quality;
-) operates *ad hoc*, cyclical, sustainable and transparent outcome assessment, QA and quality enhancement mechanisms;
-) collect, analyse and use relevant information from internal and external sources for the effective management of their programmes and activities (*teaching, research, services*);
-) informs regularly staff, students and stakeholders and involves them in the QA processes;
-) closes the loop of the QA Plan-Do-Check-Act (PDCA) cycle;
-) is compliant with ESG Standards.

11.1.2. Brief description of the specific QA processes for each ESEVT Standards

11.1.3. Brief description of the process and the implication of staff, students and stakeholders in the development, implementation, assessment and revision of the QA strategy of the Establishment

11.2. Comments

11.3. Suggestions for improvement

11.3'. Questions to be asked to the Establishment

11.3". Issues to be clarified on-site

11.4. Decision of the Visitation Team, i.e. whether the Establishment is compliant, partially compliant (1 or several Minor Deficiencies) or not compliant (1 or several Major deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.

12. ESEVT Indicators (see Annex 4)

13. ESEVT Rubrics (summary of the decision of the Visitation Team of the Establishment for each ESEVT Standard, i.e. compliance (C), partial compliance (PC) (Minor Deficiency) or non-compliance (NC) (Major Deficiency))

Standard 1: Objectives and Organisation	C	PC	NC
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 recognised 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 recognised as being of an equivalent level and formally recognised 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 organisational 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.			
Standard 2: Finances			
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.			
Standard 3: Curriculum			
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 as amended by directive 2013/55/EU and its Annex V.4.1.			
3.2. The learning outcomes for the programme must be explicitly articulated to form a cohesive framework.			
3.3. Programme 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 programme; -) 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) (see Annex 2). This must concern all groups of subjects, i.e. Basic Sciences, Clinical Sciences, Animal Production, Food Safety and Quality, and Professional Knowledge.			
3.6. External Practical Training (EPT) are training activities organised 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 standardised evaluation of the performance of the student during their EPT and be allowed to provide feedback to the Establishment on the EPT programme.			
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.			
Standard 4: Facilities and equipment			
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 programme 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: <ul style="list-style-type: none"> -) 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 practise 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.			
Standard 5: Animal resources and teaching material of animal origin			
5.1. The number and variety of healthy and diseased animals, cadavers, and material of animal origin must be adequate for providing the practical training (in the area of Basic Sciences, Clinical Sciences, Pathology, Animal Production, Food Safety and Quality) and adapted to the number of students enrolled.			
5.2. It is essential that a diverse and sufficient number of surgical and medical cases in all common domestic animals and exotic pets be available for the students' clinical educational experience and hands-on training.			
5.3. In addition to the training provided in the Establishment, experience can include practical training at external sites, provided this training is organised under direct academic supervision and at the same standards as those applied in the Establishment.			
5.4. The VTH must provide nursing care skills and instruction in nursing procedures.			
5.5. Under all situations students must be active participants in the workup of patients, including physical diagnosis and diagnostic problem oriented decision making.			
5.6. Medical records must be comprehensive and maintained in an effective retrieval system (preferably an electronic patient record system) to efficiently support the teaching, research, and service programmes of the Establishment.			
Standard 6: Learning resources			
6.1. State-of-the-art learning resources must be available to support veterinary education, research, services and continuing education. Timely access to learning resources, whether through print, electronic media or other means, must be available to students and staff and, when appropriate, to stakeholders. State-of-the-art procedures for bibliographical search and for access to databases and learning resources must be taught to undergraduate students.			
6.2. Staff and students must have full access on site to an academic library, which is administered by a qualified			

librarian, an Information Technology (IT) unit, which is managed by an IT expert, an e-learning platform, and the relevant human and physical resources necessary for development by the staff and use by the students of instructional materials.			
6.3. The Establishment must provide students with unimpeded access to learning resources which include scientific and other relevant literature, internet and internal study resources, and equipment for the development of procedural skills (e.g. models). The use of these resources must be aligned with the pedagogical environment and learning outcomes within the programme, and have mechanisms in place to evaluate the teaching value of innovations in learning resources.			
6.4. The relevant electronic information, database and other intranet resources must be easily available for students and staff both in the Establishment's core facilities via wireless connection (Wi-Fi) and from outside the Establishment via Virtual Private Network (VPN).			
Standard 7: Student admission, progression and welfare			
7.1. The selection criteria for admission to the programme 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 programme by providing clear and current information for prospective students. Further, printed catalogue and electronic information must state the purpose and goals of the programme, 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 programmes, 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. Not applicable.			
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 programme successfully, including consideration of their potential to meet all the ESEVT Day One Competences in all common domestic species (see Annex 2).			
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 programme, 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 practise) 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 programme 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 programme. 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.			
Standard 8: Student assessment			
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 programme towards entry level competence.			
8.2. The assessment tasks and grading criteria for each unit of study in the programme 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. Programme 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 programme 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 programme have been fully completed by each individual student.			

Standard 9: Academic and support staff			
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 programme, including teaching staff, 'adjunct' staff, technical, administrative and support staff, must be sufficient and appropriate to deliver the educational programme 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 utilises a well-defined, comprehensive and publicised programme 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 recognise 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 10: Research programmes, continuing and postgraduate education			
10.1. The Establishment must demonstrate significant and broad research activities of staff that integrate with and strengthen the veterinary degree programme through research-based teaching.			
10.2. All students must be trained in scientific method and research techniques relevant to evidence-based veterinary medicine.			
10.3. All students must have opportunities to participate in research programmes.			
10.4. The Establishment must provide advanced postgraduate degree programmes, e.g. PhD, internships, residencies and continuing education programmes that complement and strengthen the veterinary degree programme and are relevant to the needs of the profession and society.			
Standard 11: Outcome Assessment and Quality Assurance			
11.1. The Establishment must have a policy for quality assurance that is made public and forms part of their strategic management. Internal stakeholders must develop and implement this policy through appropriate structures and processes, while involving external stakeholders.			
11.2. The Establishment must have processes for the design and approval of their programmes. The programmes must be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme must be clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.			
11.3. The Establishment must ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.			
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.			
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.			
11.6. The Establishment must have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided.			
11.7. The Establishment must ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.			
11.8. The Establishment must publish information about their activities, including programmes, which is clear, accurate, objective, up-to date and readily accessible.			
11.9. The Establishment must monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society. These reviews must lead to continuous improvement of the programme. Any action planned or taken as a result must be communicated to all those concerned.			
11.10. The Establishment must undergo external quality assurance in line with the ESG on a cyclical basis.			
<i>C: (total or substantial) compliance; PC: partial compliance (Minor Deficiency); NC: non-compliance (Major Deficiency)</i>			

Executive Summary

-) Brief history of the Establishment and its previous EAEVE Visitations
-) Brief comment on the SER
-) Brief comment on the Visitation
-) Commendations (areas worth of praise identified by the Team)

-) Recommendations (list of the Minor Deficiencies identified by the Team)
-) List of the Major Deficiencies identified by the Team

Glossary

(Please use the same terminology and abbreviations as in the ESEVT SOP when possible)