European System of Evaluation of Veterinary Training (ESEVT)

Standard Operating Procedure 2023

EUROPEAN ASSOCIATION OF ESTABLISHMENTS FOR VETERINARY EDUCATION (EAEVE)

FEDERATION OF VETERINARIANS OF EUROPE (FVE)

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Introduction

This document sets out the Standard Operating Procedure (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). Chapter 2 (ESEVT Evaluation process) and Chapter 3 (ESEVT Standards for Accreditation) have been approved by the EAEVE General Assembly (8 June 2023) and by the FVE Board (3 April 2023). Annexes 4 and 6-18 have been approved by the EAEVE Executive Committee (7 June 2023).

The main objective of the ESEVT is to evaluate if the professional qualifications provided by the Veterinary Education Establishments (VEEs) are compliant with the relevant European Union (EU) Directives and the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) (https://www.enqa.eu/wp-content/uploads/2015/11/ESG_2015.pdf).

The transitional procedures between the *SOP 2019 as amended in September 2021* and the *SOP 2023* are described in Annex 17.

Chapter 1. Basic documents for the recognition of professional qualifications and for Quality Assurance in the EU

The minimum training requirements for veterinarians relevant for the automatic recognition of their qualification throughout the EU are laid down in the EU Directive on the recognition of professional qualifications, i.e. article 38 of the Directive 2005/36/EC as amended by Directive 2013/55/EU (see Annex 1).

Further details are provided by the EU Directive 2005/36/EC Annex 5.4.1, which is currently being amended in the Directive 2013/55/EU by the EU Commission under the Delegated Act procedure (see Annex 2).

The Standards for Quality Assurance in the European Higher Education Area were updated in September 2014 and were approved by the Ministerial Conference in May 2015 (see Annex 3).

Chapter 2. ESEVT Evaluation process

(as approved by the EAEVE General Assembly on 8 June 2023)

The ESEVT evaluation process is a fully transparent accreditation procedure for all EAEVE members as defined by the EAEVE Statutes. In the SOP, the term 'VEE' (Veterinary Education Establishment) refers to such a member. As stated in the EAEVE Statutes, the ESEVT is based on a compulsory system of visitations together with periodic Interim Reports provided by the VEE.

To be accredited by the ESEVT, a VEE and each study programme it provides leading to the degree of veterinarian must be compliant with the EU Directives on the recognition of professional qualifications and the Standards and Guidelines for quality assurance in the European Higher Education Area (ESG). Therefore, they must meet all the ESEVT Standards set out in Chapter 3, which incorporate all ESG Standards.

If a VEE offers more than one study programme to become a veterinarian, e.g. in different languages or in collaboration with other VEEs, each of the programmes must be evaluated individually.

If a VEE delegates a significant part of the curriculum (except Elective Practical Training) to a different legal entity, e.g. another higher education institution or a private entity, it must provide, as an annex of the Self-Evaluation Report (SER), a copy of the written contract describing how the VEE can exercise real control over the quality of the training delivered. These additional entities must be visited and evaluated.

Four types of evaluation are organised within the ESEVT, i.e.:
-) Full Visitation;
-) Re-visitation;
-) Preliminary Visitation;
-) Interim Report.

1. Full Visitation

1.1. Agreement for a Full Visitation between the VEE and EAEVE

A Full Visitation may not be completed before the graduation of the first cohort of veterinary students. Fourteen months before the intended Full Visitation at the latest, the VEE (which must be an EAEVE member) must contact the EAEVE Office to request the visitation.

Twelve months before the intended Full Visitation at the latest, an official Full Visitation Agreement must be signed by the VEE's Head.
This agreement must mention:
-) the number of study programmes leading to the degree of a veterinarian to be evaluated;
-) the date of the Full Visitation;
-) the name and contact details of the VEE's Head and of the Liaison Officer for the Full Visitation;
-) the visitation fee to be paid in agreement with Annex 5;
-) the version and date of the ESEVT SOP which is valid for the visitation;

-) the commitment of the VEE to strictly respect the ESEVT SOP with regard to the preparation and completion of the visitation and the publication of the SER and the Final Full Visitation Report on its website as well as the websites of EAEVE and DEQAR (Database of the European Quality Assurance Register).

The Full Visitation must be carried out during a period of full teaching activity, i.e. when most staff and students are present on site and should be completed not later than 2 months before the ECOVE meeting preceding the end of granted status of the VEE.

The fees for the evaluation process are provided in Annex 5.

1.2. Identification of the Full Visitation Team

Six months before the Full Visitation at the latest, the European Committee of Veterinary Education (ECOVE), through the EAEVE Office, appoints the members of the Full Visitation Team and sends to the VEE the visitation team list and the contact details of each Visitor.
The Full Visitation Team is composed of eight Visitors:
-) one expert in Basic Sciences (BS);
-) one expert in Clinical Sciences in companion animals (including equine and exotic pets) (CS-CA);
-) one expert in Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management) (CS-FPA);
-) one practitioner (proposed by FVE) (P);
-) one expert in Veterinary Public Health (including Food Safety and Quality) (VPH);
-) one expert in Quality Assurance (QA);
-) one student (a minimum of two years before graduation as a veterinarian or a maximum of one year after graduation at the time of the Visitation) proposed by an association of veterinary students and being from a VEE which is a full member of EAEVE with the Accreditation or Pending Accreditation status (in the latter case, the VEE must have previously held the status of Accreditation) (ST);
-) one ESEVT Coordinator (CO).

If a VEE offers more than one study programme to become a veterinarian or delegates a significant part of the curriculum (except Elective Practical Training) to a different legal entity, one additional Visitor may be appointed by ECOVE.

One of the Visitors is designated by ECOVE as Chairperson on the basis of his/her experience as an ESEVT Visitor and leadership.
All Visitors except the Practitioner must be associated with a VEE with ESEVT Accreditation or Pending Accreditation status (in the latter case, the VEE must have previously held the status of Accreditation).
All Visitors (regardless of the type of visitation) must:
-) have successfully completed the E-learning course for ESEVT Visitors;
-) be fluent in English, both oral and written;
-) have been (or will be, in the case of students) granted their university degree and work in a country other than the visited one;
-) sign the declaration for ESEVT Visitors confirming that they have no conflict of interest with the visited VEE, that they are aware of the conditions of the travel insurance provided by EAEVE and that they commit themselves to closely follow the ESEVT SOP and the EAEVE Code of Conduct (see Annex 15).

If the visited VEE considers that there is a conflict of interest with any of the selected Visitors, it must inform ECOVE through the EAEVE Office 14 calendar days after receiving the visitation team list at the latest. If the conflict of interest by the VEE is justified, ECOVE replaces this Visitor.
Upon an official request from the visited VEE, ECOVE may accept an observer from another official body, in addition to the ESEVT Visitors (see Annex 18). The visited VEE is strongly encouraged to invite to the Full Visitation an observer from the relevant national accrediting agency.

Upon an official request from the visited VEE, ECOVE may accept to share Visitors with other veterinary accreditation bodies in case of joint Visitations within the International Accreditors Working Group (IAWG).
However, the Full Visitation programme must be fully compliant with the ESEVT SOP, e.g. specific ESEVT Full Visitation team, Self-Evaluation Report (SER), Full Visitation Report and Exit Presentation.

Hybrid visitation is not an option, except in very exceptional circumstances when one Visitor cannot participate in the Full Visitation because of unexpected major issues and cannot be replaced in due time. In any way, such an exceptional decision must be endorsed by ECOVE.

The main duties of the Visitors are to establish if the veterinary degree granted by the visited VEE is compliant with the ESEVT Standards (see Chapter 3).
More specifically, the duties of the Visitors are:
-) before the Full Visitation: to read the VEE's SER and its Appendices, and 20 calendar days before the start of the visitation at the latest to complete the delegated areas in the draft Full Visitation Report (at least the sections 'Findings' and 'Questions to be asked to the VEE'/ 'Issues to be clarified on-site');
-) during the Full Visitation: to check the accuracy of the information provided in the SER, to visit the facilities, to consult databases relevant to the veterinary curriculum, to meet students, staff, representatives of the national veterinary association(s) and other stakeholders, to request any missing information and to finalise the writing of the draft Full Visitation Report for their respective areas in collaboration with the other members of the Team;
-) after the Full Visitation: immediately after the visitation, to add their comments to the draft B Full Visitation Report and as soon as the draft C Full Visitation Report has been finalised by the Chairperson and the Coordinator, to send the completed post-visitation questionnaire (Annex 16a) to the EAEVE Office.

The main duties of the Chairperson are to chair all the meetings during the visitation, to make decisions (after consulting the Full Visitation Team) when an unexpected problem occurs during the visitation and, subsequently, to reach a consensus during the Thursday afternoon meeting about the compliance of the VEE with each Standard, to deliver the Exit Presentation, and to be available to ECOVE to discuss the Full Visitation Report and answer any questions that may arise.

The main duties of the Coordinator are to coordinate the preparation, completion and outcome of the Visitation process in close contact with the EAEVE Office, the Chairperson and the visited VEE, to train and supervise the Visitors who have successfully completed the ESEVT E-learning course but who have not yet participated in an ESEVT Full Visitation, to organise the two webinars prior to the visitation (one with the Team alone and one with the Team, VEE's Head and Liaison Officer), to supervise the writing of the Full Visitation Report and to edit it

at all stages in order to help the experts in their duties and to ensure a consistency amongst all reports, to facilitate contacts with the VEE, to ensure strict implementation of the SOP and to be available to ECOVE to discuss the Full Visitation Report and answer any questions that may arise.

The main duties of the Liaison Officer are to facilitate the whole visitation process in agreement with the ESEVT SOP and to be in close contact with the EAEVE Office, the Coordinator and the VEE's Head before, during and after the Full Visitation. The Liaison Officer must provide the Visitors with the information and documents requested before and during the visitation (including all legal procedures for accessing the VEE, e.g. visas, registration forms, health certificates, etc.), address any technical problems, organise the relevant meetings in the most efficient way and ensure the implementation of health safety measures recommended by the European Centre for Disease Prevention and Control (ECDC) and the World Health Organisation (WHO).
The Liaison Officer (who may not be the VEE's Head) must be a member of the VEE who is:
-) well aware of both the ESEVT SOP and the structure and functioning of the VEE;
-) fluent in English;
-) easily accessible by email and by phone and readily available at all times, particularly during the visitation.

1.3. Travel and accommodation arrangements

Not less than four months before the Full Visitation, the VEE must:
-) contact each Visitor in order to make suitable travel arrangements (each Visitor must be present on site at least one hour before the start of the first Team meeting and must be present until the end of the Exit Presentation);
-) buy the tickets – economy class, or business class for flights longer than 6 hours (i.e. single flight duration and not full travel time with stopovers) and send them to each Visitor or, in case of a specific agreement between the VEE and the Visitors, reimburse Visitors buying their own tickets under the same conditions;
-) book rooms in a convenient 3- or 4-star hotel with Wi-Fi, a restaurant and a meeting room fully dedicated to the use of the Full Visitation Team;
-) pay the insurance for each Visitor purchased by the EAEVE Office to cover the risk of accidents that might occur during the travels and the visitation;
-) pay the cost of any mandatory procedure required for the visitation.

All transportation of the Visitors (e.g. between airport, train station, hotel, restaurant and visited sites) and catering must be organised and funded by the VEE.

1.4. Self-Evaluation Report (SER)

The SER must be the result of an objective, accurate and in-depth review of the VEE 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 VEE.
The SER must demonstrate how the VEE meets the ESEVT Standards described in Chapter 3. It must also describe the specific features of the legislation and environment of the VEE which have an impact on the VEE's compliance with the ESEVT Standards. The SER must be written following the SOP which was valid at the time of signing of the agreement between the VEE and EAEVE. If the VEE wishes to do so, it may follow the most recent SOP. In any case, the VEE must state in the introduction of its SER which SOP it follows (version, date).

The SER must be completed in agreement with the template and guidelines provided in Annex 6.

It is strongly recommended that the preparation of the SER begins about one year before the Visitation at the latest, involves key members of staff and students in its process and is approved by the VEE's governing body.
Two months before the Full Visitation at the latest, the SER and its Appendices (in both PDF and Word format) and the two sheets of the Indicators (in Excel format) must be sent by the VEE to all members of the Full Visitation Team and to the EAEVE Office by email. It is up to the Visitors to decide if they would like to receive a hard copy of the document in addition to the e-copy (it is the duty of the Liaison Officer to enquire about the Visitors' preference in this respect before the SER due date). The EAEVE Office does not need to receive a hard copy of the SER.

1.5. Programme of the Full Visitation
The major aim of the visitation is to establish whether the VEE complies with the ESEVT Standards described in Chapter 3. The Full Visitation Team must verify and supplement the information presented in the SER by visiting the facilities, consulting the databases relevant to the veterinary curriculum and meeting the relevant persons.
A secondary objective is to propose, if appropriate, a few operational suggestions for improving the training. These suggestions must be relevant for the visited VEE and in compliance with the ESEVT SOP.
The programme of the Full Visitation must be in compliance with the timetable and guidelines provided in Annex 7. Any modification proposed by the VEE must be accepted by the Chairperson and the Coordinator. When required, on-site changes must be possible in order to allow the Visitors to verify or complete the necessary information.
Interactions between the Full Visitation Team and the VEE should have a collegial tone, and be based on mutual trust and a desire to arrive at a full understanding of the current status of the educational programme of the VEE.
Wherever possible, the Full Visitation Team will work as a group to enable all of the team members to see the relationships between the various parts of the curriculum and the degree of integration. If needed, the Full Visitation Team may split into smaller groups to retrieve as much information as possible during the visitation.

The Full 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 Full Visitation for any staff member or student to meet confidentially with the Full Visitation Team during the open session in confidence for individuals on the fourth day of the visitation and/or to send confidential communications to the Team by email. The VEE must inform in advance all teaching and support staff, students and Elective Practical Training (EPT) providers about this opportunity and the time and place of the session in confidence. Anonymous information will not be taken into consideration by the Team at any stage of the visitation process.

1.6. Full Visitation Report
The Full Visitation Report must be written following the SOP which was valid at the time of signing of the agreement between the VEE and EAEVE unless the VEE has explicitly agreed to follow the most recent SOP (see point 1.4). In any case, the SOP used for writing the Full Visitation Report must coincide with the SOP the VEE followed when preparing its SER. In

the Full Visitation Report, the Full Visitation Team must state in the Introduction which SOP it follows (version, date).

The Full Visitation Report must be completed in agreement with the template and guidelines provided in Annex 8. To ensure the efficiency of the writing and amendment of the Full Visitation Report, an online document editor is used during the whole visitation process.

All members of the Full Visitation Team are expected to contribute to all areas, but a principal writer is identified for each area by the Chairperson and the Coordinator two months before the visitation at the latest.

After having received the SER, the Coordinator makes the Full Visitation Report template available for all team members in the online document editor. Twenty calendar days before the visitation at the latest, each Visitor must have read the full SER and its Appendices and completed the delegated areas in the draft Full Visitation Report (at least the sections 'Findings' and 'Questions to be asked to the VEE'/ 'Issues to be clarified on-site').

The resulting draft A Full Visitation Report is solely based on the SER at this stage. A list of questions to be asked to the VEE and issues to be clarified during the visitation based on the input of each Visitor must be compiled and sent by the Coordinator to the VEE 14 calendar days before the visitation at the latest, to allow the Liaison Officer sufficient time to collect the required data. The VEE must provide answers to these questions as soon as possible or at the start of the visitation at the latest.

The draft B Full Visitation Report (based on findings, analysis of the findings/comments, suggestions and identification of potential deficiencies) must be completed before the end of the visitation.
The Full Visitation Team is responsible for making an independent assessment and proposing an unambiguous statement on the adequacy of the VEE against each ESEVT Standard, i.e. compliant, partially compliant (i.e. one or more Minor Deficiencies that does/do not significantly affect the quality of education and the VEE's compliance with the ESEVT Standards) or not compliant (i.e. one or more Major Deficiencies that affect the quality of education and the VEE's compliance with the ESEVT Standards).
In the Full Visitation Report, each Standard is subdivided into 4 parts:
-) findings;
-) analysis of the findings/comments;
-) suggestions for improvement (which must be strictly limited in number, agreed by the whole Team i.e. not linked to personal opinions, relevant for the visited VEE, and in agreement with the ESEVT SOP).
-) proposal from the Full Visitation Team (in case of partial/non-compliance, the Minor/Major Deficiencies must be clearly listed in agreement with standardised terminology).

After proofreading by the Chairperson and the Coordinator and a final agreement by all members of the Full Visitation Team, the draft C Full Visitation Report is issued within 14 calendar days after the end of the visitation and sent to the VEE for identification of potential factual errors with a 14 calendar days' notice.
In agreement with the Chairperson, the Coordinator corrects the relevant factual errors and sends the draft D to the EAEVE Office for final proofreading before the EAEVE Office presents the Report for the next ECOVE meeting. The ECOVE members must receive the draft D Full Visitation Report one month before their meeting at the latest.

If during the Full Visitation errors in the SER are detected by the Visitation Team and agreed by the VEE, the VEE must send the corrected e-SER to the Chairperson, Coordinator and EAEVE Office at the latest one month before the ECOVE meeting.

The post-visitation questionnaire (Annex 16a & 16b) is sent by the EAEVE Office to the Visitors when draft C has been finalised and to the visited VEE when draft D has been finalised. The completed questionnaire must be returned to the EAEVE Office within 14 calendar days after having received it from the EAEVE Office.

The draft D Full Visitation Report is analysed by ECOVE. Any amendment decided by ECOVE must be explained. With the support of the EAEVE Office and the Coordinator, the draft D Full Visitation Report is amended/edited and the Final Full Visitation Report is formally issued by ECOVE. It is communicated to the VEE's Head and to the Full Visitation Team prior to publication on the websites of EAEVE, the VEE and DEQAR.

1.7. ECOVE decision

ECOVE must base its decision on the analysis of the draft D Full Visitation Report, the SER and the SOP which was valid at the time of signing of the agreement between the VEE and EAEVE unless the VEE has explicitly agreed to follow the most recent SOP (see points 1.4 and 1.6). In any case, the SOP on which ECOVE has based its decision must coincide with the SOP the VEE followed when preparing its SER. In its decision, ECOVE must state on which SOP it has based its decision (version, date).

For each visited VEE, ECOVE analyses and discusses the draft D Full Visitation Report and decides to confirm or amend the recommendations of the Full Visitation Team. The Chairperson and the Coordinator must be available to ECOVE for discussing the Full Visitation Report and for answering any questions that may arise. The Major Deficiencies must be clearly listed in agreement with standardised terminology and the VEE's status clearly identified, i.e.:

-) Accreditation in case of no Major Deficiencies (even in case of Minor Deficiencies), or
-) Pending Accreditation in case of one or several Major Deficiencies (for VEEs which previously held the status of Accreditation or VEEs which previously held the status of Approval under earlier versions of the SOP no longer in use);
-) Non-Accreditation in case of one or several Major Deficiencies (for VEEs which previously held the status of Non-Accreditation or VEEs which were never before evaluated through a Full Visitation).

When a VEE offers more than one study programme to become a veterinarian, e.g. in different languages or in collaboration with other VEEs, ECOVE may take a different decision for the different study programmes, e.g. Accreditation for one programme and Pending Accreditation/Non-Accreditation for another one.

Accreditation is valid for seven years from the date of the Full Visitation. However, in case of major issues identified by the Interim Reports, ECOVE may as a last resort decide to reclassify the VEE's Accreditation status to Pending Accreditation status (see Interim Report, Chapter 2, point 4).
Pending Accreditation is valid for the period between the ECOVE decision after the Full Visitation and the subsequent Re-visitation (see Re-visitation, Chapter 2, point 2).

Within two calendar days after the meeting, the ECOVE Chairperson through the EAEVE Office informs the VEE's Head by email about the granted status.
Within one month after the meeting, the ECOVE Chairperson through the EAEVE Office sends by email the Final Full Visitation Report and the official letter on the ECOVE decision to the VEE's Head with information about:
-) the appeal process;
-) the obligation to make public the Final Full Visitation Report issued by ECOVE on the website of the VEE.

In the event that the ECOVE decision differs from the proposals of the Full Visitation Team, the rationale behind these changes is explained via a webinar first to the visited VEE and then to the Full Visitation Team by the ECOVE Chairperson (or another ECOVE representative) and the ESEVT Director.

1.8. Appeal process
If the VEE believes that the decision by ECOVE about its accreditation status is not justified, it must inform the ECOVE Chairperson through the EAEVE Office of its intention to appeal against the ECOVE decision within 14 calendar days after the receipt by email of the official letter on the ECOVE decision and the Final Full Visitation Report. The final decision to appeal and the argued basis for the appeal must be made in writing within two months after the receipt by email of the official letter on the ECOVE decision and the Final Full Visitation Report by the VEE.
The first stage of the appeal process involves reconsideration by the ECOVE during its next meeting. The Chairperson and the Coordinator of the relevant Full Visitation Team may be asked to participate in the reconsideration process. The appeal may be accepted or dismissed.

If ECOVE dismisses the appeal and if the VEE intends to continue the appeal process, the VEE must inform the ECOVE Chairperson through the EAEVE Office of its intention to continue the appeal process within 14 calendar days after the receipt by email of the latest ECOVE decision. The appeal is then considered formally by an Appeal Panel. The panel will comprise three members, all of whom should preferably have chaired a Full Visitation Team. The appointment of the panel is coordinated by the President of EAEVE or his/her nominee in the event that he/she is ineligible through other considerations. One member each is appointed by the EAEVE and the FVE, with the appealing VEE having the right to nominate a third member. At least one member must have expertise relating to the subject area(s) under dispute. The panel selects its own Chairperson. All three members must sign a declaration confirming that they have no conflict of interest with the visited VEE and a commitment to strictly follow the ESEVT SOP and the EAEVE Code of Conduct (see Annex 15). ExCom members, ECOVE members and ESEVT Coordinators cannot be members of Appeal Committees.

The appeal and its discussion are first to be carried out by correspondence and/or online meetings. If a decision cannot be reached by these means, the Chairperson of the Appeal Panel may consider that an in-person or hybrid meeting is necessary, at the VEE or elsewhere, between the members of the panel, representatives of the VEE and the Chairperson and Coordinator of the Full Visitation Team. In this case, all expenses must be paid by the VEE.

Once the Appeal Panel has reached a decision, by a majority if necessary, its Chairperson will inform ECOVE of its decision by submitting an adjudicating statement. The statement must include the decision of the Appeal Panel, i.e. whether the appeal is accepted or rejected, and a summary of the arguments that were considered justifying the decision. Recommendations

regarding the appeal process (if any) must be provided separately. The EAEVE Office is responsible for transferring to the VEE the statement with the Appeal Panel's decision in writing. The decision of the panel is final.

Until the end of the appeal process, the Full Visitation Report is not published and the appealing VEE holds its current status.

1.9. Complaint process

If the VEE believes that procedural faults have been made during the ESEVT evaluation process, it must send by email to the EAEVE Office the official complaint and its argued basis two months after the last day of the visitation at the latest.
The complaint is sent by the EAEVE Office to the EAEVE Committee on Internal Quality Assurance (CIQA) which analyses the documents and evidence, including seeking further information from all relevant parties.
CIQA informs the EAEVE Executive Committee (ExCom) about its conclusions as soon as possible and two months after receiving the relevant information at the latest.
ExCom decides to dismiss or to accept (totally or partially) the complaint and informs all concerned parties about its decision and subsequent actions.

2. Re-visitation

2.1. Agreement for a Re-visitation between the VEE and EAEVE

One year after the previous Full Visitation at the latest, a VEE that considers that it has rectified its Major Deficiencies may request a Re-visitation by sending a written request via email to the EAEVE Office.
If the Re-visitation request is accepted by the ESEVT Director and endorsed by ECOVE, the Re-visitation will be organised by the EAEVE Office at the expense of the VEE.

Three months before the Re-visitation at the latest, an official Re-visitation agreement must be signed by the VEE's Head.
This agreement must mention:
-) the number of study programmes leading to the degree of a veterinarian to be re-evaluated;
-) the date of the Re-visitation;
-) the name and contact details of the VEE's Head and of the Liaison Officer for the Re-visitation;
-) the Re-visitation fee to be paid in agreement with Annex 5;
-) the version and date of the SOP which is valid for the Re-visitation (which must coincide with the SOP version under which the previous Full Visitation was completed);
-) the commitment of the VEE to strictly respect the ESEVT SOP with regard to the preparation and completion of the Re-visitation and the publication of the Re-visitation SER (RSER) and the Re-visitation Report on its website as well as the websites of EAEVE and DEQAR.

A Re-visitation must be performed two years after the previous Visitation at the latest and can only be performed once. If this interval is exceeded, the VEE's status automatically reverts to Non-Accreditation and only a Full Visitation can be planned.

The Re-visitation must be carried out during a period of full teaching activity, i.e. when most staff and students are present on site and should be completed two months before the ECOVE meeting preceding the end of granted status of the VEE at the latest.

2.2. Identification of the Re-visitation Team

Three months before the Re-visitation at the latest, ECOVE through the EAEVE Office appoints the members of the Re-visitation Team and sends to the VEE the Re-visitation team list and the contact details of each Visitor.

The Re-visitation Team is composed of a minimum of two Visitors, i.e. one member of the previous Full Visitation Team (most often the Chairperson, who will chair the Re-visitation) and a Coordinator (who should be different from the Coordinator of the previous Full Visitation to the same VEE). 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.

All Visitors must fulfil the criteria specified in point 1.2 and be experienced ESEVT Visitors.

The duty of the Visitors is to evaluate whether the Major Deficiencies identified by ECOVE after the Full Visitation have been corrected. It is also to evaluate if an ongoing process to correct the Minor Deficiencies is in place.

More specifically, the duties of the Visitors are:

-) before the Re-visitation, to read the Re-visitation SER;

-) during the Re-visitation, to check the accuracy of the information provided in the Re-visitation SER and, when relevant for correction of the Deficiencies, to visit facilities, consult databases relevant to the veterinary curriculum, meet people and search for any missing information;

-) within 14 calendar days after the Re-visitation, to finalise the Re-visitation Report and to send the post-visitation questionnaire (Annex 16c) to the EAEVE Office.

2.3. Travel arrangements and accommodation

Travel arrangements and accommodation are the same as for a Full Visitation (see point 1.3).

2.4. Re-visitation SER (RSER)

The RSER must provide factual and accurate information providing evidence that the Major Deficiencies identified during the Visitation have been corrected and that an ongoing process to correct the Minor Deficiencies is in place.

Two months before the Re-visitation at the latest, the RSER and its Appendices (in both PDF and Word format) and the two sheets of the Indicators (in Excel format) must be sent by the VEE to all members of the Re-visitation Team and to the EAEVE Office by email. It is up to the Visitors to decide if they would like to receive a hard copy of the document in addition to the e-copy (it is the duty of the Liaison Officer to enquire about the Visitors' preference in this respect before the RSER due date). The EAEVE Office does not need to receive a hard copy of the RSER.

The RSER must be completed in agreement with the template and guidelines provided in Annex 9.

2.5. Programme of the Re-visitation

The aim of the Re-visitation is to evaluate whether the Major Deficiencies identified during the previous Visitation have been fully corrected and whether an ongoing process to correct the Minor Deficiencies is in place.
The Re-visitation Team must verify and supplement the information presented in the RSER by visiting the facilities, consulting the databases relevant to the veterinary curriculum and meeting the relevant persons.

The programme of the Re-visitation must be in agreement with the timetable and guidelines provided in Annex 10. Any modification proposed by the VEE must be accepted by the Chairperson and the Coordinator. When required, on-site changes in the Re-visitation programme must be possible in order to allow the Visitors to verify or complete the necessary information.

2.6. Re-visitation Report

The Re-visitation Report must be completed in agreement with the template and guidelines provided in Annex 11. To ensure the efficiency of the writing and amendment of the Re-visitation Report, an online document editor is used before, during and after the Re-visitation.

The draft A Re-visitation Report based on the RSER is prepared before arrival. Questions or a request for clarification may be sent to the VEE 14 calendar days before the start of the Re-visitation. The draft B Re-visitation Report is written on site by the Re-visitation Team.

After proofreading by the Coordinator, the draft C Re-visitation Report is issued 14 calendar days after the end of the Re-visitation at the latest and sent to the VEE for identification of potential factual errors with a 10 calendar days' notice.
In agreement with the Chairperson, the Coordinator corrects the relevant factual errors and sends the draft D to the EAEVE Office for final proofreading before the EAEVE Office presents the Report for the next ECOVE meeting. The ECOVE members must receive the draft D Re-visitation Report one month before their meeting at the latest.

The post-visitation questionnaire (Annex 16c & 16d) is sent by the EAEVE Office to the Visitors when draft C has been finalised and to the visited VEE when draft D has been finalised. The completed questionnaire must be returned to the EAEVE Office within 14 calendar days latest after having received it from the EAEVE Office.

The draft D Re-visitation Report is analysed by ECOVE. Any amendment decided by ECOVE must be explained. With the support of the EAEVE Office and the Coordinator, the draft D Re-visitation Report is amended/edited and the Final Re-visitation Report is formally issued by ECOVE. It is communicated to the VEE's Head and to the Re-visitation Team prior to publication on the websites of EAEVE, the VEE and DEQAR.

2.7. ECOVE decision

For each revisited VEE, ECOVE analyses the Re-visitation Report and decides to confirm or amend the recommendations proposed by the Re-visitation Team. The Chairperson and the Coordinator must be available to ECOVE for discussing the Re-visitation Report and for answering any questions that may arise. The remaining Major Deficiencies after the Re-visitation must be clearly listed by ECOVE in agreement with standardised terminology and the VEE's status clearly identified, i.e.:

-) Accreditation if all Major Deficiencies have been corrected and if an ongoing process is in place to correct the Minor Deficiencies;
-) Non-Accreditation if all Major Deficiencies have not been corrected and/or if an ongoing process is not in place to correct the Minor Deficiencies.

Within two calendar days after the meeting, the ECOVE Chairperson through the EAEVE Office informs the VEE's Head by email about the granted status.
Within one month after the meeting, the ECOVE Chairperson through the EAEVE Office sends by email the Final Re-visitation Report and the official letter on the ECOVE decision to the VEE's Head with information about:
-) the appeal process;
-) the obligation to make public the Final Re-visitation Report issued by ECOVE on the website of the VEE.

In the event that the ECOVE decision differs from the proposals of the Re-visitation Team, the rationale behind these changes is explained via a webinar first to the visited VEE and then to the Re-visitation Team by the ECOVE Chairperson (or another ECOVE representative) and the ESEVT Director.

The new granted status is valid for seven years from the date of the Full Visitation (and not from the date of the Re-visitation). However, in case of major issues identified by the Interim Report, ECOVE may as a last resort decide to reclassify the VEE's Accreditation status to Pending Accreditation status (see Interim Report Chapter 2, point 4).

If the VEE is not granted Accreditation status after the Re-visitation, another Re-visitation cannot be undertaken and Non-Accreditation status will be valid until the next Full Visitation.

When the validity period of the status of Pending Accreditation is exceeded, the VEE is automatically reclassified to a Non-Accreditation status.

2.8. Appeal process

The appeal process after an ECOVE decision based on a Re-visitation is identical to the one after a Visitation (see point 1.8.).

2.9. Complaint process

The complaint process after a Re-visitation is identical to the one after a Full Visitation (see point 1.9.).

3. Preliminary Visitation

The Preliminary Visitation is a prerequisite for granting membership in EAEVE, as stated in the EAEVE Statutes. The Preliminary Visitation is integrated with a Full Visitation which must be completed within a 3-year period after the completion of the Preliminary Visitation for all candidate VEEs seeking membership of EAEVE.
The Preliminary Visitation is dedicated to VEEs, which are not fully aware of the ESG and the SOP requirements and should benefit from a two-step evaluation.
The objective of a Preliminary Visitation is to check if the VEE is fully aware of the ESEVT SOP in general and the accreditation Standards (see Chapter 3) and Day One Competences (see

Annex 2) in particular and if there is an ongoing process in place to achieve compliance with these Standards. This Preliminary Visitation process should ensure that the VEE is sufficiently informed, prepared and equipped for undergoing a Full Visitation within the 3-year period. If this deadline is not respected, another Preliminary Visitation must be completed before the Full Visitation can be planned.
The objective of a Preliminary Visitation is also to contribute to improving the quality of education provided by the VEE.

3.1. Agreement for a Preliminary Visitation between the VEE and EAEVE
The Preliminary Visitation must be planned 12 months before the graduation date of the first cohort of students at the earliest. Twelve months before the intended Preliminary Visitation at the latest, the VEE must contact the EAEVE Office to ask for a Preliminary Visitation.

Ten months before the intended Preliminary Visitation at the latest, an official Preliminary Visitation agreement must be signed by the VEE's Head.
This agreement must mention:
-) the number of study programmes leading to the degree of a veterinarian to be checked;
-) the date of the Preliminary Visitation;
-) the name and contact details of the VEE's Head and of the Liaison Officer for the Preliminary Visitation;
-) the Preliminary Visitation fee to be paid in agreement with Annex 5;
-) the version and date of the SOP which is valid for the Preliminary Visitation;
-) the commitment of the VEE to strictly respect the ESEVT SOP with regard to the preparation and completion of the Preliminary Visitation and the publication of the Preliminary SER and the Final Visitation Report on its website as well as the websites of EAEVE and DEQAR (Database of the European Quality Assurance Register).

The Preliminary Visitation must be carried out during a period of full teaching activity, i.e. when most staff and students are present on site.

3.2. Identification of the Preliminary Visitation Team
Six months before the Preliminary Visitation at the latest, ECOVE through the EAEVE Office appoints the members of the Preliminary Visitation Team and sends to the VEE the Preliminary Visitation Team list and the contact details of each Visitor.

The Preliminary Visitation Team is composed of one Visitor with high experience (designated as the Chairperson of the Preliminary Visitation) and one Coordinator. When possible, these Visitors should also be part of the Visitation Team for the Full Visitation, which should follow the Preliminary Visitation within a 3-year period.

All Visitors must fulfil the criteria specified in point 1.2.

The main duties of the Visitors and the Liaison Officer are the same as for a Full Visitation.

3.3. Travel arrangements and accommodation
Travel arrangements and accommodation are the same as for a Full Visitation (see point 1.3).

3.4. Preliminary SER (PSER)

The PSER must be the result of a brief review by the VEE and the education and facilities it provides. It must provide factual and accurate information together with a SWOT analysis, including the measures proposed to address the weaknesses and threats identified by the VEE. The PSER must also demonstrate how the VEE meets or plans to meet the ESEVT Standards described in Chapter 3.
The PSER must be completed in agreement with the template and guidelines provided for the SER (Annex 6), although it should be shorter and less detailed than for a Full Visitation. The PSER must be concise (maximum 50 pages, without the Appendices, written in Times New Roman font, size 12, single spacing), complete, accurate and written in English in agreement with the template and guidelines provided in Annex 6.

Two months before the Preliminary Visitation at the latest, the PSER and its Appendices (in both PDF and Word format) and the two sheets of the Indicators (in Excel format) must be sent by the VEE to all members of the Preliminary Visitation Team and to the EAEVE Office by email, and it is up to the Visitors to decide if they would like to receive a hard copy of the document in addition to the e-copy (it is the duty of the Liaison Officer to enquire about the Visitors' preference in this respect before the PSER due date). The EAEVE Office does not need to receive a hard copy of the PSER.

3.5. Programme of the Preliminary Visitation

The Preliminary Visitation Team must verify and supplement the information presented in the PSER by visiting the facilities, consulting the databases relevant to the veterinary curriculum and meeting the relevant persons.

The programme of the Preliminary Visitation must be in agreement with the timetable and guidelines proposed in Annex 12. The programme is scheduled to take two full days on site, the first one mainly dedicated to visiting the facilities and the second one to meeting the relevant persons involved in delivering each ESEVT Standard. Any modification to the programme proposed by the VEE must be accepted by the Chairperson and the Coordinator.

When required, on-site changes must be possible in order to allow the Visitors to verify or complete the necessary information.

3.6. Preliminary Visitation Report

The Preliminary Visitation Report must be completed in agreement with the template and guidelines provided in Annex 13. To ensure the efficiency of the writing and amendment of the Preliminary Visitation Report, an online document editor is used before, during and after the Preliminary Visitation.

The draft A Preliminary Visitation Report based on the PSER is prepared before arrival. Questions or a request for clarification may be sent to the VEE 14 calendar days before the start of the Preliminary Visitation. The draft B Preliminary Visitation Report is written on site by the Preliminary Visitation Team.

After proofreading by the Coordinator, the draft C Preliminary Visitation Report is issued 14 calendar days after the end of the Preliminary Visitation at the latest and sent to the VEE for identification of potential factual errors with a 14 calendar days' notice.
In agreement with the Chairperson, the Coordinator corrects the relevant factual errors and sends the draft D to the EAEVE Office for final proofreading before the EAEVE Office presents the Report for the next ECOVE meeting. The ECOVE members must receive the draft

D Preliminary Visitation Report one month before their meeting at the latest.

The post-visitation questionnaire (Annex 16c & 16d) is sent by the EAEVE Office to the Visitors when draft C has been finalised and to the visited VEE when draft D has been finalised. The completed questionnaire must be returned to the EAEVE Office within 14 calendar days after having received it from the EAEVE Office.

The draft D Preliminary Visitation Report is analysed by ECOVE. Any amendment decided by ECOVE must be explained. With the support of the EAEVE Office and the Coordinator, the draft D Preliminary Visitation Report is amended/edited and the Final Preliminary Visitation Report is formally issued by ECOVE. It is communicated to the VEE's Head and to the Preliminary Visitation Team prior to publication on the websites of EAEVE, the VEE and DEQAR.

3.7. ECOVE decision

For each visited VEE, ECOVE analyses the Preliminary Visitation Report and forwards a recommendation to ExCom regarding the membership of the VEE in case the VEE is not yet an EAEVE member and the readiness of the VEE to apply for a Full Visitation within three years. The Chairperson and the Coordinator must be available to ECOVE for discussing the Preliminary Visitation Report and for answering any questions that may arise.

Within two calendar days after the meeting, the ECOVE Chairperson through the EAEVE Office informs the VEE's Head by email about the decision.
Within one month after the meeting, the ECOVE Chairperson through the EAEVE Office sends by email the Final Preliminary Visitation Report and the official letter on the ECOVE decision to the VEE's Head with information about:
-) the appeal process;
-) the obligation to make public the final Preliminary Visitation Report issued by ECOVE on the website of the VEE.

3.8. Appeal process

The appeal process after an ECOVE decision based on a Preliminary Visitation is identical to the one after a Full Visitation (see point 1.8.).

3.9. Complaint process

The complaint process after a Preliminary Visitation is identical to the one after a Full Visitation (see point 1.9.)

4. Interim Report

Three years and five years after the Full Visitation, all VEEs that are members of EAEVE must send concise Interim Reports to the EAEVE Office.
They must include:
-) the name and details of the current VEE's Head and the head(s) of the VTH;
-) any major changes in the ESEVT Standards since the previous SER/Interim Report;
-) progress in the correction of Major Deficiencies (if any) and of Minor Deficiencies (if any) and plans for the near future;
-) the expected date of the next evaluation;

-) an updated list of ESEVT Indicators.

For VEEs which have been accredited by ECOVE with Minor Deficiencies, an additional Interim Report must be sent to the EAEVE Office one year after the Full Visitation focussing on the correction of the Minor Deficiencies.

After being reviewed by an ESEVT Coordinator designated by ECOVE, the Interim Reports are sent by the EAEVE Office to ECOVE for consideration during its next meeting.

The Interim Reports and their reviews by the Coordinator must be completed in agreement with the templates and guidelines provided in Annex 14.

In case of absence of an Interim Report or evidence in the Interim Report of potential major issues, ECOVE may ask for further information from the VEE.
If the VEE does not reply within 30 calendar days, and/or does not provide a convincing plan for correcting these major issues, ECOVE may decide to send an ESEVT Coordinator on site (at the cost of the VEE) and based on the feedback of the Coordinator may as a last resort decide to reclassify the VEE's Accreditation status to Pending Accreditation status.
In such a case, a Re-visitation must be completed in agreement with Chapter 2, point 2.

Chapter 3. ESEVT Standards for Accreditation

(as approved by the EAEVE General Assembly on 8 June 2023)

Introduction

ESEVT's principal aim in setting standards, and evaluating the VEE against them, is to ensure that the VEE:

- 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
- provide an environmentally-conscious veterinary education
- operates a fair and reliable assessment system
- operates permanent QA and quality enhancement mechanisms
- demonstrates compliance with all the ESEVT Standards which when taken together provide an assurance that the veterinary degree meets the requirements of the EU Directives and the ESG recommendations, as well as ensures that its graduates will have acquired the relevant knowledge, skills and competences required for the entry-level of a veterinarian.

If a VEE offers more than one study programme leading to the degree of a veterinarian, the peculiarities of each programme must be described for each Standard.

Area 1. Objectives, Organisation and Quality Assurance Policy

Standard 1.1: The VEE must have as its main objective the provision, in agreement with the EU Directives and ESG Standards, of 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.
The VEE must develop and follow its mission statement which must embrace the ESEVT Standards.

Standard 1.2: The VEE 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.
The person responsible for the veterinary curriculum and the person(s) responsible for the professional, ethical, and teaching affairs of the Veterinary Teaching Hospital (VTH) must hold a veterinary degree.
The decision-making process, organisation and management of the VEE must allow implementation of its strategic plan and of a cohesive study programme, in compliance with the ESEVT Standards.

Standard 1.3: The VEE must have a strategic plan, which includes a SWOT analysis of its current activities, short- and medium-term objectives, and an operating plan with a timeframe and indicators for its implementation. The development and implementation of the VEE's

strategy must include a role for students and other stakeholders, both internal and external, and the strategy must have a formal status and be publicly available.

Standard 1.4: The VEE must have a policy and associated written procedures for the assurance of the quality and standards of its programmes and awards. It must also commit itself explicitly to the development of a culture which recognises the importance of quality, and QA within the VEE. To achieve this, the VEE must develop and implement a strategy for the continuous enhancement of quality.
The VEE must have a policy for academic integrity, i.e. the expectation that staff and students act with honesty, trust, fairness, respect and responsibility.

Standard 1.5: The VEE must provide evidence that it interacts with its stakeholders and the wider society. Such public information must be clear, objective and readily accessible; the information must include up-to-date information about the study programme.
The VEE's website must mention the VEE's ESEVT status and its last Self-Evaluation Report and Visitation Reports must be easily available to the public.

Standard 1.6: The VEE must monitor and periodically review its activities, both quantitative and qualitative, to ensure that they achieve the objectives set for them and respond to the needs of students and society. The VEE must make public how this analysis of information has been utilised in the further development of its activities and provide evidence as to the involvement of both students and staff in the provision, analysis and implementation of such data. Evidence must be provided that the QA loops are fully closed (Plan Do Check Adjust cycles) to efficiently enhance the quality of education.
Any action planned or taken as a result of this data analysis must be communicated to all those concerned.

Standard 1.7: The VEE must undergo external review through the ESEVT on a cyclical basis. Evidence must be provided of such external evaluation with the assurance that the progress made since the last ESEVT evaluation was linked to a continuous quality assurance process.

Area 2. Finances

Standard 2.1: Finances must be demonstrably adequate to sustain the requirements for the VEE to meet its mission and to achieve its objectives for education, research and services. The description must include both expenditures (separated into personnel costs, operating costs, maintenance costs and equipment) and revenues (separated into public funding, tuition fees, services, research grants and other sources).

Standard 2.2: Clinical and field services must function as instructional resources. The instructional integrity of these resources must take priority over the financial self-sufficiency of clinical services operations.
The VEE must have sufficient autonomy in order to use the resources to implement its strategic plan and to meet the ESEVT Standards.

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

Area 3. Curriculum

Standard 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. The curriculum must include the subjects (input) and must allow the acquisition of the Day One Competences (output) listed in the ESEVT SOP Annex 2.
This concerns:

- Basic Sciences
- Clinical Sciences in companion animals (including equine and exotic pets)
- Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management)
- Veterinary Public Health (including Food Safety and Quality)
- Professional Knowledge (including soft skills, e.g. communication, team working skills, management skills).

When part of the study programme cannot be organised because of imposed regulations or constraints, convincing compensations must be developed and implemented.

If a VEE offers more than one study programme to become a veterinarian, e.g. in different languages or in collaboration with other VEEs, all study programmes and respective curricula must be described separately in the SER. For each Standard, the VEE must explain if there are differences or not with the basic programme and all this information must be provided as a formal annex to the SER.
Similarly, if a VEE implements a tracking (elective) system in its study programme, it must provide a clear explanation of the tracking system in the SER.

Standard 3.2: Each study programme provided by the VEE must be competency-based and designed so that it meets the objectives set for it, including the intended learning outcomes. The qualification resulting from a programme must be clearly specified and communicated and must 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.
The VEE must provide proof of a QA system that promotes and monitors the presence of a teaching environment highly conducive to learning including self-learning. Details of the type, provision and updating of appropriate learning opportunities for the students must be clearly described, as well as the involvement of students.
The VEE must also describe how it encourages and prepares students for lifelong learning.

Standard 3.3: Programme learning outcomes must:

- ensure the effective alignment of all content, teaching, learning and assessment activities of the degree programme to form a cohesive framework
- include a description of Day One Competences
- form the basis for explicit statements of the objectives and learning outcomes of individual units of study
- be communicated to staff and students
- be regularly reviewed, managed and updated to ensure they remain relevant, adequate and are effectively achieved.

Standard 3.4: The VEE 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
- perform ongoing reviews and periodic in-depth reviews of the curriculum (at least every seven years) by involving staff, students and stakeholders; these reviews must lead to continuous improvement of the curriculum. Any action taken or planned as a result of such a review must be communicated to all those concerned
- identify and meet training needs for all types of staff, maintaining and enhancing their competence for the ongoing curriculum development.

Standard 3.5: Elective Practical Training (EPT) includes compulsory training activities that each student must achieve before graduation to complement and strengthen their core theoretical and practical academic education, inter alia by enhancing their experience, professional knowledge and soft skills. Like all elective activities, its contents may vary from one undergraduate student to another.
EPT is organised either extra-murally with the student being under the direct supervision of a qualified person (e.g. a veterinary practitioner) or intra-murally, with the student being under the supervision of a teaching staff or a qualified person.
EPT itself cannot replace the Core Clinical Training (CCT) under the close supervision of teaching staff (e.g. ambulatory clinics, herd health management, practical training in VPH (including Food Safety and Quality (FSQ)). A comparison between CCT and EPT is provided in Annex 6, Standard 3.5.

Standard 3.6: The EPT providers must meet the relevant national Veterinary Practice Standards, have an agreement with the VEE and the student (stating 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 VEE on the EPT programme.
There must be a member of the teaching staff responsible for the overall supervision of the EPT, including liaison with EPT providers.

Standard 3.7: 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 VEE and evaluating the EPT. Students must be allowed to complain officially and/or anonymously about issues occurring during EPT. The VEE must have a system of QA to monitor the implementation, progress and then feedback within the EPT activities.

Area 4. Facilities and equipment

Standard 4.1: All aspects of the physical facilities must provide an environment conducive to learning, including internet access at all relevant sites where theoretical, practical and clinical education takes place. The VEE must have a clear strategy and programme for maintaining and upgrading its buildings and equipment. Facilities must comply with all relevant legislation

including health, safety, biosecurity, accessibility to people including students with a disability, and EU animal welfare and care standards.

Standard 4.2: Lecture theatres, teaching laboratories, tutorial rooms, clinical facilities and other teaching spaces must be adequate in number and size, equipped for instructional purposes and well maintained. The facilities must be adapted for the number of students enrolled. Students must have ready access to adequate and sufficient study, self-learning, recreation, locker, sanitary and food service facilities.
Offices, teaching preparation and research laboratories must be sufficient for the needs of the teaching and support staff to support their teaching and research efforts.

Standard 4.3: The livestock facilities, animal housing, core clinical teaching facilities and equipment used by the VEE for teaching purposes must:

- be sufficient in capacity and adapted for the number of students enrolled in order to allow safe hands-on training for all students
- be of a high standard, well maintained and fit for the purpose
- promote best husbandry, welfare and management practices
- ensure relevant biosecurity
- take into account environmental sustainability
- be designed to enhance learning.

Standard 4.4: Core clinical teaching facilities must be provided in a veterinary teaching hospital (VTH) with 24/7 emergency services at least for companion animals and equines. Within the VTH, the VEE must unequivocally demonstrate that the standard of education and clinical research is compliant with all ESEVT Standards, e.g. research-based and evidence-based clinical training supervised by teaching 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, on-call service must be available if emergency services do not exist for those species in a VTH.
The VEE must ensure state-of-the-art standards of teaching clinics which remain comparable with or exceed the best available clinics in the private sector.
The VTH and any hospitals, practices and facilities which are involved with the core curriculum must be compliant with the ESEVT Standards and meet the relevant national Veterinary Practice Standards.

Standard 4.5: The VEE must ensure that students have access to a broad range of diagnostic and therapeutic facilities, including but not limited to clinical skills laboratory, diagnostic imaging, clinical pathology, anaesthesia, surgeries and treatment facilities, intensive/critical care, ambulatory services, pharmacy and necropsy facilities. Procedures and facilities should also be available for soft skills training, e.g. communication skills training through role-play.

Standard 4.6: 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 the prevention of the spread of infectious agents, animal care and student training. They must be adapted to all animal species commonly handled in the VTH. When permanent isolation facilities are not available in any of the facilities used for clinical training, the ability to provide such facilities

and the procedures to use them appropriately in an emergency must be demonstrated during the visitation.

Standard 4.7: The VEE must have an ambulatory clinic for production animals or equivalent facilities so that students can practise field veterinary medicine and Herd Health Management under the supervision of teaching staff.

Standard 4.8: 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 animal welfare, and to prevent the spread of infectious agents.

Standard 4.9: Operational policies and procedures (including biosecurity, good laboratory practice and good clinical practice) must be taught and posted (in different languages if the curriculum is taught in them) for students, staff and visitors and a biosecurity manual must be developed and made easily available for all relevant persons. The VEE must demonstrate a clear commitment for the delivery and the implementation of biosecurity, e.g. by a specific committee structure. The VEE must have a system of QA to monitor and assure clinical, laboratory and farm services, including regular monitoring of the feedback from students, staff and clients.

Area 5. Animal resources and teaching material of animal origin

Standard 5.1: The number and variety of healthy and diseased animals, first opinion and referral cases, cadavers, and material of animal origin must be adequate for providing the practical and safe hands-on training in all relevant areas and adapted to the number of students enrolled. Evidence must be provided that these data are regularly recorded and that procedures are in place for correcting any deficiencies.

Standard 5.2: In addition to the training provided in the VEE, experience can include practical training at external sites, provided this training is organised under the supervision of teaching staff and follows the same standards as those applied in the VEE.

Standard 5.3: The VTH must provide nursing care skills and instruction in nursing procedures. Under all situations students must be active participants in the clinical workup of patients, including problem-oriented diagnostic approach together with diagnostic decision-making.

Standard 5.4: Medical records for patients seen intra- and extra-murally under Core Clinical Training (CCT) must be comprehensive and maintained in an effective retrieval system to efficiently support the teaching and learning, research, and service programmes of the VEE.

Area 6. Learning resources

Standard 6.1: State-of-the-art learning resources must be adequate and available to support veterinary education, research, services and continuing education. Learning resources must be suitable to implement teaching facilities to secure the ‘never the first time on a live animal’ concept. When the study programme is provided in several tracks/languages, the learning resources must be available in all used languages. 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, together with basic English teaching if necessary.

Standard 6.2: Staff and students must have full access on site to an academic library administered by a qualified librarian, an Information Technology (IT) unit managed by a qualified IT person, an e-learning platform, and the relevant human and physical resources necessary for the development of instructional materials by the staff and their use by the students.
The relevant electronic information, database and other intranet resources must be easily available for students and staff both in the VEE's core facilities via wireless connection (Wi-Fi) and from outside the VEE through a hosted secured connection, e.g. Virtual Private Network (VPN).

Standard 6.3: The VEE must provide students with unimpeded access to learning resources, internet and internal study resources, as well as facilities and equipment for the development of procedural skills (e.g. clinical skills laboratory). 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 changes in learning resources.

Area 7. Student admission, progression and welfare

Standard 7.1: The VEE must consistently apply pre-defined and published regulations covering all phases of the student "life cycle", e.g. student admission, progression and certification.
In relation to enrolment, the VEE must provide accurate and complete information regarding the educational programme in all advertisements for prospective national and international students.
Formal cooperation with other VEEs must also be clearly advertised.

Standard 7.2: The number of students admitted must be consistent with the resources available at the VEE for staff, buildings, equipment, healthy and diseased animals, and materials of animal origin.

Standard 7.3: The selection and progression criteria must be clearly defined, consistent, and defensible, be free of discrimination or bias, and take into account the fact that students are admitted with a view to their entry to the veterinary profession in due course.
The VEE must regularly review and reflect on the selection processes to ensure they are appropriate for students to complete the programme successfully. If the selection processes are decided by another authority, the latter must regularly receive feedback from the VEE.
Adequate training (including periodic refresher training) must be provided for those involved in the selection process to ensure applicants are evaluated fairly and consistently.

Standard 7.4: There must be clear policies and procedures on how applicants with disabilities or illnesses are 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.

Standard 7.5: The basis for decisions on progression (including academic progression and professional fitness to practise) must be explicit and readily available to the students. The VEE

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.
The VEE 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.

Standard 7.6: Mechanisms for the exclusion of students from the programme for any reason must be explicit.
The VEE's policies for managing appeals against decisions, including admissions, academic and progression decisions and exclusion, must be transparent and publicly available.

Standard 7.7: Provisions must be made by the VEE to support the physical, emotional and welfare needs of students. This includes but is not limited to learning support and counselling services, career advice, and fair and transparent mechanisms for dealing with student illness, impairment and disability during the programme. This shall include provision for disabled students, consistent with all relevant equality, diversity and/or human rights legislation.
There must be effective mechanisms for the resolution of student grievances (e.g. interpersonal conflict or harassment).

Standard 7.8: Mechanisms must be in place by which students can convey their needs and wants to the VEE. The VEE must provide students with a mechanism, anonymously if they wish, to offer suggestions, comments and complaints regarding the compliance of the VEE with national and international legislation and the ESEVT Standards.

Area 8. Student assessment

Standard 8.1: The VEE must ensure that there is a clearly identified structure within the VEE 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.

Standard 8.2: The assessment tasks and grading criteria for each unit of study in the programme must be published, applied consistently, clearly identified and available to students in a timely manner well in advance of the assessment. Requirements to pass must be explicit.
The VEE must properly document the results of assessment and provide the students with timely feedback on their assessments.
Mechanisms for students to appeal against assessment outcomes must be explicit.

Standard 8.3: The VEE must have a process in place to review assessment outcomes, to change assessment strategies and to ensure the accuracy of the procedures when required. 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.

Standard 8.4: Assessment strategies must allow the VEE to certify student achievement of learning objectives at the level of the programme and individual units of study.
The VEE 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.

Standard 8.5: Methods of formative and summative assessment must be valid and reliable and comprise a variety of approaches. Direct assessment of the acquisition 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 regular quality control of the student logbooks, with a clear distinction between what is completed under the supervision of teaching staff (Core Clinical Training (CCT)) or under the supervision of a qualified person (EPT). The clear distinction between CCT and EPT ensures that all clinical procedures, practical and hands-on training planned in the study programme have been fully completed by each individual student. The provided training and the global assessment strategy must provide evidence that only students who are Day One Competent are able to graduate.

Area 9. Teaching and support staff

Standard 9.1: The VEE must ensure that all staff are appropriately qualified and prepared for their roles, in agreement with national and EU regulations and must apply fair and transparent processes for the recruitment and development of staff.
A formal quality-assured programme of teacher training (including good teaching and evaluation practices, learning and e-learning resources, use of digital tools education, biosecurity and QA procedures) must be in place for all staff involved with teaching. Such training must be mandatory for all newly appointed teaching staff and encouraged on a regular basis for all teaching staff.
Most teaching staff (calculated as FTE) involved in core veterinary training must be veterinarians. It is expected that more than 2/3 of the instruction that the students receive, as determined by student teaching hours, is delivered by qualified veterinarians.

Standard 9.2: The total number, qualifications and skills of all staff involved with the study programme, including teaching, technical, administrative and support staff, must be sufficient and appropriate to deliver the study programme and fulfil the VEE's mission.
A procedure must be in place to assess if the staff involved with teaching 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, teaching or support staff, senior or junior, permanent or temporary teachers. Guidelines for the minimum training to teach and to assess are provided in Annex 6, Standard 9.1.

Standard 9.3: Staff must be given opportunities to develop and extend their teaching and assessment knowledge and must be encouraged to improve their skills. Opportunities for didactic and pedagogic training and specialisation must be available. The VEE must clearly define systems of reward for teaching excellence in operation.
Teaching positions must offer the security and benefits necessary to maintain the stability, continuity, and competence of the teaching staff. Teaching staff must have a balanced workload of teaching, research and service depending on their role. They must have reasonable opportunities and resources for participation in scholarly activities.

Standard 9.4: The VEE must provide evidence that it utilises a well-defined, comprehensive and publicised programme for the professional growth and development of teaching and support staff, including formal appraisal and informal mentoring procedures.
Staff must have the opportunity to contribute to the VEE's direction and decision-making processes.

Promotion criteria for teaching 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 9.5: A system for assessment of teaching and teaching staff must be implemented on a cyclical basis and must formally include student participation. Results must be communicated to the relevant staff and commented upon in reports. Evidence must be provided that this system contributes to correcting deficiencies and to enhancing the quality and efficiency of education.

Area 10. Research programmes, continuing and postgraduate education

Standard 10.1: The VEE must demonstrate significant and broad research activities of teaching staff that integrate with and strengthen the study programme through research-based teaching. The research activities must include veterinary basic and clinical sciences. Evidence must be provided that most teaching staff are actively involved with research programmes (e.g. via research grants, publications in congress proceedings and in peer-reviewed scientific journals).

Standard 10.2: All students must be trained in scientific methods and research techniques relevant to evidence-based veterinary medicine and must have opportunities to participate in research programmes.

Standard 10.3: The VEE must provide advanced postgraduate degree programmes, e.g. PhD, internships, residencies and continuing education programmes that complement and strengthen the study programme and are relevant to the needs of the profession and society.

Standard 10.4: The VEE must have a system of QA to evaluate how research activities provide opportunities for student training and staff promotion, and how research approaches, methods and results are integrated into the study programme.

Annex 1. EU Directive on the recognition of professional qualifications (Directive 2013/55/EU)

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 2013/55/EU 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 recognised as being of an equivalent level, or under the supervision of a university, covering at least the study programme referred to in point 5.4.1 of Annex V (of Directive 2005/36/EC).

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

(a) adequate knowledge of the sciences on which the activities of a veterinarian are based and of the Union law relating to those activities;

(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;

(d) adequate knowledge, skills and competences for preventive medicine, including competences relating to inquiries and certification;

(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;

(f) the knowledge, skills and competences required for the responsible and sensible use of veterinary medicinal products, in order to treat the animals and to ensure the safety of the food chain and the protection of the environment.'

Annex 2. List of subjects and Day One Competences

(as approved by ECCVT on 30 March 2023)

Forewords

A. Competence is a concept that integrates knowledge, skills and attitudes. Competence requires acquisition of technical skills but further involves applying relevant knowledge and having the confidence and ability to transfer what has been learnt to a variety of contexts.

B. In order to facilitate for VEEs to meet the requirements of the overall basic veterinary competence that the EU has established, it needs to be broken down to more specific "Day One Competences", which are linked to regularly updated EU regulations.

C. Overall basic competence should encompass all references in the different pieces of the EU legislation to ensure consistency in the recognition of professional qualifications in the European Union and beyond.

D. 'Day One Competences' is the minimum standard required for newly graduated veterinarians and is the starting point for a variety of roles in the veterinary profession. After graduation, ongoing professional development will be needed in whichever field the new graduate decides to enter, and some roles may require postgraduate training and further formal qualifications (e.g. Diplomate of a European College, PhD, which are not covered under the Day One Competences).

E. New graduates who have achieved Day One Competences should be capable to independently perform appropriate entry-level tasks and duties of the veterinary profession and confident enough to practise veterinary medicine at a primary level on their own, while knowing when it is appropriate to seek direction from more experienced colleagues. New graduates are likely to need more time to perform some procedures. Support and direction from more senior colleagues should be available.

F. VEEs are responsible for developing the Day One Competences of their students and ensuring that they have met the competences by the time they graduate. They may be assisted in this by external entities, which provide EPT so that students can apply these competences in the workplace.

G. The proposed Day One Competences are not listed in order of importance.

1. Day One Competences

1.1 Act in a way that shows understanding of the ethical and legal framework within which veterinarians should work, including professional-, animal welfare-, client-, public health-, societal- and environmental-related aspects.
1.2 Understand scientific research methods, the contribution of basic and applied research to science and implementation of the 3Rs principle (Replacement, Reduction, Refinement).
1.3 Demonstrate a basic knowledge of the organisation, management and legislation related to veterinary practice. Understand the economic and emotional context in which the veterinarian operates.

1.4 Promote, monitor and contribute to maintaining health and safety of oneself, patients, clients, colleagues and the environment in the veterinary setting; demonstrate knowledge about the principles of quality assurance; apply principles of risk management in practice.
1.5 Communicate effectively with clients, the public, professional colleagues and responsible authorities, using language appropriate to the audience concerned and in full respect of confidentiality and privacy.
1.6 Implement principles of effective interpersonal interaction, including communication, leadership, management, team working, mutual respect and other soft skills.
1.7 Prepare accurate clinical and client records, and case reports when necessary, in a form satisfactory to the relevant audiences.
1.8 Work effectively as a member of a multidisciplinary team in the delivery of services and recognise the contribution of all team members.
1.9 Be able to review and evaluate literature and presentations critically.
1.10 Understand and apply principles of One Health to ensure veterinary Good Clinical Practice, and research-based and evidence-based veterinary medicine.
1.11 Demonstrate ability to critically analyse evidence, cope with incomplete information, deal with contingencies, and adapt knowledge and skills to varied scenarios and contexts.
1.12 Use of professional capabilities to contribute to the advancement of veterinary knowledge and the One Health concept, in order to promote the health, safety and welfare of animals, people and the environment, as well as the United Nations Sustainable Development Goals.
1.13 Demonstrate the ability to recognise personal and professional limits, and know how to seek professional advice, assistance and support when necessary.
1.14 Demonstrate a commitment to lifelong learning and to professional development. This includes recording and reflecting on professional experience and taking measures to improve performance and competence.
1.15 Engage in self-audit and peer-group review processes on a regular basis in order to improve performance.
1.16 Obtain an accurate and relevant history of the individual animal or animal group, and its/their husbandry and environment.
1.17 Handle and restrain animal patients safely and with respect of the animal and instruct others in helping the veterinarian to perform these techniques.
1.18 Perform a complete clinical examination and demonstrate ability in clinical decision-making.
1.19 Develop appropriate treatment plans and administer treatment in the interest of the animal under their care with regard to the resources available and to appropriate public health and environmental considerations.
1.20 Attend in an emergency and perform first aid in common animal species*. Prioritise situational urgency and allocate resources accordingly.
1.21 Assess the physical condition, welfare and nutritional status of an animal or group of animals and advise the client on principles of husbandry, feeding, reproduction, production, welfare, individual health, herd health and public health.
1.22 Collect, preserve and transport samples, select appropriate diagnostic tests, interpret and understand the limitations of the test results.
1.23 Communicate clearly and collaborate with referral and diagnostic services, including providing an appropriate history.
1.24 Use basic diagnostic equipment and carry out an examination effectively as appropriate to the case, in accordance with good health and safety practice and current regulations. Understand the contribution of digital tools and artificial intelligence in veterinary medicine.
1.25 Recognise signs of possible notifiable, reportable and zoonotic diseases as well as abuse of animals and take appropriate action, including notifying the relevant authorities.

1.26 Access the appropriate sources of data on information and legislation relating to animal care and welfare, animal movement, notifiable and reportable diseases, use of medicines, including responsible use of antimicrobials.
1.27 Prescribe and dispense medicines correctly and responsibly in accordance with legislation and latest guidance.
1.28 Report suspected adverse reactions through the appropriate channel.
1.29 Recommend and evaluate protocols for biosecurity, and apply these principles correctly.
1.30 Perform aseptic procedures appropriately.
1.31 Safely perform sedation and general and regional anaesthesia; implement chemical methods of restraint.
1.32 Prevent, assess and manage pain.
1.33 Recognise when euthanasia is appropriate and perform it with respect of the animal and its owners, using an appropriate method, with due regard to the safety of those present; advise on ethical and legal disposal of the carcass.
1.34 Perform necropsy in all common animal species, including sampling, dispatching and reporting.
1.35 Perform ante-mortem inspection of food-producing animals including paying attention to welfare aspects, systematic gross post-mortem examination, record observations, sample tissues, store and transport them.
1.36 Perform inspection of food and feed to correctly identify conditions affecting the quality and safety of products of animal origin, including related food technology.
1.37 Protect public health by identifying conditions that are directly or indirectly related to animals, their products and by-products, when they contribute to the protection, conservation and improvement of human health.
1.38 Advise on and implement preventive and eradication programmes appropriate to the disease and species, in line with accepted animal health, animal welfare, public health and environmental health standards.

2. List of subjects

The programme of studies leading to the evidence of formal qualifications in veterinary medicine shall include at least the subjects listed below.
Instruction in one or more of these subjects may be given as part of, or in association with, other courses.
Although all subjects are listed into one category, some of them relate to more than one category. The subjects linked to Professional Knowledge are included in the listed categories.

2.1. Basic Subjects

- Medical physics
- Chemistry (inorganic and organic sections)
- Animal biology, zoology and cell biology
- Feed plants and toxic plants
- Biomedical statistics

2.2. Specific veterinary subjects

2.2.1. Basic Sciences:

- Anatomy, histology and embryology
- Physiology
- Biochemistry
- General and molecular genetics
- Pharmacology, pharmacy and pharmacotherapy
- Pathology
- Toxicology
- Parasitology
- Microbiology
- Immunology
- Epidemiology
- Information literacy and data management
- Professional ethics and communication
- Animal health economics and practice management
- Animal ethology
- Animal welfare
- Animal nutrition

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

- Obstetrics, reproduction and reproductive disorders
- Diagnostic pathology
- Medicine
- Surgery
- Anaesthesiology and analgesia
- Clinical practical training in common companion animals*
- Infectious diseases
- Preventive medicine
- Diagnostic imaging
- Therapy in common companion animals*

2.2.3. Clinical Sciences in food-producing animals (including Animal production and Herd Health Management):

- Obstetrics, reproduction and reproductive disorders
- Diagnostic pathology
- Medicine
- Surgery
- Anaesthesiology and analgesia
- Clinical practical training in common food-producing animals*
- Infectious diseases
- Preventive medicine
- Diagnostic imaging
- Therapy in common food-producing animals*
- Animal production, including breeding, husbandry and economics
- Herd health management

2.2.4. Veterinary Public Health (including Food Safety and Quality):

- Veterinary legislation including official controls, regulatory veterinary services, forensic veterinary medicine and certification
- Control of food, feed and animal by-products
- Zoonoses and their prevention
- Food hygiene and environmental health
- Basic food technology

*Common animal species as described in the list of Indicators of the ESEVT SOP.

The content and distribution of the theoretical, practical and clinical training among the various groups of subjects must be balanced and coordinated in such a way that the knowledge and experience may be acquired in a manner which will enable the veterinarian to perform all their duties in a responsible and ethical manner.

Annex 3. List of European Standards for Quality Assurance in the European Higher Education Area

(as approved by the European Ministerial Conference on 15 May 2015)

Part 1: Standards for internal quality assurance

1.1 Policy for quality assurance

Institutions should have a policy for quality assurance that is made public and forms part of their strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes, while involving external stakeholders.

1.2 Design and approval of programmes

Institutions should have processes for the design and approval of their programmes. The programmes should be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme should 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.

1.3 Student-centred learning, teaching and assessment

Institutions should 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.

1.4 Student admission, progression, recognition and certification

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

1.5 Teaching staff

Institutions should assure themselves of the competence of their teachers. They should apply fair and transparent processes for the recruitment and development of the staff.

1.6 Learning resources and student support

Institutions should have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided.

1.7 Information management

Institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.

1.8 Public information

Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to date and readily accessible.

1.9 On-going monitoring and periodic review of programmes

Institutions should 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 should lead to continuous improvement of the programme. Any action planned or taken as a result should be communicated to all those concerned.

1.10 Cyclical external quality assurance
Institutions should undergo external quality assurance in line with the ESG on a cyclical basis.

Part 2: Standards for external quality assurance

2.1 Consideration of internal quality assurance
External quality assurance should address the effectiveness of the internal quality assurance described in Part 1 of the ESG.

2.2 Designing methodologies fit for purpose
External quality assurance should be defined and designed specifically to ensure its fitness to achieve the aims and objectives set for it, while taking into account relevant regulations. Stakeholders should be involved in its design and continuous improvement.

2.3 Implementing processes
External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include

- a self-assessment or equivalent;
- an external assessment normally including a site visit;
- a report resulting from the external assessment;
- a consistent follow-up.

2.4 Peer-review experts
External quality assurance should be carried out by groups of external experts that include (a) student member(s).

2.5 Criteria for outcomes
Any outcomes or judgements made as the result of external quality assurance should be based on explicit and published criteria that are applied consistently, irrespective of whether the process leads to a formal decision.

2.6 Reporting
Full reports by the experts should be published, clear and accessible to the academic community, external partners and other interested individuals. If the agency takes any formal decision based on the reports, the decision should be published together with the report.

2.7 Complaints and appeals
Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions.

Part 3: Standards for quality assurance agencies

3.1 Activities, policy and processes for quality assurance
Agencies should undertake external quality assurance activities as defined in Part 2 of the ESG on a regular basis. They should have clear and explicit goals and objectives that are part of their

publicly available mission statement. These should translate into the daily work of the agency. Agencies should ensure the involvement of stakeholders in their governance and work.

3.2 Official status
Agencies should have an established legal basis and should be formally recognised as quality assurance agencies by competent public authorities.

3.3 Independence
Agencies should be independent and act autonomously. They should have full responsibility for their operations and the outcomes of those operations without third party influence.

3.4 Thematic analysis
Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities.

3.5 Resources
Agencies should have adequate and appropriate resources, both human and financial, to carry out their work.

3.6 Internal quality assurance and professional conduct
Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities.

3.7 Cyclical external review of agencies
Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG.

Annex 4. ESEVT Indicators

(as approved by the EAEVE Executive Committee on 7 June 2023)

Introduction

1. Indicators are to be used in a non-prescriptive way in the evaluation of a VEE. They reflect its given situation at the time of the Visitation, allowing for EAEVE to compare between VEEs and to recognise trends.
2. The Indicators are calculated from data which are the means of the last three complete academic years, in order to smooth the annual variations and to avoid temporary improvements restricted to the period of the visitation.
3. In case of tracking (options), the relevant Indicators (I4 to I7) are calculated on the basis of the teaching provided to all undergraduate students, independently of their track. The specific values for each track are provided as an annex.
4. A specific Indicator must not be interpreted in a strictly mathematical and isolated sense but in the light of all other Indicators and data. For instance, for a specific species, a low number of intra-mural patients may be compensated by a high number of extra-mural patients seen by students under the supervision of a staff member or otherwise qualified and quality-assured veterinarians.
5. The recommended minimal values approved by ExCom are equal to the 20th percentile, i.e. the value below which 20% of the values from VEEs with Accreditation status are currently found. These minimal values do not serve as lower threshold levels but are interpreted as a complex set of data in the light of all other observations made.
6. The Indicators are calculated by using the relevant Excel file available on the EAEVE website. The two sheets of the Excel file must be sent by the VEE to all members of the Full Visitation Team and to the EAEVE Office by email together with the SER and the SER Appendices two months before the start of the visitation at the latest.
7. The two sheets of the Excel file must also be included at the end of the SER. These proposed Indicators are reviewed by the Coordinator (helped by all Team members) during the site visitation and the copy validated by the Full Visitation Team is incorporated in the Full Visitation Report.

List of Indicators

Staff and students

I1: n° of FTE teaching staff involved in veterinary training[1] / n° of undergraduate students[2]

I2: n° of FTE veterinarians involved in veterinary training[3] / n° of students graduating annually[4]

I3: n° of FTE support staff involved in veterinary training[5] / n° of students graduating annually[4]

Types of training

I4: n° of hours of practical (non-clinical) training[6]

I5: n° of hours of Core Clinical Training (CCT)[7]

I6: n° of hours of VPH (including FSQ) training[8]

I7: n° of hours of extra-mural practical training in VPH (including FSQ)[9]

Patients available for clinical training under the supervision of teaching staff

I8: n° of companion animal patients seen intra-murally[10] and extra-murally[14] / n° of students graduating annually[4]

I9: n° of individual ruminants and pig patients seen intra-murally[11] and extra-murally[15] / n° of students graduating annually[4]

I10: n° of equine patients seen intra-murally[12] and extra-murally[16] / n° of students graduating annually[4]

I11: n° of rabbit, rodent, bird and exotic patients seen intra-murally[13] and extra-murally[17] /n° of students graduating annually[4]

Animals/herds/units available for extra-mural clinical training

I12: n° of visits to ruminant and pig herds[18] / n° of students graduating annually[4]

I13: n° of visits to poultry, rabbit, fish and bee units[19] / n° of students graduating annually[4]

Necropsies available for clinical training

I14: n° of companion animal necropsies[20] / n° of students graduating annually[4]

I15: n° of ruminant and pig necropsies[21] / n° of students graduating annually[4]

I16: n° of equine necropsies[22] / n° of students graduating annually[4]

I17: n° of rabbit, rodent, bird and exotic pet necropsies[23] / n° of students graduating annually[4]

Post-graduate degrees

I18: n° of FTE specialised veterinarians involved in veterinary training[24] / n° of students graduating annually[4]

I19: n° of PhD-students graduating annually[25] / n° of students graduating annually[4]

Appendix explaining the calculation of the Indicators

All values represent an annual average calculated from the last 3 complete academic years. All values (except I18 and I19) concern the training of undergraduate veterinary students.

[1] Total number of full-time equivalent (FTE) teaching staff in veterinary training (e.g. 100 persons employed full-time (100%) + 50 persons employed half-time (50%) + 10 persons employed quarter-time (25%) = 127.5 FTEs).
Post-graduate students who are registered for a specialised or doctoral degree (i.e. interns, residents, PhD students or equivalent postgraduate students) are not included in these figures unless they are paid and trained to regularly perform structured theoretical, practical and/or clinical training (for a minimal of 10% and for a maximum of 50% of their annual workload) and are supervised by permanent teaching staff (e.g. 10 residents employed half-time (50%) for clinical training of undergraduate students + 8 PhD students employed quarter-time (25%) for practical training of undergraduate students = 7 FTEs).
Researchers, invited speakers, unpaid lecturers, practitioners supervising EPT and other persons who only occasionally contribute to the training of undergraduate students are not included in these figures but should be reported for information in the SER.

[2] Total number of undergraduate veterinary students. These students must be officially registered in the database of the VEE.

[3] Total number of FTE veterinarians (DVM or equivalent degree) in veterinary training.

[4] Total number of graduate veterinary students. These students must be officially granted the veterinary degree (i.e. at least five years of full-time theoretical and practical study in agreement with the EU Directives) provided by the VEE being evaluated.

[5] Total number of FTE support staff involved in veterinary training. Only support staff who are dedicated to administrative, teaching or research tasks related to students and to care of facilities, equipment or animals in the VEE are taken into account in the Indicators.

[6*] Total number of hours of supervised practical (non-clinical) training. It includes inter alia laboratory experiments, microscopic examination of histological and pathological specimens, work on documents and idea-formulation without the handling of animals (e.g. assay work, clinical case studies, handling of herd-health monitoring programmes, risk assessment for VPH, computer-aided exercises), work on healthy animals (e.g. physiology, ante mortem inspection), work on cadavers, carcasses and organs (e.g. dissection, post mortem inspection, Food Safety and Quality).

[7*] Total number of hours of Core Clinical Training (CCT) under the supervision of teaching staff (this does not include EPT). This training 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 healthy animals in a clinical environment.
Propaedeutics, 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.

[8*] Total number of hours of theoretical and practical training in Veterinary Public Health (VPH) (including Food Safety and Quality (FSQ)).

[9*] Total number of hours of extra-mural practical training in VPH (including FSQ) (e.g. slaughterhouses, meat inspections, VPH institutes).

[10**] Total number of companion animal (dogs and cats) patients seen intra-murally (e.g. at the VTH). Each patient must be officially recorded in the electronic patient record system of the VEE and must be individually examined/treated by at least one student under the supervision of at least one member of staff. Patients seen during EPT are not taken into account in the Indicators.

[11**] Total number of individual ruminant and pig patients seen intra-murally (e.g. at the VTH). Each patient must be officially recorded in the electronic patient record system of the VEE and must be individually examined/treated by at least one student under the supervision of at least one member of staff. Patients seen during EPT are not taken into account in the Indicators.

[12**] Total number of equine patients seen intra-murally (e.g. at the VTH). Each patient must be officially recorded in the electronic patient record system of the VEE and must be individually examined/treated by at least one student under the supervision of at least one member of staff. Patients seen during EPT are not taken into account in the Indicators.

[13**] Total number of rabbit, rodent, bird and exotic pet patients seen intra-murally (e.g. at the VTH). Each patient must to be officially recorded in the electronic patient record system of the VEE and must be individually examined/treated by at least one student under the supervision of at least one member of staff. Patients seen during EPT are not taken into account in the Indicators.

[14**] Total number of companion animal (dogs and cats) patients seen extra-murally (e.g. dispensaries). Each patient must be officially recorded in the electronic patient record system of the VEE and must be individually examined/treated by at least one student under the supervision of at least one member of staff. Patients seen during EPT are not taken into account in the Indicators.

[15**] Total number of individual ruminant and pig patients seen extra-murally (e.g. ambulatory clinics). Each patient must be officially recorded and must be individually examined/treated by at least one student under the supervision of at least one member of staff. Patients seen during EPT are not taken into account in the Indicators.

[16**] Total number of equine patients seen extra-murally (e.g. training centres). Each patient must be officially recorded and must be individually examined/treated by at least one student under the supervision of at least one member of staff. Patients seen during EPT are not taken into account in the Indicators.

[17**] Total number of rabbit, rodent, bird and exotic patients seen extra-murally (e.g. dispensaries). Each patient must be officially recorded and must be individually examined/treated by at least one student under the supervision of at least one member of staff. Patients seen during EPT are not taken into account in the Indicators.

[18] Total number of visits to ruminant and pig herds under the close supervision of teaching staff.

[19] Total number of visits to poultry, farmed rabbit, fish and bee units under the close supervision of teaching staff.

[20] Total number of necropsies carried out on whole carcasses of companion animals (dogs and cats).

[21] Total number of necropsies carried out on whole carcasses of ruminants and pigs.

[22] Total number of necropsies carried out on whole carcasses of equines.

[23] Total number of necropsies carried out on whole carcasses of rabbits, rodents, birds and exotic pets. Necropsies of other animals (e.g. sea mammals, wild animals) must be mentioned in the SER in Table 5.1.6. under 'Others'.

[24] Total number of FTE specialised veterinarians in veterinary training. The specialised veterinary status must be officially recognised by the relevant National Accreditation body for national specialisations and/or by the European and/or American Board of Veterinary Specialisation (EBVS/ABVS).

[25] Total number of graduate students who are officially granted a third cycle degree (PhD or equivalent doctoral degrees in agreement with the relevant EU directives).

* The number of hours given in items 6 to 9 must apply to ALL undergraduate veterinary students, independently of electives/tracking. Specific data for each track (i.e. pre-specialisation) may be given in an annex.

** Each live animal having received a healthcare procedure (e.g. vaccination, diagnostic imaging, surgery) or treated for one specific clinical episode during a year is counted as one single patient, even if it has been examined/treated by several departments/units/clinics (including revisions). Only other visits of the same animal with a different condition would be considered as a different patient in the given year.

Annex 5. Fees for the ESEVT

(as approved by the EAEVE Executive Committee on 27 May 2026)

The fees for the ESEVT and the penalty fee for visitation cancellation/postponement not linked to force majeure circumstances (e.g. natural disaster), are decided every year by the EAEVE General Assembly under Financial matters.

With effect from the General Assembly 2025, the merged membership and evaluation fee (MEF) is € 4.725 per year for Full members and € 3.037,50 for Candidate and Associate members. This fee must be paid by 1st April of each year at the latest.

VEEs not in order of payment are neither allowed to vote at the General Assembly nor to be evaluated by the ESEVT.

As decided by the General Assembly 2025, the Re-visitation fee is € 3.090 in 2025 and € 3.182,70 after the GA 2026, and the Preliminary Visitation fee is € 5.625 in 2025 and € 6.046,88 after the GA 2026. The penalty fee for visitation cancellation or postponement not linked to force majeure circumstances (e.g. natural disaster) is € 4.500 in 2025 and € 4.837,50 after the GA 2026.

Annex 6. Template and guidelines for the writing of the SER

(as approved by the EAEVE Executive Committee on 7 April 2025)

Forewords (to be read before the writing of the SER)

The SER is the cornerstone of the evaluation process. It must be the result of an in-depth review of the VEE and the education and training it provides to prepare its students to qualify to join the veterinary profession.

It is strongly recommended that the preparation of the SER begins about one year before the Full Visitation at the latest, involves key members of staff in its preparation and is approved by the VEE's governing body.

Two months before the Full Visitation at the latest, the SER and its Appendices (in both PDF and Word format) and the two sheets of the Indicators (in Excel format) must be sent by the VEE to all members of the Full Visitation Team and to the EAEVE Office by e-mail, and it is up to the Visitors to decide whether they would like to receive a hard copy of the document in addition to the e-copy (it is the duty of the Liaison Officer to enquire about the Visitors' preference in this respect before the SER due date). The EAEVE Office does not need to receive a hard copy of the SER.

The SER must be concise ***(maximum 100 pages, without the Appendices, written in Times New Roman font, size 12, single spacing),*** *complete, accurate and written in English in agreement with this template. An inadequate SER may be considered by ECOVE as a Major Deficiency, e.g. non-compliance with Standard 1.5.*

All Standards must be addressed with Factual Information, Comments (e.g. subjective information, current limiting factors of improvement) and Suggestions for Improvement (e.g. list of desired/planned/ongoing changes in descending order of importance). All the questions in the template must be answered. If there is no activity in the VEE which corresponds to the question, 'not applicable' must be stated. ***The term 'student' used alone means undergraduate student.***

The texts in italics in this template must be deleted in the final version of the SER.

Long lists of explanatory material and extracts of official texts must be excluded from the core SER and provided as Appendices (with cross-reference in the core SER) or provided during the Visitation in the Team room.

The SER and the Full Visitation Report, which are considered confidential until the final decision of ECOVE, are eventually published on the websites of the VEE, EAEVE and DEQAR.

Contents of the SER

Introduction
Area 1. Objectives, Organisation and Quality Assurance Policy
Area 2. Finances
Area 3. Curriculum

Area 4. Facilities and equipment
Area 5. Animal resources and teaching material of animal origin
Area 6. Learning resources
Area 7. Student admission, progression and welfare
Area 8. Student assessment
Area 9. Teaching and support staff
Area 10. Research programmes, continuing and postgraduate education
List of ESEVT Indicators
Glossary
List of Appendices

Introduction

Brief history of the VEE and of its previous ESEVT visitations (if any)

Main features of the VEE

Brief summary of the main developments since the last visitation (or, if there has not been a previous one, in the period since the veterinary degree programme began)

Major problems encountered by the VEE (whether resolved or not)

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

Area 1. Objectives, Organisation and Quality Assurance Policy

Standard 1.1: The VEE must have as its main objective the provision, in agreement with the EU Directives and ESG Standards, of 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.
The VEE must develop and follow its mission statement which must embrace the ESEVT Standards.

Description of the mission statement and the objectives

Description of how the VEE ensures that the provided core curriculum enables all new graduates to perform as a veterinarian capable of entering all commonly recognised branches of the veterinary profession

Standard 1.2: The VEE 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.
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.

The decision-making process, organisation and management of the VEE must allow implementation of its strategic plan and of a cohesive study programme, in compliance with the ESEVT Standards.

Details of the VEE, i.e. official name, address, phone number, E-mail and website addresses, VEE's Head, official authority overseeing the VEE

Organisational chart (diagram) of the VEE with a brief description of the decision-making process

List of departments/units/clinics with a very brief description of their composition and management (further information may be provided in the Appendices)

List of the councils/boards/committees with a very brief description of their composition/function/responsibilities and implication for staff, students and stakeholders (further information may be provided in the Appendices)

Description of the formal collaborations with other VEEs

Name and degrees of the person(s) responsible for the veterinary curriculum and for the professional, ethical, and academic affairs of the VTH

Standard 1.3: The VEE must have a strategic plan, which includes a SWOT analysis of its current activities, short- and medium-term objectives, and an operating plan with a timeframe and indicators for its implementation. The development and implementation of the VEE's strategy must include a role for students and other stakeholders, both internal and external, and the strategy must have a formal status and be publicly available.

Summary of the VEE's strategic plan with an updated SWOT analysis (Strengths, Weaknesses, Opportunities and Threats) (the full Strategic Plan may be provided in the Appendices)

Summary of the VEE's Operating Plan with timeframe and indicators of achievement of its objectives

Standard 1.4: The VEE must have a policy and associated written procedures for the assurance of the quality and standards of its programmes and awards. It must also commit itself explicitly to the development of a culture which recognises the importance of quality, and QA within the VEE. To achieve this, the VEE must develop and implement a strategy for the continuous enhancement of quality.
The VEE must have a policy for academic integrity, i.e. the expectation that all staff and students act with honesty, trust, fairness, respect and responsibility.

Description of the global policy and strategy of the VEE for outcome assessment and Quality Assurance (QA), in order to demonstrate that the VEE:
-) has a culture of QA and continued enhancement of quality;
-) operates cyclical, sustainable and transparent outcome assessment, QA and quality enhancement mechanisms;

-) collects, analyses and uses relevant information from internal and external sources for the effective management of its programmes and activities (teaching, research, services);
-) informs regularly staff, students and stakeholders and involves them in the QA processes;
-) closes the loop of any QA Plan-Do-Check-Adjust (PDCA) cycles;
-) is compliant with the ESG Standards.

Standard 1.5: The VEE must provide evidence that it interacts with its stakeholders and the wider society. Such public information must be clear, objective and readily accessible; the information must include up-to-date information about the study programme.
The VEE's website must mention the VEE's ESEVT status and its last Self-Evaluation Report and Visitation Reports must be easily available to the public.

Description of how the VEE informs stakeholders and the public on:
-) its objectives,
-) its education, research and teaching activities,
-) employment destinations of past students
-) profile of the current student population

Description of how to access the VEE's ESEVT status and the last ESEVT Self-Evaluation Report and Visitation Reports on the VEE's website

Standard 1.6: The VEE must monitor and periodically review its activities, both quantitative and qualitative, to ensure that they achieve the objectives set for them and respond to the needs of students and society. The VEE must make public how this analysis of information has been utilised in the further development of its activities and provide evidence as to the involvement of both students and staff in the provision, analysis and implementation of such data. Evidence must be provided that the QA loops are fully closed (Plan Do Check Adjust cycles) to efficiently enhance the quality of education.
Any action planned or taken as a result of this data analysis must be communicated to all those concerned.

Description of how (procedures) and by whom (description of the committee structure) the strategic plan, the organisation, the activities and the QA policy are decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Standard 1.7: The VEE must undergo external review through the ESEVT on a cyclical basis. Evidence must be provided of such external evaluation with the assurance that the progress made since the last ESEVT evaluation was linked to a continuous quality assurance process.

Date of the last ESEVT visitation and description of how the deficiencies have been corrected and how it has been used to enhance quality

Comments on Area 1

Suggestions for improvement in Area 1

Area 2. Finances

Standard 2.1: Finances must be demonstrably adequate to sustain the requirements for the VEE to meet its mission and to achieve its objectives for education, research and services. The description must include both expenditures (separated into personnel costs, operating costs, maintenance costs and equipment) and revenues (separated into public funding, tuition fees, services, research grants and other sources).

Description of the global financial process of the VEE
Percentage (%) of margin paid as overhead to the official authority overseeing the VEE on revenues from services and research grants

Annual tuition fee for national and international students

Table 2.1.1. Annual expenditures during the last 3 academic years (AYs) (in Euros)

Area of expenditure	*AY**	*AY-1*	*AY-2*	*Mean*
Personnel				
Operating costs				
Maintenance costs				
Equipment				
Total expenditure				

** The last complete academic year prior to the Visitation*

Table 2.1.2. Annual revenues during the last 3 academic years (in Euros)

Revenues source	*AY**	*AY-1*	*AY-2*	*Mean*
Public authorities				
Tuition fee (standard students)				
Tuition fee (full fee students)				
Clinical services				
Diagnostic services				
Other services				
Research grants				
Continuing Education				
Donations				
*Other sources***				
Total revenues				

*** Please specify*

Table 2.1.3. Annual balance between expenditures and revenues (in Euros)

Academic year	*Total expenditures*	*Total revenues*	*Balance****
AY-2			
AY-1			
*AY**			

**** Total revenues minus total expenditures*

Note: Tables 2.1.1., 2.1.2. and 2.1.3. may be replaced by the official financial reports of the VEE (translated in English) for the last three academic years

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

Standard 2.2: Clinical and field services must function as instructional resources. The instructional integrity of these resources must take priority over the financial self-sufficiency of clinical services operations.
The VEE must have sufficient autonomy in order to use the resources to implement its strategic plan and to meet the ESEVT Standards.

Description of the modus operandi for the financial management of the clinical and field services

Degree of autonomy of the VEE on the financial process

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

List of the ongoing and planned major investments for developing, improving and/or refurbishing facilities and equipment, and origin of the funding

Prospected expenditures and revenues for the next 3 academic years

Description of how (procedures) and by whom (description of the committee structure) expenditures, investments and revenues are decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Comments on Area 2

Suggestions for improvement in Area 2

Area 3. Curriculum

Definitions
Student*: undergraduate student.*
Study programme: *an undergraduate programme leading to the degree of a veterinarian.*
Curriculum*: a detailed description of the study programme including theoretical, practical and clinical training.*
Core subject*: compulsory subject taken by every student.*
Elective subject*: a subject which each student must select from a list of possible alternatives (e.g. EPT); the inherent nature of an elective is that students make a decision and select; however, the total number of hours to be taken by each student out of the various subject groups should be stated.*
Optional subject*: a subject which is available for undergraduate students but not compulsory.*
Lectures*: theoretical teaching given to an entire or partial group of students. Teaching may be with or without the use of teaching aids or of demonstration animals or specimens. The essential characteristic is that there is no hands-on involvement of the students in the material discussed.*
Seminars*: (sometimes called tutorials or supervised group work): teaching sessions directed towards a smaller group of students during which they work on their own, or as a team, on part of the theoretical aspects, prepared from manuscript notes, photocopied documents, articles and*

bibliographic references. Information is illustrated and knowledge extended by the presentation of audio-visual material, exercises, discussions and, if possible, case work.
***Core Clinical Training (CCT)**: this is hands-on training identical for all students and provided/supervised/assessed by a teaching staff. It includes both the intra- and extra-mural clinical rotations and the ambulatory clinics; it includes work on healthy 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, necropsy and diagnostic pathology are also classified as CCT.*
***Elective Practical Training (EPT)**: these are elective training periods which are compulsory and complementary to the core curriculum. It may be taken either outside the VEE under the supervision of a qualified person (e.g. a practitioner) or intra-murally, the student being under the supervision of a teaching staff or a qualified person. They should be available to all students but, like all elective activities, their contents may vary from an undergraduate student to another (see Table 3.5.1.).*
***Supervised self-learning**: it includes sessions of individual students making use of defined teaching material provided by the VEE with support from staff, if requested by the students, and with a final assessment (e.g. e-learning).*
***Laboratory and desk-based work**: it includes teaching sessions where students themselves actively perform laboratory experiments, and use microscopes for the examination of specimens. It also includes work on documents and idea-formulation without the handling of animals, organs, objects or products (e.g. essay work, clinical case studies, handling of herd-health monitoring programmes, risk-assessment computer-aided exercises).*
***Non-clinical animal work**: These are teaching sessions where students themselves work on healthy animals, on objects, dummies, products, carcasses etc. (e.g. animal husbandry, ante mortem and post mortem inspection, food hygiene, etc.) and perform dissection. The use of a clinical studies labs (skill labs) with the inclusion of models and equipment designed to realistically mimic surgical and other "hands on" techniques, is included here.*

Standard 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. The curriculum must include the subjects (input) and must allow the acquisition of the Day One Competences (output) listed in the ESEVT SOP Annex 2.
This concerns:

- **Basic Sciences**
- **Clinical Sciences in companion animals (including equine and exotic pets)**
- **Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management)**
- **Veterinary Public Health (including Food Safety and Quality)**
- **Professional Knowledge including soft skills (e.g. communication, team working skills, management skills).**

When part of the study programme cannot be organised because of imposed regulations or constraints, convincing compensations must be developed and implemented.

If a VEE offers more than one study programme to become a veterinarian, e.g. in different languages or in collaboration with other VEEs, all study programmes and respective curricula must be described separately in the SER. For each Standard, the VEE must explain if there are differences or not with the basic programme and all this

information must be provided as a formal annex to the SER. Similarly, if a VEE implements a tracking (elective) system in its study programme, it must provide a clear explanation of the tracking system in the SER.

Description of the educational aims of the VEE and the general strategy for the design, resources and management of the curriculum

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

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

As a complement to Tables 3.1.1 to 3.1.5, an undergraduate curriculum digest/diagram must be provided as an Appendix of the SER and must include theoretical, practical and clinical training for each academic year.

Table 3.1.1. Curriculum hours in each academic year taken by each student

*Academic years**	*A*	*B*	*C*	*D*	*E*	*F*	*G*	*H*	*J*
Year 1									
Year 2									
Year 3									
Year 4									
Year 5									
Year 6									

A: lectures; B: seminars; C: supervised self-learning; D: laboratory and desk-based work, E: non-clinical animal work; F: clinical animal work; G: EPT; H: others (specify -e.g. graduation thesis); J: total
** An academic year may be subdivided into 2 semesters*

Table 3.1.2. Curriculum hours taken by each student

Subjects	*A*	*B*	*C*	*D*	*E*	*F*	*G*	*H*
Basic subjects								
Medical physics								
Chemistry (inorganic and organic sections)								
Animal biology, zoology and cell biology								
Feed plants and toxic plants								
Biomedical statistics								
Specific veterinary subjects								
Basic Sciences								
Anatomy, histology and embryology								
Physiology								
Biochemistry								
General and molecular genetics								
Pharmacology, pharmacy and pharmacotherapy								
Pathology								
Toxicology								
Parasitology								
Microbiology								
Immunology								
Epidemiology								
Information literacy and data management								
Professional ethics and communication								
Animal health economics and practice management								
Animal ethology								

Animal welfare
Animal nutrition

Clinical Sciences in companion animals (including equine and exotic pets)
Obstetrics, reproduction and reproductive disorders
Diagnostic pathology
Medicine
Surgery
Anaesthesiology and analgesia
Clinical practical training in common companion animals
Infectious diseases
Preventive medicine
Diagnostic imaging
Therapy in common companion animals

Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management)
Obstetrics, reproduction and reproductive disorders
Diagnostic pathology
Medicine
Surgery
Anaesthesiology and analgesia
Clinical practical training in common food-producing animals
Infectious diseases
Preventive medicine
Diagnostic imaging
Therapy in common food-producing animals
Animal Production, including breeding, husbandry and economics
Herd health management

Veterinary Public Health (including Food Safety and Quality)
Veterinary legislation including official controls and regulatory veterinary services, forensic veterinary medicine and certification
Control of food, feed and animal by-products
Zoonoses and their prevention
Food hygiene and environmental health
Basic food technology

A: lectures; B: seminars; C: supervised self-learning; D: laboratory and desk-based work, E: non-clinical animal work; F: clinical animal work; G: others (specify); H: total

*Note: Subjects linked to **Professional Knowledge** (including soft skills, e.g. communication, team working skills, management skills) are incorporated within the subcategories and include inter alia Information literacy and data management, Professional ethics and communication, Animal health economics and practice management, Clinical practical training in common animal species, Herd health management and Veterinary legislation.*

Table 3.1.3. Practical rotations under teaching staff supervision (excluding EPT)

Types	*List of practical rotations (Disciplines/Species)*	*Duration (weeks)*	*Year of programme*
Intra-mural clinics (VTH)			
Ambulatory clinics			
Herd Health Management			
VPH (including FSQ)			
Electives			
Other (specify)			

Table 3.1.4. Curriculum hours taken as electives for each student

Electives	*A*	*B*	*C*	*D*	*E*	*F*	*G*	*H*
Basic subjects								
Basic Sciences								
Clinical Sciences in companion animals (including equine and exotic pets)								
Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management)								
Veterinary Public Health (including Food Safety and Quality)								

A: lectures; B: seminars; C: supervised self-learning; D: laboratory and desk-based work, E: non-clinical animal work; F: clinical animal work; G: others (specify); H: hours to be taken by each student per subject group

Table 3.1.5. Optional courses proposed to students (not compulsory)

Subjects	*A*	*B*	*C*	*D*	*E*	*F*	*G*	*H*

A: lectures; B: seminars; C: supervised self-learning; D: laboratory and desk-based work, E: non-clinical animal work; F: clinical animal work; G: others (specify); H: total

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

Description (timing, group size per teacher, ...) of the core clinical rotations and emergency services (both intra-mural VTH and ambulatory clinics) and the direct involvement of undergraduate students in it (responsibilities, hands-on versus observation, report writing, ...)

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

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)

Description of the procedures (e.g. logbooks) used to ascertain the achievement of each core practical/clinical activity (pre-clinical, clinical, ambulatory clinics, EPT) by all students

Standard 3.2: Each study programme provided by the VEE must be competency-based and designed so that it meets the objectives set for it, including the intended learning outcomes. The qualification resulting from a programme must be clearly specified and communicated and must 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.
The VEE must provide proof of a QA system that promotes and monitors the presence of a teaching environment highly conducive to learning including self-learning. Details of the type, provision and updating of appropriate learning opportunities for the students must be clearly described, as well as the involvement of students.
The VEE must also describe how it encourages and prepares students for lifelong learning.

Description of how the VEE:
-) ensures that the study programmes meet the objectives
-) promotes a teaching environment conducive to learning
-) encourages and prepares students for self-learning and lifelong learning.

Standard 3.3: Programme learning outcomes must:

- **ensure the effective alignment of all content, teaching, learning and assessment activities of the degree programme to form a cohesive framework**
- **include a description of Day One Competences**
- **form the basis for explicit statements of the objectives and learning outcomes of individual units of study**
- **be communicated to staff and students**
- **be regularly reviewed, managed and updated to ensure they remain relevant, adequate and are effectively achieved.**

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

Description of how the VEE ensures that the learning outcomes fit with the ESEVT Day One Competences

Description of how (procedures) and by whom (description of the committee structure) the learning outcomes are decided, communicated to staff, students and stakeholders, assessed and revised

Standard 3.4: The VEE 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**
- **perform ongoing reviews and periodic in-depth reviews of the curriculum at least every seven years by involving staff, students and stakeholders; these reviews must lead to continuous improvement of the curriculum. Any action taken or planned as a result of such a review must be communicated to all those concerned**
- **identify and meet training needs for all types of staff, maintaining and enhancing their competence for the ongoing curriculum development.**

Description of how (procedures) and by whom (description of the committee structure) the core curriculum is decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Standard 3.5: Elective Practical Training (EPT) includes compulsory training activities that each student must achieve before graduation to complement and strengthen their core theoretical and practical academic education, inter alia by enhancing their

experience, professional knowledge and soft skills. Like all elective activities, its contents may vary from one undergraduate student to another.
EPT is organised either extra-murally with the student being under the direct supervision of a qualified person (e.g. a veterinary practitioner) or intra-murally, with the student being under the supervision of a teaching staff or a qualified person.
EPT itself cannot replace the Core Clinical Training (CCT)[1] under the close supervision of teaching staff (e.g. ambulatory clinics, herd health management, practical training in VPH (including Food Safety and Quality (FSQ)). A comparison between CCT and EPT is provided in Annex 6, Standard 3.5.

Description of the organisation of the EPT and how it complements (but not replaces) the Core Clinical Training (CCT)

Table 3.5.1. Curriculum days of Elective Practical Training (EPT) for each student

Fields of Practice	*Minimum duration (weeks)*	*Year of programme*
Production animals (pre-clinical)		
Companion animals (pre-clinical)		
Production animals (clinical)		
Companion animals (clinical)		
VPH (including FSQ)		
Others (specify)		

[1] Comparison CCT vs EPT

	Core Clinical Training	***Elective Practical Training***
Abbreviations	*CCT*	*EPT*
Content	*Clinical training in all common disciplines and species (rotations)*	*Additional training in some disciplines or species (clinical and/or pre-clinical)*
Audience	*Compulsory in the core curriculum*	*Compulsory in addition to the core curriculum*
Study programme	*Identical for all students*	*Elective*
Supervision	*Contracted teaching staff formally trained to teach and to assess*	*Qualified persons*
Site	*Intra- and/or extra-mural*	*Extra- and/or intra-mural*
Main objective	*Acquisition of Day One Competences (D1C)*	*Enhancement of students' experience, professional knowledge and soft skills*
Monitoring	*Logbook*	*Logbook*
Assessment	*Formal assessment by the contracted teaching staff*	*Standardised evaluation by the qualified person*
Feedback from students	*Yes*	*Yes*
Further requirements	*Must include ambulatory clinics, herd health management, practical training in VPH (including FSQ)*	*May not replace CCT nor compensate for deficiencies in CCT*

Standard 3.6: The EPT providers must meet the relevant national Veterinary Practice Standards, have an agreement with the VEE and the student (stating 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 VEE on the EPT programme.
There must be a member of the teaching staff responsible for the overall supervision of the EPT, including liaison with EPT providers.

Description of how the EPT providers are linked to the VEE (a copy of one of the agreements to be provided in the Appendices), assess the students and provide feedback to the VEE

Name of the teaching staff(s) responsible for the supervision of the EPT activities

Standard 3.7: 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 VEE and evaluating the EPT. Students must be allowed to complain officially and/or anonymously about issues occurring during EPT. The VEE must have a system of QA to monitor the implementation, progress and then feedback within the EPT activities.

Description of the implications of students in the preparation, recording and assessment of their EPT

Description of the complaint process in place concerning EPT

Comments on Area 3

Suggestions for improvement in Area 3

Area 4. Facilities and equipment

Standard 4.1: All aspects of the physical facilities must provide an environment conducive to learning, including internet access at all relevant sites where theoretical, practical and clinical education takes place. The VEE must have a clear strategy and programme for maintaining and upgrading its buildings and equipment. Facilities must comply with all relevant legislation including health, safety, biosecurity, accessibility to people including students with a disability, and EU animal welfare and care standards.

Description of the location and organisation of the facilities used for the veterinary curriculum (surface area, distance from the main campus for extra-mural facilities, ...) (maps to be provided as Appendices)

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

Description of how the VEE ensures that all physical facilities comply with all relevant legislation

Standard 4.2: Lecture theatres, teaching laboratories, tutorial rooms, clinical facilities and other teaching spaces must be adequate in number and size, equipped for instructional purposes and well maintained. The facilities must be adapted for the

number of students enrolled. Students must have ready access to adequate and sufficient study, self-learning, recreation, locker, sanitary and food service facilities.
Offices, teaching preparation and research laboratories must be sufficient for the needs of the teaching and support staff to support their teaching and research efforts.

Short description (number, size, equipment, ...) of the premises for:
-) lecturing
-) group work (seminars, tutorials, ...)
-) practical work (laboratories, ...)
-) skill labs (preclinical stimulation-based training on dummies, ...)

Short description (number of rooms and places, ...) of the premises for:
-) study and self-learning
-) catering, canteens, ...
-) locker rooms
-) accommodation for on-call students
-) leisure activities
-) sanitary (toilets, washing and/or shower facilities, ...)

Brief description of the staff offices and research laboratories

Standard 4.3: The livestock facilities, animal housing, core clinical teaching facilities and equipment used by the VEE for teaching purposes must:

- **be sufficient in capacity and adapted for the number of students enrolled in order to allow safe hands-on training for all students**
- **be of a high standard, well maintained and fit for the purpose**
- **promote best husbandry, welfare and management practices**
- **ensure relevant biosecurity**
- **take into account environmental sustainability**
- **be designed to enhance learning.**

Description (number, size, species, ...) of the premises for housing:
-) healthy animals
-) research animals
-) hospitalised animals

Description (number, size, equipment, species, disciplines, ...) of the premises for:
-) clinical activities
-) diagnostic services including necropsy
-) others (specify)

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

Brief description of the premises (both intra-mural and extra-mural) used for the practical teaching of VPH (including FSQ) (slaughterhouses, foodstuff processing units, ...)

Standard 4.4: Core clinical teaching facilities must be provided in a veterinary teaching hospital (VTH) with 24/7 emergency services at least for companion animals and equines.

Within the VTH, the VEE must unequivocally demonstrate that the standard of education and clinical research is compliant with all ESEVT Standards, e.g. research-based and evidence-based clinical training supervised by teaching 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, on-call service must be available if emergency services do not exist for those species in a VTH.
The VEE must ensure state-of-the-art standards of teaching clinics which remain comparable with or exceed the best available clinics in the private sector.
The VTH and any hospitals, practices and facilities which are involved with the core curriculum must be compliant with the ESEVT Standards and meet the relevant national Veterinary Practice Standards.

Description of the organisation and management of the VTH and ambulatory clinics (opening hours and days, on-duty and on-call services, general consultations, list of specialised consultations, hospitalisations, emergencies and intensive care, ...)

Description of how the VTH and ambulatory clinics are organised in order to maximise the hands-on training of all students

Statement that the VEE meets the national Veterinary Practice Standards

Standard 4.5: The VEE must ensure that students have access to a broad range of diagnostic and therapeutic facilities, including but not limited to clinical skills laboratory, diagnostic imaging, clinical pathology, anaesthesia, surgeries and treatment facilities, intensive/critical care, ambulatory services, pharmacy and necropsy facilities. Procedures and facilities should also be available for soft skills training, e.g. communication skills training through role-play.

Description of how all students can have access to all relevant facilities

Standard 4.6: 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 the prevention of the spread of infectious agents, animal care and student training. They must be adapted to all animal species commonly handled in the VTH. When permanent isolation facilities are not available in any of the facilities used for clinical training, the ability to provide such facilities and the procedures to use them appropriately in an emergency must be demonstrated during the visitation.

Description (number, size, species, ...) of the premises for housing isolated animals and how these premises guarantee isolation and containment of infectious patients

Standard 4.7: The VEE must have an ambulatory clinic for production animals or equivalent facilities so that students can practise field veterinary medicine and Herd Health Management under the supervision of teaching staff.

Description of how and by whom field veterinary medicine and Herd Health Management are taught to all students

Description of the vehicles and equipment used for the ambulatory clinic

Standard 4.8: 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 animal welfare, and to prevent the spread of infectious agents.

Brief description (number, size, equipment, ...) of the vehicles used for:
-) transportation of students (e.g. to extra-mural facilities)
-) transportation of live animals
-) transportation of cadavers/organs

Standard 4.9: Operational policies and procedures (including biosecurity, good laboratory practice and good clinical practice) must be taught and posted (in different languages if the curriculum is taught in them) for students, staff and visitors and a biosecurity manual must be developed and made easily available for all relevant persons. The VEE must demonstrate a clear commitment for the delivery and the implementation of biosecurity, e.g. by a specific committee structure. The VEE must have a system of QA to monitor and assure clinical, laboratory and farm services, including regular monitoring of the feedback from students, staff and clients.

Description of how (procedures) and by whom (description of the committee structure) changes in facilities, equipment, biosecurity procedures (health & safety management for people and animals, including waste management) good laboratory practices and good clinical practices are decided, communicated to staff, students, stakeholders (and, if appropriate, to the public), implemented, assessed and revised

The VEE's manual for biosecurity, health and safety must be provided as an Appendix (with a summary in English).

Comments on Area 4

Suggestions for improvement in Area 4

Area 5. Animal resources and teaching material of animal origin

Standard 5.1: The number and variety of healthy and diseased animals, first opinion and referral cases, cadavers, and material of animal origin must be adequate for providing the practical and safe hands-on training in all relevant areas and adapted to the number of students enrolled.
Evidence must be provided that these data are regularly recorded and that procedures are in place for correcting any deficiencies.

Description of the global strategy of the VEE about the use of animals and material of animal origin for the acquisition by each student of Day One Competences (see Annex 2)

Description of the specific strategy of the VEE ensuring that each student receives the relevant Core Clinical Training (CCT) before graduation, e.g. number 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 (day patients in the clinic) and hospitalisations, balance between individual medicine and population medicine

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

Description of how the cadavers and material of animal origin for training in anatomy and pathology are obtained, stored and destroyed

Table 5.1.1. Cadavers and material of animal origin used in practical anatomical training

Species	*AY**	*AY-1*	*AY-2*	*Mean*
Cattle				
Small ruminants				
Pigs				
Companion animals				
Equine				
Poultry & rabbits				
Aquatic animals				
Exotic pets				
Others (specify)				

** The last complete academic year prior to the Visitation*

Table 5.1.2. Healthy live animals used for pre-clinical training (animal handling, physiology, animal production, propaedeutics, ...)

Species	*AY**	*AY-1*	*AY-2*	*Mean*
Cattle				
Small ruminants				
Pigs				
Companion animals				
Equine				
Poultry & rabbits				
Exotic pets				
Others (specify)				

Table 5.1.3. Number of patients seen intra-murally (in the VTH)**

Species	*AY**	*AY-1*	*AY-2*	*Mean*
Cattle				
Small ruminants				
Pigs				
Companion animals				
Equine				
Poultry & rabbits				
Exotic pets				
Others (specify)				

*** Each patient must be officially recorded in the electronic patient record system of the VEE and must be individually examined/treated by at least one student under the supervision of at least 1 member of staff. Each live animal affected by one specific clinical episode is counted as one single patient, even if it has been examined/treated by several departments/units/clinics.*

Table 5.1.4. Number of patients seen extra-murally (in the ambulatory clinics)**

Species	*AY**	*AY-1*	*AY-2*	*Mean*
Cattle				
Small ruminants				
Pigs				
Companion animals				
Equine				
Poultry & rabbits				
Exotic pets				
Others (specify)				

*** Each patient must be officially recorded and must be individually examined/treated by at least one student under the supervision of at least one member of staff. Each live animal affected by one specific clinical episode is counted as one single patient.*

Table 5.1.5. Percentage (%) of first opinion patients used for clinical training (both in VTH and ambulatory clinics, i.e. Tables 5.1.3 & 5.1.4)

Species	*AY**	*AY-1*	*AY-2*	*Mean*
Cattle				
Small ruminants				
Pigs				
Companion animals				
Equine				
Poultry & rabbits				
Exotic pets				
Others (specify)				

Table 5.1.6. Cadavers used in necropsy

Species	*AY**	*AY-1*	*AY-2*	*Mean*
Cattle				
Small ruminants				
Pigs				
Companion animals				
Equine				
Poultry & rabbits				
Aquatic animals				
Exotic pets				
Others (specify)				

Table 5.1.7. Number of visits in herds/flocks/units for training in Animal Production and Herd Health Management

Species	*AY**	*AY-1*	*AY-2*	*Mean*
Cattle				
Small ruminants				
Pigs				
Poultry				

Rabbits
Aquatic animals
Others (specify)

Table 5.1.8. Number of visits in slaughterhouses and related premises for training in VPH (including FSQ)

Species	*AY**	*AY-1*	*AY-2*	*Mean*
Ruminant slaughterhouses				
Pig slaughterhouses				
Poultry slaughterhouses				
*Related premises *****				
Others (specify)				

*** Premises for the production, processing, distribution or consumption of food of animal origin*

Description of how (procedures) and by whom (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 VEE are decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Standard 5.2: In addition to the training provided in the VEE, experience can include practical training at external sites, provided this training is organised under the supervision of teaching staff and follows the same standards as those applied in the VEE.

Description of the organisation and management of the external sites (teaching farms, ...) and the involvement of students in their running (e.g. births, milking, feeding, ...)

Standard 5.3: The VTH must provide nursing care skills and instruction in nursing procedures. Under all situations students must be active participants in the clinical workup of patients, including problem-oriented diagnostic approach together with diagnostic decision-making.

Description of how and by whom the nursing care skills are implemented and taught to undergraduate students

Description of the group size for the different types of clinical training (both intra-murally and extra-murally) to guarantee hands-on training of all students

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)

Description of the procedures used to allow all students to spend extended periods in discussion, thinking and reading to deepen their understanding of the clinical case and its management

Standard 5.4: Medical records for patients seen intra- and extramurally under Core Clinical Training (CCT) must be comprehensive and maintained in an effective retrieval

system to efficiently support the teaching and learning, research, and service programmes of the VEE.

Description of the patient record system, its completion, its availability to staff and students and how it is used to efficiently support the teaching, learning, research, and service programmes of the VEE

Comments on Area 5

Suggestions for improvement in Area 5

Area 6. Learning resources

Standard 6.1: State-of-the-art learning resources must be adequate and available to support veterinary education, research, services and continuing education. Learning resources must be suitable to implement teaching facilities to secure the 'never the first time on a live animal' concept. When the study programme is provided in several tracks/languages, the learning resources must be available in all used languages. 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, together with basic English teaching if necessary.

Description of the general strategy of the VEE on learning resources

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

Description of how (procedures) and by whom (description of the committee structure) the learning resources (books, periodicals, databases, e-learning, new technologies, ..) provided by the VEE are decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Standard 6.2: Staff and students must have full access on site to an academic library administered by a qualified librarian, an Information Technology (IT) unit managed by a qualified IT person, an e-learning platform, and the relevant human and physical resources necessary for the development of instructional materials by the staff and their use by the students.
The relevant electronic information, database and other intranet resources must be easily available for students and staff both in the VEE's core facilities via wireless connection (Wi-Fi) and from outside the VEE through a hosted secured connection, e.g. Virtual Private Network (VPN).

Brief description of the main library of the VEE:
-) staff (FTE) and qualifications
-) opening hours and days
-) annual budget

-) facilities: location in the campus, global space, number of rooms, number of seats
-) equipment: number of computers, number of electrical connections for portable PC
-) software available for bibliographical search

Brief description of the subsidiary libraries (if any)

Brief description of the IT facilities and of the e-learning platform (dedicated staff, hardware, software, available support for the development by staff and the use by students of instructional materials)

Description of the accessibility for staff and students to electronic learning resources both on and off campus (Wi-Fi coverage in the VEE and access to resources through a hosted secured connection, e.g. Virtual Private Network (VPN))

Standard 6.3: The VEE must provide students with unimpeded access to learning resources, internet and internal study resources, as well as facilities and equipment for the development of procedural skills (e.g. clinical skills laboratory). 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 changes in learning resources.

Brief description of:
-) the number of veterinary books and periodicals
-) the number of veterinary e-books and e-periodicals
-) the number of other (e)books and (e)periodicals
-) the available learning resources to students, including electronic information and e-learning courses (and their role in supporting student learning and teaching in the core curriculum)
-) the organisation and supervision of the skill labs

Comments on Area 6

Suggestions for improvement in Area 6

Area 7. Student admission, progression and welfare

Standard 7.1: The VEE must consistently apply pre-defined and published regulations covering all phases of the student "life cycle", e.g. student admission, progression and certification.
In relation to enrolment, the VEE must provide accurate and complete information regarding the educational programme in all advertisements for prospective national and international students.
Formal cooperation with other VEEs must also be clearly advertised.

Description of how the educational programmes, learning outcomes, admission procedures and requirements for national and foreign students, progression and certification, tuition fees, academic calendar, collaborations with other VEEs, etc. are advertised to prospective students

Standard 7.2: The number of students admitted must be consistent with the resources

available at the VEE for staff, buildings, equipment, healthy and diseased animals, and materials of animal origin.

Table 7.2.1. Number of new veterinary students admitted by the VEE

Type of students	*AY**	*AY-1*	*AY-2*	*Mean*
Standard students				
Full fee students				
Total				

** The last complete academic year prior to the Visitation*

Table 7.2.2. Number of veterinary undergraduate students registered at the VEE**

Year of programme	*AY**	*AY-1*	*AY-2*	*Mean*
First year				
Second year				
Third year				
Fourth year				
Fifth year				
Sixth year				
Total				

***This table should be filled in for each study programme in case of more than one study programmes*

Table 7.2.3. Number of veterinary students graduating annually

Type of students	*AY**	*AY-1*	*AY-2*	*Mean*
Standard students				
Full fee students				
Total				

Table 7.2.4. Average duration of veterinary studies

Duration	*% of the students who graduated in AY**
*+ 0***	
+ 1 year	
+ 2 years	
+ 3 years or more	

*** The total duration of the studies matches the minimum number of years of the programme (e.g. 5 or 6 years)*

Table 7.2.5. Number of postgraduate students registered at the VEE

Programmes	*AY**	*AY-1*	*AY-2*	*Mean*
Interns				
Residents				
PhD students				
Others (specify)				

Standard 7.3: The selection and progression criteria must be clearly defined, consistent, and defensible, be free of discrimination or bias, and take into account the fact that students are admitted with a view to their entry to the veterinary profession in due course.

The VEE must regularly review and reflect on the selection processes to ensure they are appropriate for students to complete the programme successfully. If the selection processes are decided by another authority, the latter must regularly receive feedback from the VEE.
Adequate training (including periodic refresher training) must be provided for those involved in the selection process to ensure applicants are evaluated fairly and consistently.

Description of the admission procedures for standard students:
-) selection criteria
-) policy for disabled and ill students
-) composition and training of the selection committee
-) appeal process
-) advertisement of the criteria and transparency of the procedures

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

Description of how the VEE 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

Description of the prospective number of new students admitted by the VEE for the next 3 academic years

Standard 7.4: There must be clear policies and procedures on how applicants with disabilities or illnesses are 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.

Description of the policies and procedures dedicated to applicants with disabilities

Standard 7.5: The basis for decisions on progression (including academic progression and professional fitness to practise) must be explicit and readily available to the students. The VEE 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.
The VEE 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.

Description of:
-) the progression criteria and procedures for all students
-) the remediation and support for students who do not perform adequately
-) the advertisement to students and transparency of these criteria/procedures

Description of the rate and main causes of attrition

Description of how (procedures) and by whom (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

Standard 7.6: Mechanisms for the exclusion of students from the programme for any reason must be explicit.
The VEE's policies for managing appeals against decisions, including admissions, academic and progression decisions and exclusion, must be transparent and publicly available.

Description of the mechanisms for the exclusion of students

Description of the appeal processes

Standard 7.7: Provisions must be made by the VEE to support the physical, emotional and welfare needs of students. This includes but is not limited to learning support and counselling services, career advice, and fair and transparent mechanisms for dealing with student illness, impairment and disability during the programme. This shall include provision for disabled students, consistent with all relevant equality, diversity and/or human rights legislation.
There must be effective mechanisms for the resolution of student grievances (e.g. interpersonal conflict or harassment).

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

Description of the mechanisms for resolution of student grievances

Standard 7.8: Mechanisms must be in place by which students can convey their needs and wants to the VEE. The VEE must provide students with a mechanism, anonymously if they wish, to offer suggestions, comments and complaints regarding the compliance of the VEE with national and international legislation and the ESEVT Standards.

Description of the mechanisms allowing students to provide their needs, complaints, comments and suggestions to the VEE

Comments on Area 7

Suggestions for improvement in Area 7

Area 8. Student assessment

Standard 8.1: The VEE must ensure that there is a clearly identified structure within the VEE 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.

Description of the general student's assessment strategy of the VEE

Description of the specific methodologies for assessing the acquisition of:
-) theoretical knowledge
-) pre-clinical practical skills
-) clinical practical skills
-) soft skills (e.g. communication skills, team working skills, dealing with pressure, strong work ethic, positive mental attitude, flexibility, time management, self-confidence, dealing with criticism, ...)

Standard 8.2: The assessment tasks and grading criteria for each unit of study in the programme must be published, applied consistently, clearly identified and available to students in a timely manner well in advance of the assessment. Requirements to pass must be explicit.
The VEE must properly document the results of assessment and provide the students with timely feedback on their assessments.
Mechanisms for students to appeal against assessment outcomes must be explicit.

Description of the processes for ensuring the advertising and transparency of the assessment criteria/procedures

Description of the processes for awarding grades, including explicit requirements for barrier assessments

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

Description of the appeal processes against assessment outcomes

Standard 8.3: The VEE must have a process in place to review assessment outcomes, to change assessment strategies and to ensure the accuracy of the procedures when required. 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.

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

Description of the link between learning outcomes and assessment design

Standard 8.4: Assessment strategies must allow the VEE to certify student achievement of learning objectives at the level of the programme and individual units of study.
The VEE 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.

Description of the system to certify student achievement of learning outcomes in the different subjects, years of study, etc.

Description of the strategy to encourage students to take an active part in the learning process

Standard 8.5: Methods of formative and summative assessment must be valid and reliable and comprise a variety of approaches. Direct assessment of the acquisition 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 regular quality control of the student logbooks, with a clear distinction between what is completed under the supervision of teaching staff (Core Clinical Training (CCT)) or under the supervision of a qualified person (EPT). The clear distinction between CCT and EPT ensures that all clinical procedures, practical and hands-on training planned in the study programme have been fully completed by each individual student. The provided training and the global assessment strategy must provide evidence that only students who are Day One Competent are able to graduate.

Description of the assessment methodology to ensure that every graduate has achieved the minimum level of competence, as described in the ESEVT Day One Competences (see Annex 2)

Comments on Area 8

Suggestions for improvement in Area 8

Area 9. Teaching and support staff

Definitions
Teaching staff*: This category is in charge of core curriculum training. It includes contracted staff who have been granted a veterinary degree (or another university degree), have acquired the relevant expertise in their respective disciplines, have been formally trained to teach and assess students and provide up-to-date, evidence-based and research-based education.*

There are two categories of teaching staff:

Academic staff: *professors (or equivalent) employed full- or part-time by a VEE; holding a PhD (or equivalent) and being able to demonstrate their ability in veterinary research and in their teaching speciality, which should ideally be recognised by a national or international diploma. They must be formally trained to teach and to assess (i.e. advanced level) and receive regular follow-up training, e.g. one-day training per year on new methods in teaching and assessing; this training may be more general and not necessarily focused on veterinary medicine.*

Non-academic teaching staff: *interns, residents, assistants, PhD students, certified specialists or practitioners contracted by the VEE. They must be formally trained to teach and to assess (i.e. intermediate level) and act under the supervision of academic staff. They are involved for a minimum of 10% and for a maximum of 50% of their annual workload (e.g. 10 residents employed half-time (50%) for clinical training of undergraduate students + 8 PhD students employed quarter-time (25%) for practical training of undergraduate students = 7 FTEs).*

Researchers, invited speakers, unpaid lecturers, practitioners supervising the EPT and other persons who only occasionally contribute to the training of students ***are not included in the teaching staff tables*** *but must be reported for information in the SER.*

***Support staff**: This category includes staff who are dedicated to administrative, teaching or research tasks related to students, and to care of facilities, equipment and/or animals in the VEE. They act under the supervision of teaching staff. The support staff involved with teaching must have received some training to teach (i.e. basic level).*

***Qualified persons**: This category is in charge of EPT. They hold a recognised degree and have extensive experience and ability for supervising EPT. They are not considered as 'teaching staff' which is devoted to CCT. They must have received some training to teach (i.e. basic level), agree to follow the VEE's code of conduct and rules for EPT and have an agreement with the VEE and student(s).*

***Research staff**: This category includes scientists whose main task is to conduct research work, although they may occasionally participate in teaching.*

***Permanent staff**: staff who have a permanent contract and are paid by the VEE's core funding (public funding and/or tuition fees) (budgeted posts).*

***Temporary staff**: staff who have a fixed-term contract and are paid by service income, research grants, contract research, ... (non-budgeted posts).*

Standard 9.1: The VEE must ensure that all staff are appropriately qualified and prepared for their roles, in agreement with national and EU regulations and must apply fair and transparent processes for the recruitment and development of staff.
A formal quality-assured programme of teacher training[1] (including good teaching and evaluation practices, learning and e-learning resources, use of digital tools education, biosecurity and QA procedures) must be in place for all staff involved with teaching. Such training must be mandatory for all newly appointed teaching staff and encouraged on a regular basis for all teaching staff.
Most teaching staff (calculated as FTE) involved in core veterinary training must be veterinarians. It is expected that more than 2/3 of the instruction that the students receive, as determined by student teaching hours, is delivered by qualified veterinarians.

Description of the global strategy in order to ensure that all requested competences for the veterinary programme are covered and that staff are properly qualified and prepared for their roles (e.g. good teaching and assessing practices, knowledge of up-to-date (e-)learning resources, biosecurity and QA procedures, ...)

[1] General guidelines on the minimum training to teach and to assess for each category of teachers (to be used as a general guiding reference and amended as necessary for the writing of the SER, taking into account the local characteristics and peculiarities of the VEE):

	Basic level	***Intermediate level***	***Advanced level***
Persons concerned	*EPT providers and support staff involved with teaching*	*Non-academic teaching staff*	*Academic staff*
Code of conduct	✓	✓	✓
ESEVT Day One Competences (D1C)	✓	✓	✓
GCP (good clinical practice)	✓	✓	✓

Practical & clinical teaching (basic)	✓	✓	✓
Practical & clinical teaching (advanced)		✓	✓
Teaching methodologies		-	✓
Teaching tools		✓	✓
Assessment methodologies		-	✓
Assessment tools		✓	✓
QA loops in teaching and assessment	-	-	✓
Minimum duration of the initial training	*4 h*	*16 h*	*24 h*
Annual update	-	-	✓
Format	*physical, online or e-learning*	*physical, online or e-learning*	*physical, online or e-learning*

Standard 9.2: The total number, qualifications and skills of all staff involved with the study programme, including teaching, technical, administrative and support staff, must be sufficient and appropriate to deliver the study programme and fulfil the VEE's mission.
A procedure must be in place to assess if the staff involved with teaching 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, teaching or support staff, senior or junior, permanent or temporary, teachers. Guidelines for the minimum training to teach and to assess are provided in Annex 6, Standard 9.1.

Table 9.2.1. Teaching staff involved with the core veterinary programme**

Type of contract	*AY**	*AY-1*	*AY-2*	*Mean*
Academic staff (FTE)				
Interns (FTE)				
Residents (FTE)				
PhD students (FTE)				
Certified specialists (FTE)				
Practitioners (FTE)				
Others (specify) (FTE)				
Total (FTE)				

** The last complete academic year prior to the Visitation*
*** All staff included in this table must be contracted by the VEE and have received a training to teach and to assess undergraduate students. Qualified persons/practitioners involved with EPT are not included in this table.*

Table 9.2.2. Percentage (%) of veterinarians in teaching staff

Type of contract	*AY**	*AY-1*	*AY-2*	*Mean*
Permanent (FTE)				
Temporary (FTE)				

Table 9.2.3. Support staff of the veterinary programme

Type of contract	*AY**	*AY-1*	*AY-2*	*Mean*
Permanent (FTE)				
Temporary (FTE)				
Total (FTE)				

Table 9.2.4. Research staff of the VEE

Type of contract	*AY**	*AY-1*	*AY-2*	*Mean*
Permanent (FTE)				
Temporary (FTE)				
Total (FTE)				

Prospected number of FTE teaching and support staff of the veterinary programme for the next 3 academic years

Description of the formal programme for the selection and recruitment of the teaching staff and their training to teach and assess students (including continuing education)

Description of the formal programme for the selection, recruitment and training to perform their specific duties (including continuing education) of the support staff

Description of the formal rules governing outside work, including consultation and private practice, by staff working at the VEE

Standard 9.3: Staff must be given opportunities to develop and extend their teaching and assessment knowledge and must be encouraged to improve their skills. Opportunities for didactic and pedagogic training and specialisation must be available. The VEE must clearly define systems of reward for teaching excellence in operation.
Teaching positions must offer the security and benefits necessary to maintain the stability, continuity, and competence of the teaching staff. Teaching staff must have a balanced workload of teaching, research and service depending on their role. They must have reasonable opportunities and resources for participation in scholarly activities.

Description of the peculiarities of the work contract for teaching staff (e.g. permanent versus temporary, balance between teaching, research and services, continuing education, ...)

Standard 9.4: The VEE must provide evidence that it utilises a well-defined, comprehensive and publicised programme for the professional growth and development of teaching and support staff, including formal appraisal and informal mentoring procedures.
Staff must have the opportunity to contribute to the VEE's direction and decision-making processes.
Promotion criteria for teaching 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.

Description of the programmes dedicated to teaching and support staff for:
-) their professional growth and development
-) the appraisal and promotion procedures
-) the mentoring and supporting procedures
-) their implication in the decision-making processes

Standard 9.5: A system for assessment of teaching and teaching staff must be implemented on a cyclical basis and must formally include student participation. Results must be communicated to the relevant staff and commented upon in reports. Evidence must be provided that this system contributes to correcting deficiencies and to enhancing the quality and efficiency of education.

Description of the formal system in place for assessing the teachers by the students

Description of how (procedures) and by whom (description of the committee structure) the

strategy for allocating, recruiting, promoting, supporting and assessing teaching and support staff is decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Comments on Area 9

Suggestions for improvement in Area 9

Area 10. Research programmes, continuing and postgraduate education

Standard 10.1: The VEE must demonstrate significant and broad research activities of teaching staff that integrate with and strengthen the study programme through research-based teaching. The research activities must include veterinary basic and clinical sciences. Evidence must be provided that most teaching staff are actively involved with research programmes (e.g. via research grants, publications in congress proceedings and in peer-reviewed scientific journals).

Description of how the research activities of the VEE and the implication of most teaching staff in it contribute to research-based veterinary education

Table 10.1.1. List of the major funded research programmes in the VEE which were ongoing during the last complete academic year prior the Visitation (AY*) *(this table may be substituted by a VEE list of ongoing research projects)*

Scientific topics:	*grant/year (€)*	*Duration (Yrs)*
..		
..		

Standard 10.2: All students must be trained in scientific methods and research techniques relevant to evidence-based veterinary medicine and must have opportunities to participate in research programmes.

Description of how (undergraduate) students:
-) are made aware of the importance of evidence-based medicine, scientific research and lifelong learning;
-) are initiated into bibliographic search, scientific methods and research techniques, and the writing of scientific papers

Description of how undergraduate students are offered to participate in research programmes on a non-compulsory or compulsory basis

Description of the minimum requirements for the graduation thesis (Master dissertation), its supervision and its assessment

Standard 10.3: The VEE must provide advanced postgraduate degree programmes, e.g. PhD, internships, residencies and continuing education programmes that complement and strengthen the study programme and are relevant to the needs of the profession and society.

Table 10.3.1. Number of students registered at postgraduate clinical training

Training:	*AY**	*AY-1*	*AY-2*	*Mean*
Interns:				
Companion animals				
Equine				
Production animals				
Others (specify)				
..				
Total				
Residents:				
EBVS disciplines (specify)				
..				
..				
Total				
Others (non-EBVS programmes) (specify)				
..				

** The last complete academic year prior to the Visitation*

Table 10.3.2. Number of students registered at postgraduate research training

Degrees:	*AY**	*AY-1*	*AY-2*	*Mean*
PhD				
Others (specify)				
..				
Total				

Table 10.3.3. Number of students registered at other postgraduate programmes in the VEE but not related to either clinical or research work (including any external/distance learning courses)

Programmes:	*AY**	*AY-1*	*AY-2*	*Mean*
..				
..				

Table 10.3.4. Number of attendees to continuing education courses provided by the VEE

Courses:	*AY**	*AY-1*	*AY-2*	*Mean*
..				
..				

Prospected number of students registered at post-graduate programmes for the next 3 academic years

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

Description of how the continuing education programmes provided by the VEE are matched to the needs of the profession and the community

Standard 10.4: The VEE must have a system of QA to evaluate how research activities provide opportunities for student training and staff promotion, and how research approaches, methods and results are integrated into the study programme.

Description of the mechanism used by the VEE to ensure that its research activities contribute to research-based education

Description of how (procedures) and by whom (description of the committee structure) research, continuing and postgraduate education programmes organised by the VEE are decided, communicated to staff, students and stakeholders, implemented, assessed and revised

Comments on Area 10

Suggestions for improvement in Area 10

ESEVT Indicators *(see Annex 4)*

Complete the Excel file and include here the raw data and the calculated Indicators (i.e. both sheets of the Excel file)

Comments on the Indicators

Suggestions for improvement on Indicators

Glossary

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

List of Appendices *(to be provided separately and not in the SER)*

-) Current teaching staff, qualifications, their FTE, teaching responsibilities and departmental affiliations

-) Units of study of the core veterinary programme (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

-) Maps of the VEE and the intra-mural and extra-mural facilities used in the core veterinary programme

-) Written assessment procedures for QA

-) List of scientific publications from the VEE's teaching staff in peer-reviewed journals during the last three academic years

-) Other relevant documents *(specify)*

The information to be contained in the Appendices must be carefully selected so that useful information is not swamped by large amounts of unnecessary detail. A hard copy of additional information may be provided on-site in the Team room.

Annex 7. Timetable and guidelines for the Full Visitation

(as approved by the EAEVE Executive Committee on 10 December 2025)

INTRODUCTION

This document is a standardised programme for a Full Visitation.

The specific programme must be proposed by the Liaison Officer two months before the start of the visitation at the latest and is finalised in agreement with the Chairperson and the Coordinator.

The Coordinator and the Liaison Officer have the flexibility to determine appropriate individual arrangements, particularly concerning the Wednesday dinner, in alignment with local circumstances and the specific nature of the Visitation.

Two preparatory webinars are organised by the Coordinator, i.e. one with the Team alone (including observer) around two months before the start of the visitation (with main objective to provide guidelines for the writing of the draft A Visitation Report) and one with the Team, (including observer) Head of VEE and Liaison Officer (with the main objective to finalise the logistic issues and the visitation programme).

TIMETABLE

Monday (Day 1)

-) by 15.00 at the latest: arrival of the Visitors at the hotel

-) 16.00-17:00: meeting of the Full Visitation Team (i.e. 8 persons called Team in this Annex) in the hotel Team room dedicated to continuing education for the Visitors (led by the Coordinator)

-) 17.00-18.00: first official meeting of the Team

-) 18.00-19.00: meeting with the VEE's Head and the Liaison Officer in the hotel Team room

-) 19.30-21.30: dinner with the VEE's Head, Liaison Officer and representatives of Teaching Staff and Students as appointed and invited by the VEE's Head. The dinner should take place close to the hotel (to avoid long journeys), bring together a maximum of 10 local guests (to match the 8-10 ESEVT visitors) and last a maximum of 90 minutes.

Tuesday (Day 2)

07.30: transfer to the VEE Team Room

08.00-08.30: settling in the Team Room with access to a VEE IT-person

08.30- 09.15: meeting with the management of the VEE: presentation of the objectives of the Visitation by the Chairperson and presentation of the VEE by its Head

09.30-12.30 and 13.30-16.45: visit to all the intra-mural facilities/departments/units by the complete Team with a very short introduction by the responsible person of each unit (strict timetable is requested to avoid any delay) (a short coffee break is welcome in the middle of the morning and afternoon sessions)

12.30-13.30: informal lunch for the Team alone

13.30-16.45: see above

17.00-19.00: Team work in the VEE or hotel Team room

19.00: informal dinner for the Team alone without its student member (in the hotel or within walking distance)

19.00: informal dinner between the student member of the Team and representatives of local undergraduate students.

Wednesday (Day 3)

08.00: transfer to the VEE Team room

08.30–12.00: by individual Visitors or by sub-groups of Visitors:
-) visit to the extra-mural facilities involved in the veterinary curriculum (clinics, dispensaries, teaching farms, slaughterhouses, ...);
-) visit in depth of selected intra-mural facilities (e.g. VTH and pre-clinical training facilities);
-) meeting with staff involved with QA.
(precise programme and name of attendees for each visit to be finalised during the Monday evening meeting)
12.00-13.00: informal lunch for the Team alone
13.00-17.30: separate meetings with the relevant responsible persons for each ESEVT Area, i.e.:
-) Areas 1 & 2: Organisation, QA and Finances (60 min)
-) Area 3: Curriculum (60 min)
-) Area 4: Facilities (30 min)
-) Areas 5 & 6: Animal Resources and Learning Resources (30 min)
-) Areas 7 & 8: Students (30 min)
-) Area 9: Staff (30 min)
-) Area 10: Research and post-graduate programmes (30 min)
(precise programme and name of attendees for each meeting to be finalised during the Monday evening meeting at the latest)
17.30-19.00: Team work in the VEE or hotel Team room
19.30-21.30: dinner with the VEE's Head, Liaison Officer, Rector and relevant stakeholders as appointed and invited by the VEE's Head (e.g. representatives of veterinary chamber, veterinary union, statutory bodies, practitioners involved with extramural core training and EPT).
The dinner should take place close to the hotel (to avoid long journeys), bring together a maximum of 10 local guests (to match the 8-10 ESEVT visitors) and last a maximum of 90 minutes.

Thursday (Day 4)
08.00: transfer to the VEE Team room
08.30-09.30: meeting with Teaching Staff (without the participation of the VEE's Head and Liaison Officer)
09.30-10.30: meeting with graduates involved with the veterinary curriculum (interns, residents, assistants, PhD students)
10.30-11.00: meeting with Support Staff (technical, laboratory, administrative, nursing, IT)
11.00-12.00: meeting with undergraduate students (several students from each year/semester of the curriculum, including students on eventual foreign language tracks)
12.00-12.45: open session in confidence for individuals (staff, students and EPT providers) in the VEE Team Room (the VEE must inform in advance via e-mail all staff, students and EPT providers about this opportunity
In the morning: final on-site visits by individual Visitors if necessary
13.00-14.00: lunch with alumni (i.e. local practitioners, employers of graduate students, representatives of professional organisations and stakeholders) who understand and speak basic English
14.00-18.30: Team work at the VEE or hotel Team room
19.00: informal dinner for the Team alone (in the hotel or within walking distance)

Friday (Day 5)
08.00: transfer to the VEE

Around 8.30: Exit Presentation to the VEE's Head, Liaison Officer and representatives of staff and students (e.g. members of the VEE's Council)
From the end of the Exit Presentation at the earliest: transfer of the Visitors to the airport/train station

Note: Wi-Fi access, multiple (>10) electrical sockets (including adapters when necessary), soft and hot drinks and one printed copy of the SER, its Appendices and the relevant ESEVT SOP must be available upon arrival on Monday both at the hotel and in the VEE Team rooms.

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

(as approved by the EAEVE Executive Committee on 10 December 2024)

FULL VISITATION REPORT

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

On *(date of the Full Visitation)*

By the Full 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 Veterinary Public Health (including 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 and put first in the list above)

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

The Full Visitation Report must be written in agreement with the ESEVT SOP (see Chapter 2, paragraph 1.6). The version of the SOP used to write the Full Visitation Report must coincide with the version the VEE followed when preparing its SER, as stated in the official Full Visitation agreement.

After having received the SER, the Coordinator makes the Full Visitation Report template available for all team members in an online document editor. Twenty calendar days before the visitation at the latest, each Visitor must have read the full SER and its Appendices, completed the delegated areas in the draft Full Visitation Report (at least the sections 'Findings' and 'Questions to be asked to the VEE'/ 'Issues to be clarified on-site').

The final comprehensive list of questions and requests is sent by the Coordinator to the VEE 14 calendar days before the start of the visitation at the latest, to allow the Liaison Officer sufficient time to collect the required data.

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

For the writing of the Full Visitation Report, it is expected from all Visitors to:
-) use UK English, the standardised terminology proposed in the SOP and the international system of units (SI) (please remember that the Report will be public);
-) be concise and avoid cutting and copying what is already in the SER (the info provided on site must be added of course);
-) avoid comments/analysis in 'Findings', findings in 'Analysis of the findings/Comments', repetitions/redundancies from other chapters;
-) avoid using phrases such as 'It seems that …', 'The Team believes…', 'The Team finds…', 'It is the opinion of the Team that…';
-) be precise and avoid ambiguous terms like 'lack of' (please use 'absence' or 'insufficiency' or 'inadequacy' instead).

The different parts of each chapter of the Full Visitation Report must include the following:
-) Findings*:*

- *a short summary of the most relevant points from the SER (which according to observations on site must be corrected on site if necessary)*
- *new relevant information gained on site*

-) Analysis of the findings/Comments*:*

- *commendations to the VEEs for things which are worthy of praise (if any)*
- *a brief summary in general terms of what is compliant with the relevant Standard*
- *a list of what is partially/not compliant with the relevant Standard, with a clear explanation of the reason for the deficiency (if any)*

-) Suggestions for improvement*: they must be brief and only focused on ways for improving the partial/non-compliance with the Standards ('It is suggested to ..'); they should not be too concrete but formulated in a broader sense since it is the responsibility of the VEE to find the most appropriate way to correct the deficiencies.*

-) Proposal from the Full Visitation Team*: it must be completed by the Coordinator after the Thursday afternoon Team meeting, be consistent with the 'Findings' and 'Analysis of the findings/Comments' of the relevant Standard and use the following standardised terminology:*

- *The VEE is compliant with Standard X.Z.*
- *The VEE is partially compliant with Standard X.Z. because of (relevant text – e.g. suboptimal clinical training in the equine species).*
- *The VEE is not compliant with Standard X.Z. because of (relevant text – e.g. insufficient clinical training in the equine species).*

The draft A Full Visitation Report must be completed by each Visitor in the online document editor twenty calendar days before the start of the visitation at the latest (at this stage it must include at least the 'Findings', 'Questions to be asked to the VEE' and 'Issues to be clarified on-site') and it must be amended during the visitation based on the replies to questions, onsite findings and onsite discussions within the Team. The resulting draft B must be completed before the end of the visitation, edited by the Coordinator and Chairperson and sent to the VEE for correction of factual errors 14 calendar days after the visitation at the latest.

If a VEE offers more than one study programme leading to the degree of a veterinarian, the peculiarities of each programme must be described for each Standard.

The text in italics in this template must be deleted in the final version of the Full Visitation Report.

Standard distribution of the principal writers for the Full Visitation Report

(It may be modified at the discretion of the Chairperson and the Coordinator)

Introduction: CO
Area 1. Objectives, Organisation and Quality Assurance Policy: QA (helped by CO)
Area 2. Finances: P (helped by CO)
Area 3. Curriculum: BS (helped by all experts)
Except for Standards:
3.1.3: Clinical Sciences in companion animals (including equine and exotic pets): CS-CA
3.1.4: Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management): CS-FPA
3.1.5: Veterinary Public Health (including Food Safety and Quality): VPH
3.1.6: Professional knowledge (including soft skills, e.g. communication, team working skills, management skills): P
3.2 up to 3.4: QA
3.5 up to 3.7: P (helped by ST)
Area 4. Facilities and equipment: CS-CA (helped by P)
Area 5. Animal resources and teaching material of animal origin: CS-FPA (helped by ST)
Area 6. Learning resources: VPH (helped by ST)
Area 7. Student admission, progression and welfare: QA (helped by ST)
Area 8. Student assessment: BS (helped by ST)
Area 9. Teaching and support staff: CS-FPA (helped by CS-CA)
Area 10. Research programme, postgraduate and continuing education: VPH (helped by BS)
Executive Summary: CO (helped by Chairperson)
ESEVT Indicators: CO (helped by all experts)
Rubrics: CO (helped by all experts)

(BS: Basic Sciences; CO: Coordinator; CS-CA: Clinical Sciences in companion animals (including equine and exotic pets); CS-FPA: Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management); VPH: Veterinary Public Health (including Food Safety and Quality); P: Practitioner; QA: Quality Assurance; ST: Student)

Contents of the Full Visitation Report

Introduction
Area 1. Objectives, Organisation and Quality Assurance Policy
Area 2. Finances
Area 3. Curriculum
Area 4. Facilities and equipment
Area 5. Animal resources and teaching material of animal origin
Area 6. Learning resources
Area 7. Student admission, progression and welfare
Area 8. Student assessment
Area 9. Teaching and support staff
Area 10. Research programmes, continuing and postgraduate education
11. ESEVT Indicators
12. ESEVT Rubrics
Executive Summary
Glossary

Introduction

Brief history of the VEE and of its previous ESEVT visitations (if any)

Main features of the VEE

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 Full Visitation

Area 1. Objectives, Organisation and Quality Assurance Policy

Standard 1.1: The VEE must have as its main objective the provision, in agreement with the EU Directives and ESG Standards, of 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.
The VEE must develop and follow its mission statement which must embrace the ESEVT Standards.

1.1.1. Findings

1.1.2. Analysis of the findings/Comments

1.1.3. Suggestions for improvement

1.1.3'. Questions to be asked to the VEE

1.1.3". Issues to be clarified on-site

1.1.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 1.2: The VEE 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.
The person responsible for the veterinary curriculum and the person(s) responsible for the professional, ethical, and teaching affairs of the Veterinary Teaching Hospital (VTH) must hold a veterinary degree.
The decision-making process, organisation and management of the VEE must allow implementation of its strategic plan and of a cohesive study programme, in compliance with the ESEVT Standards.

1.2.1. Findings

1.2.2. Analysis of the findings/Comments

1.2.3. Suggestions for improvement

1.2.3'. Questions to be asked to the VEE

1.2.3". Issues to be clarified on-site

1.2.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 1.3: The VEE must have a strategic plan, which includes a SWOT analysis of its current activities, short- and medium-term objectives, and an operating plan with a timeframe and indicators for its implementation. The development and implementation of the VEE's strategy must include a role for students and other stakeholders, both internal and external, and the strategy must have a formal status and be publicly available.

1.3.1. Findings

1.3.2. Analysis of the findings/Comments

1.3.3. Suggestions for improvement

1.3.3'. Questions to be asked to the VEE

1.3.3". Issues to be clarified on-site

1.3.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially*

compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.

Standard 1.4: The VEE must have a policy and associated written procedures for the assurance of the quality and standards of its programmes and awards. It must also commit itself explicitly to the development of a culture which recognises the importance of quality, and QA within the VEE. To achieve this, the VEE must develop and implement a strategy for the continuous enhancement of quality.
The VEE must have a policy for academic integrity, i.e. the expectation that all staff and students act with honesty, trust, fairness, respect and responsibility.

1.4.1. Findings

1.4.2. Analysis of the findings/Comments

1.4.3. Suggestions for improvement

1.4.3'. Questions to be asked to the VEE

1.4.3". Issues to be clarified on-site

1.4.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 1.5: The VEE must provide evidence that it interacts with its stakeholders and the wider society. Such public information must be clear, objective and readily accessible; the information must include up-to-date information about the study programme.
The VEE's website must mention the VEE's ESEVT status and its last Self-Evaluation Report and Visitation Reports must be easily available to the public.

1.5.1. Findings

1.5.2. Analysis of the findings/Comments

1.5.3. Suggestions for improvement

1.5.3'. Questions to be asked to the VEE

1.5.3". Issues to be clarified on-site

1.5.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*
Standard 1.6: The VEE must monitor and periodically review its activities, both quantitative and qualitative, to ensure that they achieve the objectives set for them and respond to the needs of students and society. The VEE must make public how this analysis of information has been utilised in the further development of its activities and provide evidence as to the involvement of both students and staff in the provision, analysis and

implementation of such data. Evidence must be provided that the QA loops are fully closed (Plan Do Check Adjust cycles) to efficiently enhance the quality of education. Any action planned or taken as a result of this data analysis must be communicated to all those concerned.

1.6.1. Findings

1.6.2. Analysis of the findings/Comments

1.6.3. Suggestions for improvement

1.6.3'. Questions to be asked to the VEE

1.6.3". Issues to be clarified on-site

1.6.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 1.7: The VEE must undergo external review through the ESEVT on a cyclical basis. Evidence must be provided of such external evaluation with the assurance that the progress made since the last ESEVT evaluation was linked to a continuous quality assurance process.

1.7.1. Findings

1.7.2. Analysis of the findings/Comments

1.7.3. Suggestions for improvement

1.7.3'. Questions to be asked to the VEE

1.7.3". Issues to be clarified on-site

1.7.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Area 2. Finances

Standard 2.1: Finances must be demonstrably adequate to sustain the requirements for the VEE to meet its mission and to achieve its objectives for education, research and services. The description must include both expenditures (separated into personnel costs, operating costs, maintenance costs and equipment) and revenues (separated into public funding, tuition fees, services, research grants and other sources).

2.1.1. Findings

2.1.2. Analysis of the findings/Comments

2.1.3. Suggestions for improvement

2.1.3'. Questions to be asked to the VEE

2.1.3". Issues to be clarified on-site

2.1.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 2.2: Clinical and field services must function as instructional resources. The instructional integrity of these resources must take priority over the financial self-sufficiency of clinical services operations.
The VEE must have sufficient autonomy in order to use the resources to implement its strategic plan and to meet the ESEVT Standards.

2.2.1. Findings

2.2.2. Analysis of the findings/Comments

2.2.3. Suggestions for improvement

2.2.3'. Questions to be asked to the VEE

2.2.3". Issues to be clarified on-site

2.2.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

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

2.3.1. Findings

2.3.2. Analysis of the findings/Comments

2.3.3. Suggestions for improvement

2.3.3'. Questions to be asked to the VEE

2.3.3". Issues to be clarified on-site

2.3.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major*

Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.

Area 3. Curriculum

Standard 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. The curriculum must include the subjects (input) and must allow the acquisition of the Day One Competences (output) listed in the ESEVT SOP Annex 2.
This concerns:

- Basic Sciences
- Clinical Sciences in companion animals (including equine and exotic pets)
- Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management)
- Veterinary Public Health (including Food Safety and Quality)
- Professional Knowledge (including soft skills, e.g. communication, team working skills, management skills).

When part of the study programme cannot be organised because of imposed regulations or constraints, convincing compensations must be developed and implemented.

If a VEE offers more than one study programme to become a veterinarian, e.g. in different languages or in collaboration with other VEEs, all study programmes and respective curricula must be described separately in the SER. For each Standard, the VEE must explain if there are differences or not with the basic programme and all this information must be provided as a formal annex to the SER.
Similarly, if a VEE implements a tracking (elective) system in its study programme, it must provide a clear explanation of the tracking system in the SER.

3.1.1. General findings

3.1.1.1. Findings

3.1.1.2. Analysis of the findings/Comments

3.1.1.3. Suggestions for improvement

3.1.1.3'. Questions to be asked to the VEE

3.1.1.3". Issues to be clarified on-site

3.1.1.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

3.1.2. Basic Sciences

3.1.2.1. Findings

3.1.2.2. Analysis of the findings/Comments

3.1.2.3. Suggestions for improvement

3.1.2.3'. Questions to be asked to the VEE

3.1.2.3". Issues to be clarified on-site

3.1.2.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

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

3.1.3.1. Findings

3.1.3.2. Analysis of the findings/Comments

3.1.3.3. Suggestions for improvement

3.1.3.3'. Questions to be asked to the VEE

3.1.3.3". Issues to be clarified on-site

3.1.3.4 Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

3.1.4. Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management)

3.1.4.1. Findings

3.1.4.2. Analysis of the findings/Comments

3.1.4.3. Suggestions for improvement

3.1.4.3'. Questions to be asked to the VEE

3.1.4.3". Issues to be clarified on-site

3.1.4.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

3.1.5. Veterinary Public Health (including Food Safety and Quality)

3.1.5.1. Findings
3.1.5.2. Analysis of the findings/Comments

3.1.5.3. Suggestions for improvement

3.1.5.3'. Questions to be asked to the VEE

3.1.5.3". Issues to be clarified on-site

3.1.5.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

3.1.6. Professional Knowledge

3.1.6.1. Findings

3.1.6.2. Analysis of the findings/Comments

3.1.6.3. Suggestions for improvement

3.1.6.3'. Questions to be asked to the VEE

3.1.6.3". Issues to be clarified on-site

3.1.6.4 Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 3.2: Each study programme provided by the VEE must be competency-based and designed so that it meets the objectives set for it, including the intended learning outcomes. The qualification resulting from a programme must be clearly specified and communicated and must 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.
The VEE must provide proof of a QA system that promotes and monitors the presence of a teaching environment highly conducive to learning including self-learning. Details of the type, provision and updating of appropriate learning opportunities for the students must be clearly described, as well as the involvement of students.
The VEE must also describe how it encourages and prepares students for lifelong learning.

3.2.1. Findings

3.2.2. Analysis of the findings/Comments

3.2.3. Suggestions for improvement

3.2.3'. Questions to be asked to the VEE

3.2.3". Issues to be clarified on-site

3.2.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 3.3: Programme learning outcomes must:

- **ensure the effective alignment of all content, teaching, learning and assessment activities of the degree programme to form a cohesive framework**
- **include a description of Day One Competences**
- **form the basis for explicit statements of the objectives and learning outcomes of individual units of study**
- **be communicated to staff and students**
- **be regularly reviewed, managed and updated to ensure they remain relevant, adequate and are effectively achieved.**

3.3.1. Findings

3.3.2. Analysis of the findings/Comments

3.3.3. Suggestions for improvement

3.3.3'. Questions to be asked to the VEE

3.3.3". Issues to be clarified on-site

3.3.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 3.4: The VEE 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**
- **perform ongoing reviews and periodic in-depth reviews of the curriculum (at least every seven years) by involving staff, students and stakeholders; these reviews must lead to continuous improvement of the curriculum. Any action taken or planned as a result of such a review must be communicated to all those concerned**
- **identify and meet training needs for all types of staff, maintaining and enhancing their competence for the ongoing curriculum development.**

3.4.1. Findings

3.4.2. Analysis of the findings/Comments

3.4.3. Suggestions for improvement

3.4.3'. Questions to be asked to the VEE

3.4.3". Issues to be clarified on-site

3.4.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 3.5: Elective Practical Training (EPT) includes compulsory training activities that each student must achieve before graduation to complement and strengthen their core theoretical and practical academic education, inter alia by enhancing their experience, professional knowledge and soft skills. Like all elective activities, its contents may vary from one undergraduate student to another.
EPT is organised either extra-murally with the student being under the direct supervision of a qualified person (e.g. a veterinary practitioner) or intra-murally, with the student being under the supervision of a teaching staff or a qualified person.
EPT itself cannot replace the Core Clinical Training (CCT) under the close supervision of teaching staff (e.g. ambulatory clinics, herd health management, practical training in VPH (including Food Safety and Quality (FSQ)). A comparison between CCT and EPT is provided in Annex 6, Standard 3.5.

3.5.1. Findings

3.5.2. Analysis of the findings/Comments

3.5.3. Suggestions for improvement

3.5.3'. Questions to be asked to the VEE

3.5.3". Issues to be clarified on-site

3.5.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 3.6: The EPT providers must meet the relevant national Veterinary Practice Standards, have an agreement with the VEE and the student (stating 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 VEE on the EPT programme.
There must be a member of the teaching staff responsible for the overall supervision of the EPT, including liaison with EPT providers.

3.6.1. Findings

3.6.2. Analysis of the findings/Comments

3.6.3. Suggestions for improvement

3.6.3'. Questions to be asked to the VEE

3.6.3". Issues to be clarified on-site

3.6.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 3.7: 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 VEE and evaluating the EPT. Students must be allowed to complain officially and/or anonymously about issues occurring during EPT. The VEE must have a system of QA to monitor the implementation, progress and then feedback within the EPT activities.

3.7.1. Findings

3.7.2. Analysis of the findings/Comments

3.7.3. Suggestions for improvement

3.7.3'. Questions to be asked to the VEE

3.7.3". Issues to be clarified on-site

3.7.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Area 4. Facilities and equipment

Standard 4.1: All aspects of the physical facilities must provide an environment conducive to learning, including internet access at all relevant sites where theoretical, practical and clinical education takes place. The VEE must have a clear strategy and programme for maintaining and upgrading its buildings and equipment. Facilities must comply with all relevant legislation including health, safety, biosecurity, accessibility to people including students with a disability, and EU animal welfare and care standards.

4.1.1. Findings

4.1.2. Analysis of the findings/Comments

4.1.3. Suggestions for improvement

4.1.3'. Questions to be asked to the VEE

4.1.3". Issues to be clarified on-site

4.1.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 4.2: Lecture theatres, teaching laboratories, tutorial rooms, clinical facilities and other teaching spaces must be adequate in number and size, equipped for instructional purposes and well maintained. The facilities must be adapted for the number of students enrolled. Students must have ready access to adequate and sufficient study, self-learning, recreation, locker, sanitary and food service facilities.
Offices, teaching preparation and research laboratories must be sufficient for the needs of the teaching and support staff to support their teaching and research efforts.

4.2.1. Findings

4.2.2. Analysis of the findings/Comments

4.2.3. Suggestions for improvement

4.2.3'. Questions to be asked to the VEE

4.2.3". Issues to be clarified on-site

4.2.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 4.3: The livestock facilities, animal housing, core clinical teaching facilities and equipment used by the VEE for teaching purposes must:

- **be sufficient in capacity and adapted for the number of students enrolled in order to allow safe hands-on training for all students**
- **be of a high standard, well maintained and fit for the purpose**
- **promote best husbandry, welfare and management practices**
- **ensure relevant biosecurity**
- **take into account environmental sustainability**
- **be designed to enhance learning.**

4.3.1. Findings

4.3.2Analysis of the findings/Comments

4.3.3. Suggestions for improvement

4.3.3'. Questions to be asked to the VEE

4.3.3". Issues to be clarified on-site

4.3.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 4.4: Core clinical teaching facilities must be provided in a veterinary teaching hospital (VTH) with 24/7 emergency services at least for companion animals and equines. Within the VTH, the VEE must unequivocally demonstrate that the standard of education and clinical research is compliant with all ESEVT Standards, e.g. research-based and evidence-based clinical training supervised by teaching 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, on-call service must be available if emergency services do not exist for those species in a VTH.
The VEE must ensure state-of-the-art standards of teaching clinics which remain comparable with or exceed the best available clinics in the private sector.
The VTH and any hospitals, practices and facilities which are involved with the core curriculum must be compliant with the ESEVT Standards and meet the relevant national Veterinary Practice Standards.

4.4.1. Findings

4.4.2. Analysis of the findings/Comments

4.4.3. Suggestions for improvement

4.4.3'. Questions to be asked to the VEE

4.4.3". Issues to be clarified on-site

4.4.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 4.5: The VEE must ensure that students have access to a broad range of diagnostic and therapeutic facilities, including but not limited to clinical skills laboratory, diagnostic imaging, clinical pathology, anaesthesia, surgeries and treatment facilities, intensive/critical care, ambulatory services, pharmacy and necropsy facilities. Procedures and facilities should also be available for soft skills training, e.g. communication skills training through role-play.

4.5.1. Findings

4.5.2. Analysis of the findings/Comments

4.5.3. Suggestions for improvement

4.5.3'. Questions to be asked to the VEE

4.5.3". Issues to be clarified on-site

4.5.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 4.6: 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 the prevention of the spread of infectious agents, animal care and student training. They must be adapted to all animal species commonly handled in the VTH. When permanent isolation facilities are not available in any of the facilities used for clinical training, the ability to provide such facilities and the procedures to use them appropriately in an emergency must be demonstrated during the visitation.

4.6.1. Findings

4.6.2. Analysis of the findings/Comments

4.6.3. Suggestions for improvement

4.6.3'. Questions to be asked to the VEE

4.6.3". Issues to be clarified on-site

4.6.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 4.7: The VEE must have an ambulatory clinic for production animals or equivalent facilities so that students can practise field veterinary medicine and Herd Health Management under the supervision of teaching staff.

4.7.1. Findings

4.7.2. Analysis of the findings/Comments

4.7.3. Suggestions for improvement

4.7.3'. Questions to be asked to the VEE

4.7.3". Issues to be clarified on-site

4.7.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 4.8: 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 animal welfare, and to prevent

the spread of infectious agents.

4.8.1. Findings

4.8.2. Analysis of the findings/Comments

4.8.3. Suggestions for improvement

4.8.3'. Questions to be asked to the VEE

4.8.3". Issues to be clarified on-site

4.8.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 4.9: Operational policies and procedures (including biosecurity, good laboratory practice and good clinical practice) must be taught and posted (in different languages if the curriculum is taught in them) for students, staff and visitors and a biosecurity manual must be developed and made easily available for all relevant persons. The VEE must demonstrate a clear commitment for the delivery and the implementation of biosecurity, e.g. by a specific committee structure. The VEE must have a system of QA to monitor and assure clinical, laboratory and farm services, including regular monitoring of the feedback from students, staff and clients.

4.9.1. Findings

4.9.2. Analysis of the findings/Comments

4.9.3. Suggestions for improvement

4.9.3'. Questions to be asked to the VEE

4.9.3". Issues to be clarified on-site

4.9.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Area 5. Animal resources and teaching material of animal origin

Standard 5.1: The number and variety of healthy and diseased animals, first opinion and referral cases, cadavers, and material of animal origin must be adequate for providing the practical and safe hands-on training in all relevant areas and adapted to the number of students enrolled.
Evidence must be provided that these data are regularly recorded and that procedures are in place for correcting any deficiencies.

5.1.1. Findings

5.1.2. Analysis of the findings/Comments

5.1.3. Suggestions for improvement

5.1.3'. Questions to be asked to the VEE

5.1.3". Issues to be clarified on-site

5.1.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 5.2: In addition to the training provided in the VEE, experience can include practical training at external sites, provided this training is organised under the supervision of teaching staff and follows the same standards as those applied in the VEE.

5.2.1. Findings

5.2.2. Analysis of the findings/Comments

5.2.3. Suggestions for improvement

5.2.3'. Questions to be asked to the VEE

5.2.3". Issues to be clarified on-site

5.2.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 5.3: The VTH must provide nursing care skills and instruction in nursing procedures. Under all situations students must be active participants in the clinical workup of patients, including problem-oriented diagnostic approach together with diagnostic decision-making.

5.3.1. Findings

5.3.2. Analysis of the findings/Comments

5.3.3. Suggestions for improvement

5.3.3'. Questions to be asked to the VEE

5.3.3". Issues to be clarified on-site

5.3.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially*

compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.

Standard 5.4: Medical records for patients seen intra- and extra-murally under Core Clinical Training (CCT) must be comprehensive and maintained in an effective retrieval system to efficiently support the teaching and learning, research, and service programmes of the VEE.

5.4.1. Findings

5.4.2. Analysis of the findings/Comments

5.4.3. Suggestions for improvement

5.4.3'. Questions to be asked to the VEE

5.4.3". Issues to be clarified on-site

5.4.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Area 6. Learning resources

Standard 6.1: State-of-the-art learning resources must be adequate and available to support veterinary education, research, services and continuing education. Learning resources must be suitable to implement teaching facilities to secure the 'never the first time on a live animal' concept. When the study programme is provided in several tracks/languages, the learning resources must be available in all used languages. 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, together with basic English teaching if necessary.

6.1.1. Findings

6.1.2. Analysis of the findings/Comments

6.1.3. Suggestions for improvement

6.1.3'. Questions to be asked to the VEE

6.1.3". Issues to be clarified on-site

6.1.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major*

Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.

Standard 6.2: Staff and students must have full access on site to an academic library administered by a qualified librarian, an Information Technology (IT) unit managed by a qualified IT person, an e-learning platform, and the relevant human and physical resources necessary for the development of instructional materials by the staff and their use by the students.
The relevant electronic information, database and other intranet resources must be easily available for students and staff both in the VEE's core facilities via wireless connection (Wi-Fi) and from outside the VEE through a hosted secured connection, e.g. Virtual Private Network (VPN).

6.2.1. Findings

6.2.2. Analysis of the findings/Comments

6.2.3. Suggestions for improvement

6.2.3'. Questions to be asked to the VEE

6.2.3". Issues to be clarified on-site

6.2.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 6.3: The VEE must provide students with unimpeded access to learning resources, internet and internal study resources, as well as facilities and equipment for the development of procedural skills (e.g. clinical skills laboratory). 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 changes in learning resources.

6.3.1. Findings

6.3.2. Analysis of the findings/Comments

6.3.3. Suggestions for improvement

6.3.3'. Questions to be asked to the VEE

6.3.3". Issues to be clarified on-site

6.3.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Area 7. Student admission, progression and welfare

Standard 7.1: The VEE must consistently apply pre-defined and published regulations covering all phases of the student "life cycle", e.g. student admission, progression and certification.
In relation to enrolment, the VEE must provide accurate and complete information regarding the educational programme in all advertisements for prospective national and international students.
Formal cooperation with other VEEs must also be clearly advertised.

7.1.1. Findings

7.1.2. Analysis of the findings/Comments

7.1.3. Suggestions for improvement

7.1.3'. Questions to be asked to the VEE

7.1.3". Issues to be clarified on-site

7.1.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 7.2: The number of students admitted must be consistent with the resources available at the VEE for staff, buildings, equipment, healthy and diseased animals, and materials of animal origin.

7.2.1. Findings

7.2.2. Analysis of the findings/Comments

7.2.3. Suggestions for improvement

7.2.3'. Questions to be asked to the VEE

7.2.3". Issues to be clarified on-site

7.2.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 7.3: The selection and progression criteria must be clearly defined, consistent, and defensible, be free of discrimination or bias, and take into account the fact that students are admitted with a view to their entry to the veterinary profession in due course. The VEE must regularly review and reflect on the selection processes to ensure they are appropriate for students to complete the programme successfully. If the selection processes are decided by another authority, the latter must regularly receive feedback from the VEE.

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

7.3.1. Findings

7.3.2. Analysis of the findings/Comments

7.3.3. Suggestions for improvement

7.3.3'. Questions to be asked to the VEE

7.3.3". Issues to be clarified on-site

7.3.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 7.4: There must be clear policies and procedures on how applicants with disabilities or illnesses are 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.

7.4.1. Findings

7.4.2. Analysis of the findings/Comments

7.4.3. Suggestions for improvement

7.4.3'. Questions to be asked to the VEE

7.4.3". Issues to be clarified on-site

7.4.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 7.5: The basis for decisions on progression (including academic progression and professional fitness to practise) must be explicit and readily available to the students. The VEE 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.
The VEE 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.

7.5.1. Findings

7.5.2. Analysis of the findings/Comments

7.5.3. Suggestions for improvement

7.5.3'. Questions to be asked to the VEE

7.5.3". Issues to be clarified on-site

7.5.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 7.6: Mechanisms for the exclusion of students from the programme for any reason must be explicit.
The VEE's policies for managing appeals against decisions, including admissions, academic and progression decisions and exclusion, must be transparent and publicly available.

7.6.1. Findings

7.6.2. Analysis of the findings/Comments

7.6.3. Suggestions for improvement

7.6.3'. Questions to be asked to the VEE

7.6.3". Issues to be clarified on-site

7.6.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 7.7: Provisions must be made by the VEE to support the physical, emotional and welfare needs of students. This includes but is not limited to learning support and counselling services, career advice, and fair and transparent mechanisms for dealing with student illness, impairment and disability during the programme. This shall include provision for disabled students, consistent with all relevant equality, diversity and/or human rights legislation.
There must be effective mechanisms for the resolution of student grievances (e.g. interpersonal conflict or harassment).

7.7.1. Findings

7.7.2. Analysis of the findings/Comments

7.7.3. Suggestions for improvement

7.7.3'. Questions to be asked to the VEE

7.7.3". Issues to be clarified on-site

7.7.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 7.8: Mechanisms must be in place by which students can convey their needs and wants to the VEE. The VEE must provide students with a mechanism, anonymously if they wish, to offer suggestions, comments and complaints regarding the compliance of the VEE with national and international legislation and the ESEVT Standards.

7.8.1. Findings

7.8.2. Analysis of the findings/Comments

7.8.3. Suggestions for improvement

7.8.3'. Questions to be asked to the VEE

7.8.3". Issues to be clarified on-site

7.8.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Area 8. Student assessment

Standard 8.1: The VEE must ensure that there is a clearly identified structure within the VEE 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.

8.1.1. Findings

8.1.2. Analysis of the findings/Comments

8.1.3. Suggestions for improvement

8.1.3'. Questions to be asked to the VEE

8.1.3". Issues to be clarified on-site

8.1.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 8.2: The assessment tasks and grading criteria for each unit of study in the programme must be published, applied consistently, clearly identified and available to students in a timely manner well in advance of the assessment. Requirements to pass must be explicit.

The VEE must properly document the results of assessment and provide the students with timely feedback on their assessments.
Mechanisms for students to appeal against assessment outcomes must be explicit.

8.2.1. Findings

8.2.2. Analysis of the findings/Comments

8.2.3. Suggestions for improvement

8.2.3'. Questions to be asked to the VEE

8.2.3". Issues to be clarified on-site

8.2.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 8.3: The VEE must have a process in place to review assessment outcomes, to change assessment strategies and to ensure the accuracy of the procedures when required.
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.

8.3.1. Findings

8.3.2. Analysis of the findings/Comments

8.3.3. Suggestions for improvement

8.3.3'. Questions to be asked to the VEE

8.3.3". Issues to be clarified on-site

8.3.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 8.4: Assessment strategies must allow the VEE to certify student achievement of learning objectives at the level of the programme and individual units of study.
The VEE 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.

8.4.1. Findings

8.4.2. Analysis of the findings/Comments

8.4.3. Suggestions for improvement

8.4.3'. Questions to be asked to the VEE

8.4.3''. Issues to be clarified on-site

8.4.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 8.5: Methods of formative and summative assessment must be valid and reliable and comprise a variety of approaches. Direct assessment of the acquisition 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 regular quality control of the student logbooks, with a clear distinction between what is completed under the supervision of teaching staff (Core Clinical Training (CCT) or under the supervision of a qualified person (EPT). The clear distinction between CCT and EPT ensures that all clinical procedures, practical and hands-on training planned in the study programme have been fully completed by each individual student. The provided training and the global assessment strategy must provide evidence that only students who are Day One Competent are able to graduate.

8.5.1. Findings

8.5.2. Analysis of the findings/Comments

8.5.3. Suggestions for improvement

8.5.3'. Questions to be asked to the VEE

8.5.3''. Issues to be clarified on-site

8.5.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Area 9. Teaching and support staff

Standard 9.1: The VEE must ensure that all staff are appropriately qualified and prepared for their roles, in agreement with national and EU regulations and must apply fair and transparent processes for the recruitment and development of staff.
A formal quality-assured programme of teacher training (including good teaching and evaluation practices, learning and e-learning resources, use of digital tools education, biosecurity and QA procedures) must be in place for all staff involved with teaching. Such training must be mandatory for all newly appointed teaching staff and encouraged on a regular basis for all teaching staff.
Most teaching staff (calculated as FTE) involved in core veterinary training must be veterinarians. It is expected that more than 2/3 of the instruction that the students receive, as determined by student teaching hours, is delivered by qualified veterinarians.

9.1.1. Findings

9.1.2. Analysis of the findings/Comments

9.1.3. Suggestions for improvement

9.1.3'. Questions to be asked to the VEE

9.1.3". Issues to be clarified on-site

9.1.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 9.2: The total number, qualifications and skills of all staff involved with the study programme, including teaching, technical, administrative and support staff, must be sufficient and appropriate to deliver the study programme and fulfil the VEE's mission.
A procedure must be in place to assess if the staff involved with teaching 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, teaching or support staff, senior or junior, permanent or temporary, teachers. Guidelines for the minimum training to teach and to assess are provided in Annex 6, Standard 9.1.

9.2.1. Findings

9.2.2. Analysis of the findings/Comments

9.2.3. Suggestions for improvement

9.2.3'. Questions to be asked to the VEE

9.2.3". Issues to be clarified on-site

9.2.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 9.3: Staff must be given opportunities to develop and extend their teaching and assessment knowledge and must be encouraged to improve their skills. Opportunities for didactic and pedagogic training and specialisation must be available. The VEE must clearly define systems of reward for teaching excellence in operation.
Teaching positions must offer the security and benefits necessary to maintain the stability, continuity, and competence of the teaching staff. Teaching staff must have a balanced workload of teaching, research and service depending on their role. They must have reasonable opportunities and resources for participation in scholarly activities.

9.3.1. Findings

9.3.2. Analysis of the findings/Comments

9.3.3. Suggestions for improvement

9.3.3'. Questions to be asked to the VEE

9.3.3". Issues to be clarified on-site

9.3.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 9.4: The VEE must provide evidence that it utilises a well-defined, comprehensive and publicised programme for the professional growth and development of teaching and support staff, including formal appraisal and informal mentoring procedures.
Staff must have the opportunity to contribute to the VEE's direction and decision-making processes.
Promotion criteria for teaching 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.

9.4.1. Findings

9.4.2. Analysis of the findings/Comments

9.4.3. Suggestions for improvement

9.4.3'. Questions to be asked to the VEE

9.4.3". Issues to be clarified on-site

9.4.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 9.5: A system for assessment of teaching and teaching staff must be implemented on a cyclical basis and must formally include student participation. Results must be communicated to the relevant staff and commented upon in reports. Evidence must be provided that this system contributes to correcting deficiencies and to enhancing the quality and efficiency of education.

9.5.1. Findings

9.5.2. Analysis of the findings/Comments

9.5.3. Suggestions for improvement

9.5.3'. Questions to be asked to the VEE

9.5.3". Issues to be clarified on-site

9.5.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Area 10. Research programmes, continuing and postgraduate education

Standard 10.1: The VEE must demonstrate significant and broad research activities of teaching staff that integrate with and strengthen the study programme through research-based teaching. The research activities must include veterinary basic and clinical sciences. Evidence must be provided that most teaching staff are actively involved with research programmes (e.g. via research grants, publications in congress proceedings and in peer-reviewed scientific journals).

10.1.1. Findings

10.1.2. Analysis of the findings/Comments

10.1.3. Suggestions for improvement

10.1.3'. Questions to be asked to the VEE

10.1.3". Issues to be clarified on-site

10.1.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 10.2: All students must be trained in scientific methods and research techniques relevant to evidence-based veterinary medicine and must have opportunities to participate in
research programmes.

10.2.1. Findings

10.2.2. Analysis of the findings/Comments

10.2.3. Suggestions for improvement

10.2.3'. Questions to be asked to the VEE

10.2.3". Issues to be clarified on-site

10.2.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 10.3: The VEE must provide advanced postgraduate degree programmes, e.g. PhD, internships, residencies and continuing education programmes that complement

and strengthen the study programme and are relevant to the needs of the profession and society.

10.3.1. Findings

10.3.2. Analysis of the findings/Comments

10.3.3. Suggestions for improvement

10.3.3'. Questions to be asked to the VEE

10.3.3". Issues to be clarified on-site

10.3.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

Standard 10.4: The VEE must have a system of QA to evaluate how research activities provide opportunities for student training and staff promotion, and how research approaches, methods and results are integrated into the study programme.

10.4.1. Findings

10.4.2. Analysis of the findings/Comments

10.4.3. Suggestions for improvement

10.4.3'. Questions to be asked to the VEE

10.4.3". Issues to be clarified on-site

10.4.4. Proposal from the Full Visitation Team*, i.e. whether the VEE is compliant, partially compliant (one or several Minor Deficiencies) or not compliant (one or several Major Deficiencies) with the relevant Standard. The Deficiencies (if any) must be listed.*

11. ESEVT Indicators *(see Annex 4)*
(Include here both pages of the Excel file – i.e. the raw data and the calculated Indicators)

11.1. Findings

11.2. Analysis of the findings/Comments

11.3. Suggestions for improvement

11.4.3'. Questions to be asked to the VEE

11.4.3". Issues to be clarified on-site

12. ESEVT Rubrics (summary of the proposal from the Full Visitation Team regarding the compliance of the VEE for each ESEVT Standard, i.e. (total or substantial) compliance (C), partial compliance (PC) (Minor Deficiency) or non-compliance (NC) (Major Deficiency))

Area 1. Objectives, Organisation and Quality Assurance Policy	C	PC	NC
Standard 1.1: The VEE must have as its main objective the provision, in agreement with the EU Directives and ESG Standards, of 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. **The VEE must develop and follow its mission statement which must embrace the ESEVT Standards.**			
Standard 1.2: The VEE 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. **The person responsible for the veterinary curriculum and the person(s) responsible for the professional, ethical, and teaching affairs of the Veterinary Teaching Hospital (VTH) must hold a veterinary degree.** **The decision-making process, organisation and management of the VEE must allow implementation of its strategic plan and of a cohesive study programme, in compliance with the ESEVT Standards.**			
Standard 1.3: The VEE must have a strategic plan, which includes a SWOT analysis of its current activities, short- and medium-term objectives, and an operating plan with a timeframe and indicators for its implementation. The development and implementation of the VEE's strategy must include a role for students and other stakeholders, both internal and external, and the strategy must have a formal status and be publicly available.			
Standard 1.4: The VEE must have a policy and associated written procedures for the assurance of the quality and standards of its programmes and awards. It must also commit itself explicitly to the development of a culture which recognises the importance of quality, and QA within the VEE. To achieve this, the VEE must develop and implement a strategy for the continuous enhancement of quality. **The VEE must have a policy for academic integrity, i.e. the expectation that all staff and students act with honesty, trust, fairness, respect and responsibility.**			
Standard 1.5: The VEE must provide evidence that it interacts with its stakeholders and the wider society. Such public information must be clear, objective and readily accessible; the information must include up-to-date information about the study programme. **The VEE's website must mention the VEE's ESEVT status and its last Self-Evaluation Report and Visitation Reports must be easily available to the public.**			
Standard 1.6: The VEE must monitor and periodically review its activities, both quantitative and qualitative, to ensure that they achieve the objectives set for them and respond to the needs of students and society. The VEE must make public how this analysis of information has been utilised in the further development of its activities and provide evidence as to the involvement of both students and staff in the provision, analysis and implementation of such data. Evidence must be provided that the QA loops are fully closed (Plan Do Check Adjust cycles) to efficiently enhance the quality of education. **Any action planned or taken as a result of this data analysis must be communicated to all those concerned.**			
Standard 1.7: The VEE must undergo external review through the ESEVT on a cyclical basis. Evidence must be provided of such external evaluation with the assurance that the progress made since the last ESEVT evaluation was linked to a continuous quality assurance process.			
Area 2. Finances			
Standard 2.1: Finances must be demonstrably adequate to sustain the requirements for the VEE to meet its mission and to achieve its objectives for education, research and services. The description must include both expenditures (separated into personnel costs, operating costs, maintenance costs and equipment) and revenues (separated into public funding, tuition fees, services, research grants and other sources).			
Standard 2.2: Clinical and field services must function as instructional resources. The instructional integrity of these resources must take priority over the financial self-sufficiency of clinical services operations. **The VEE must have sufficient autonomy in order to use the resources to implement its strategic plan and to meet the ESEVT Standards.**			
Standard 2.3: Resources allocation must be regularly reviewed to ensure that available resources meet the requirements.			
Area 3. Curriculum			
Standard 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. The curriculum must include the subjects (input) and must allow the acquisition of the Day One Competences (output) listed in the ESEVT SOP Annex 2. **This concerns:** • **Basic Sciences** • **Clinical Sciences in companion animals (including equine and exotic pets)** • **Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management)** • **Veterinary Public Health (including Food Safety and Quality)** • **Professional Knowledge (including soft skills, e.g. communication, team working skills, management skills).** **When part of the study programme cannot be organised because of imposed regulations or constraints, convincing compensations must be developed and implemented.**			

If a VEE offers more than one study programme to become a veterinarian, e.g. in different languages or in collaboration with other VEEs, all study programmes and respective curricula must be described separately in the SER. For each Standard, the VEE must explain if there are differences or not with the basic programme and all this information must be provided as a formal annex to the SER. **Similarly, if a VEE implements a tracking (elective) system in its study programme, it must provide a clear explanation of the tracking system in the SER.** **3.1.1. General findings**			
3.1.2. Basic sciences			
3.1.3. Clinical Sciences in companion animals (including equine and exotic pets)			
3.1.4. Clinical Sciences in food-producing animals (including Animal Production and Herd Health Management)			
3.1.5. Veterinary Public Health (including Food Safety and Quality)			
3.1.6. Professional Knowledge (including soft skills, e.g. communication, team working skills, management skills)			
Standard 3.2: Each study programme provided by the VEE must be competency-based and designed so that it meets the objectives set for it, including the intended learning outcomes. The qualification resulting from a programme must be clearly specified and communicated and must 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. **The VEE must provide proof of a QA system that promotes and monitors the presence of a teaching environment highly conducive to learning including self-learning. Details of the type, provision and updating of appropriate learning opportunities for the students must be clearly described, as well as the involvement of students.** **The VEE must also describe how it encourages and prepares students for lifelong learning.**			
Standard 3.3: Programme learning outcomes must: • **ensure the effective alignment of all content, teaching, learning and assessment activities of the degree programme to form a cohesive framework** • **include a description of Day One Competences** • **form the basis for explicit statements of the objectives and learning outcomes of individual units of study** • **be communicated to staff and students** • **be regularly reviewed, managed and updated to ensure they remain relevant, adequate and are effectively achieved.**			
Standard 3.4: The VEE 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** • **perform ongoing reviews and periodic in-depth reviews of the curriculum (at least every seven years) by involving staff, students and stakeholders; these reviews must lead to continuous improvement of the curriculum. Any action taken or planned as a result of such a review must be communicated to all those concerned** • **identify and meet training needs for all types of staff, maintaining and enhancing their competence for the ongoing curriculum development.**			
Standard 3.5: Elective Practical Training (EPT) includes compulsory training activities that each student must achieve before graduation to complement and strengthen their core theoretical and practical academic education, inter alia by enhancing their experience, professional knowledge and soft skills. Like all elective activities, its contents may vary from one undergraduate student to another. **EPT is organised either extra-murally with the student being under the direct supervision of a qualified person (e.g. a veterinary practitioner) or intra-murally, with the student being under the supervision of a teaching staff or a qualified person.** **EPT itself cannot replace the Core Clinical Training (CCT) under the close supervision of teaching staff (e.g. ambulatory clinics, herd health management, practical training in VPH (including Food Safety and Quality (FSQ)). A comparison between CCT and EPT is provided in Annex 6, Standard 3.5.**			
Standard 3.6: The EPT providers must meet the relevant national Veterinary Practice Standards, have an agreement with the VEE and the student (stating 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 VEE on the EPT programme. **There must be a member of the teaching staff responsible for the overall supervision of the EPT, including liaison with EPT providers.**			
Standard 3.7: 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 VEE and evaluating the EPT. Students must be allowed to complain officially and/or anonymously about issues occurring during EPT. The VEE must have a system of QA to monitor the implementation, progress and then feedback within the EPT activities.			
Area 4. Facilities and equipment			
Standard 4.1: All aspects of the physical facilities must provide an environment conducive to learning, including internet access at all relevant sites where theoretical, practical and clinical education takes place. The VEE			

must have a clear strategy and programme for maintaining and upgrading its buildings and equipment. Facilities must comply with all relevant legislation including health, safety, biosecurity, accessibility to people including students with a disability, and EU animal welfare and care standards.			
Standard 4.2: Lecture theatres, teaching laboratories, tutorial rooms, clinical facilities and other teaching spaces must be adequate in number and size, equipped for instructional purposes and well maintained. The facilities must be adapted for the number of students enrolled. Students must have ready access to adequate and sufficient study, self-learning, recreation, locker, sanitary and food service facilities. **Offices, teaching preparation and research laboratories must be sufficient for the needs of the teaching and support staff to support their teaching and research efforts.**			
Standard 4.3: The livestock facilities, animal housing, core clinical teaching facilities and equipment used by the VEE for teaching purposes must: • **be sufficient in capacity and adapted for the number of students enrolled in order to allow safe hands-on training for all students** • **be of a high standard, well maintained and fit for the purpose** • **promote best husbandry, welfare and management practices** • **ensure relevant biosecurity** • **take into account environmental sustainability** • **be designed to enhance learning**			
Standard 4.4: Core clinical teaching facilities must be provided in a veterinary teaching hospital (VTH) with 24/7 emergency services at least for companion animals and equines. Within the VTH, the VEE must unequivocally demonstrate that the standard of education and clinical research is compliant with all ESEVT Standards, e.g. research-based and evidence-based clinical training supervised by teaching 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, on-call service must be available if emergency services do not exist for those species in a VTH. The VEE must ensure state-of-the-art standards of teaching clinics which remain comparable with or exceed the best available clinics in the private sector.** **The VTH and any hospitals, practices and facilities which are involved with the core curriculum must be compliant with the ESEVT Standards and meet the relevant national Veterinary Practice Standards.**			
Standard 4.5: The VEE must ensure that students have access to a broad range of diagnostic and therapeutic facilities, including but not limited to clinical skills laboratory, diagnostic imaging, clinical pathology, anaesthesia, surgeries and treatment facilities, intensive/critical care, ambulatory services, pharmacy and necropsy facilities. Procedures and facilities should also be available for soft skills training, e.g. communication skills training through role-play.			
Standard 4.6: 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 the prevention of the spread of infectious agents, animal care and student training. They must be adapted to all animal species commonly handled in the VTH. When permanent isolation facilities are not available in any of the facilities used for clinical training, the ability to provide such facilities and the procedures to use them appropriately in an emergency must be demonstrated during the visitation.			
Standard 4.7: The VEE must have an ambulatory clinic for production animals or equivalent facilities so that students can practise field veterinary medicine and Herd Health Management under the supervision of teaching staff.			
Standard 4.8: 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 animal welfare, and to prevent the spread of infectious agents.			
Standard 4.9: Operational policies and procedures (including biosecurity, good laboratory practice and good clinical practice) must be taught and posted (in different languages if the curriculum is taught in them) for students, staff and visitors and a biosecurity manual must be developed and made easily available for all relevant persons. The VEE must demonstrate a clear commitment for the delivery and the implementation of biosecurity, e.g. by a specific committee structure. The VEE must have a system of QA to monitor and assure clinical, laboratory and farm services, including regular monitoring of the feedback from students, staff and clients.			
Area 5. Animal resources and teaching material of animal origin			
Standard 5.1: The number and variety of healthy and diseased animals, first opinion and referral cases, cadavers, and material of animal origin must be adequate for providing the practical and safe hands-on training in all relevant areas and adapted to the number of students enrolled. **Evidence must be provided that these data are regularly recorded and that procedures are in place for correcting any deficiencies.**			
Standard 5.2: In addition to the training provided in the VEE, experience can include practical training at external sites, provided this training is organised under the supervision of teaching staff and follows the same standards as those applied in the VEE.			
Standard 5.3: The VTH must provide nursing care skills and instruction in nursing procedures. Under all situations students must be active participants in the clinical workup of patients, including problem-oriented diagnostic approach together with diagnostic decision-making.			
Standard 5.4: Medical records for patients seen intra- and extra-murally under Core Clinical Training (CCT) must be comprehensive and maintained in an effective retrieval system to efficiently support the teaching and learning, research, and service programmes of the VEE.			
Area 6. Learning resources			
Standard 6.1: State-of-the-art learning resources must be adequate and available to support veterinary education, research, services and continuing education. Learning resources must be suitable to implement teaching facilities to secure the 'never the first time on a live animal' concept. When the study programme is provided			

in several tracks/languages, the learning resources must be available in all used languages. 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, together with basic English teaching if necessary.			
Standard 6.2: Staff and students must have full access on site to an academic library administered by a qualified librarian, an Information Technology (IT) unit managed by a qualified IT person, an e-learning platform, and the relevant human and physical resources necessary for the development of instructional materials by the staff and their use by the students. **The relevant electronic information, database and other intranet resources must be easily available for students and staff both in the VEE's core facilities via wireless connection (Wi-Fi) and from outside the VEE through a hosted secured connection, e.g. Virtual Private Network (VPN).**			
Standard 6.3: The VEE must provide students with unimpeded access to learning resources, internet and internal study resources, as well as facilities and equipment for the development of procedural skills (e.g. clinical skills laboratory). 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 changes in learning resources.			
Area 7. Student admission, progression and welfare			
Standard 7.1: The VEE must consistently apply pre-defined and published regulations covering all phases of the student "life cycle", e.g. student admission, progression and certification. **In relation to enrolment, the VEE must provide accurate and complete information regarding the educational programme in all advertisements for prospective national and international students.** **Formal cooperation with other VEEs must also be clearly advertised.**			
Standard 7.2: The number of students admitted must be consistent with the resources available at the VEE for staff, buildings, equipment, healthy and diseased animals, and materials of animal origin.			
Standard 7.3: The selection and progression criteria must be clearly defined, consistent, and defensible, be free of discrimination or bias, and take into account the fact that students are admitted with a view to their entry to the veterinary profession in due course. **The VEE must regularly review and reflect on the selection processes to ensure they are appropriate for students to complete the programme successfully. If the selection processes are decided by another authority, the latter must regularly receive feedback from the VEE.** **Adequate training (including periodic refresher training) must be provided for those involved in the selection process to ensure applicants are evaluated fairly and consistently.**			
Standard 7.4: There must be clear policies and procedures on how applicants with disabilities or illnesses are 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.			
Standard 7.5: The basis for decisions on progression (including academic progression and professional fitness to practise) must be explicit and readily available to the students. The VEE 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. **The VEE 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.**			
Standard 7.6: Mechanisms for the exclusion of students from the programme for any reason must be explicit. **The VEE's policies for managing appeals against decisions, including admissions, academic and progression decisions and exclusion, must be transparent and publicly available.**			
Standard 7.7: Provisions must be made by the VEE to support the physical, emotional and welfare needs of students. This includes but is not limited to learning support and counselling services, career advice, and fair and transparent mechanisms for dealing with student illness, impairment and disability during the programme. This shall include provision for disabled students, consistent with all relevant equality, diversity and/or human rights legislation. **There must be effective mechanisms for the resolution of student grievances (e.g. interpersonal conflict or harassment).**			
Standard 7.8: Mechanisms must be in place by which students can convey their needs and wants to the VEE. The VEE must provide students with a mechanism, anonymously if they wish, to offer suggestions, comments and complaints regarding the compliance of the VEE with national and international legislation and the ESEVT Standards.			
Area 8. Student assessment			
Standard 8.1: The VEE must ensure that there is a clearly identified structure within the VEE 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.			
Standard 8.2: The assessment tasks and grading criteria for each unit of study in the programme must be published, applied consistently, clearly identified and available to students in a timely manner well in advance of the assessment. Requirements to pass must be explicit. **The VEE must properly document the results of assessment and provide the students with timely feedback on their assessments.** **Mechanisms for students to appeal against assessment outcomes must be explicit.**			
Standard 8.3: The VEE must have a process in place to review assessment outcomes, to change assessment strategies and to ensure the accuracy of the procedures when required. 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.			
Standard 8.4: Assessment strategies must allow the VEE to certify student achievement of learning objectives at the level of the programme and individual units of study. **The VEE 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.**			

Standard 8.5: Methods of formative and summative assessment must be valid and reliable and comprise a variety of approaches. Direct assessment of the acquisition 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 regular quality control of the student logbooks, with a clear distinction between what is completed under the supervision of teaching staff (Core Clinical Training (CCT)) or under the supervision of a qualified person (EPT). The clear distinction between CCT and EPT ensures that all clinical procedures, practical and hands-on training planned in the study programme have been fully completed by each individual student. The provided training and the global assessment strategy must provide evidence that only students who are Day One Competent are able to graduate.			
Area 9. Teaching and support staff			
Standard 9.1: The VEE must ensure that all staff are appropriately qualified and prepared for their roles, in agreement with national and EU regulations and must apply fair and transparent processes for the recruitment and development of staff. **A formal quality-assured programme of teacher training (including good teaching and evaluation practices, learning and e-learning resources, use of digital tools education, biosecurity and QA procedures) must be in place for all staff involved with teaching. Such training must be mandatory for all newly appointed teaching staff and encouraged on a regular basis for all teaching staff.** **Most teaching staff (calculated as FTE) involved in core veterinary training must be veterinarians. It is expected that more than 2/3 of the instruction that the students receive, as determined by student teaching hours, is delivered by qualified veterinarians.**			
Standard 9.2: The total number, qualifications and skills of all staff involved with the study programme, including teaching, technical, administrative and support staff, must be sufficient and appropriate to deliver the study programme and fulfil the VEE's mission. **A procedure must be in place to assess if the staff involved with teaching 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, teaching or support staff, senior or junior, permanent or temporary, teachers. Guidelines for the minimum training to teach and to assess are provided in Annex 6, Standard 9.1.**			
Standard 9.3: Staff must be given opportunities to develop and extend their teaching and assessment knowledge and must be encouraged to improve their skills. Opportunities for didactic and pedagogic training and specialisation must be available. The VEE must clearly define systems of reward for teaching excellence in operation. **Teaching positions must offer the security and benefits necessary to maintain the stability, continuity, and competence of the teaching staff. Teaching staff must have a balanced workload of teaching, research and service depending on their role. They must have reasonable opportunities and resources for participation in scholarly activities.**			
Standard 9.4: The VEE must provide evidence that it utilises a well-defined, comprehensive and publicised programme for the professional growth and development of teaching and support staff, including formal appraisal and informal mentoring procedures. **Staff must have the opportunity to contribute to the VEE's direction and decision-making processes.** **Promotion criteria for teaching 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 9.5: A system for assessment of teaching and teaching staff must be implemented on a cyclical basis and must formally include student participation. Results must be communicated to the relevant staff and commented upon in reports. Evidence must be provided that this system contributes to correcting deficiencies and to enhancing the quality and efficiency of education.			
Area 10. Research programmes, continuing and postgraduate education			
Standard 10.1: The VEE must demonstrate significant and broad research activities of teaching staff that integrate with and strengthen the study programme through research-based teaching. The research activities must include veterinary basic and clinical sciences. Evidence must be provided that most teaching staff are actively involved with research programmes (e.g. via research grants, publications in congress proceedings and in peer-reviewed scientific journals).			
Standard 10.2: All students must be trained in scientific methods and research techniques relevant to evidence-based veterinary medicine and must have opportunities to participate in research programmes.			
Standard 10.3: The VEE must provide advanced postgraduate degree programmes, e.g. PhD, internships, residencies and continuing education programmes that complement and strengthen the study programme and are relevant to the needs of the profession and society.			
Standard 10.4: The VEE must have a system of QA to evaluate how research activities provide opportunities for student training and staff promotion, and how research approaches, methods and results are integrated into the study programme.			
C: (total or substantial) compliance; PC: partial compliance; NC: non-compliance			

Executive Summary

Brief history of the VEE and its previous EAEVE visitations

Brief comment on the SER

Brief comment on the visitation

Commendations (areas worthy of praise identified by the Team)

Recommendations:

List of items of potential partial compliance with the ESEVT Standards identified by the Team

List of items of potential non-compliance with the ESEVT Standards identified by the Team

Glossary

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

Annex 9. Template and guidelines for the writing of the Re-visitation SER (RSER)

(as approved by the EAEVE Executive Committee on 7 June 2023)

Forewords (to be read before the writing of the RSER)

The RSER must provide factual and accurate information ***providing evidence that the Major Deficiencies identified during the Full Visitation have been corrected and that an ongoing process to correct the Minor Deficiencies is in place****.*

Two months before the Re-visitation at the latest, the RSER and its Appendices (in both PDF and Word format) must be sent by the VEE to all members of the Re-visitation Team and to the EAEVE Office by e-mail, and it is up to the Visitors to decide if they would like to receive a hard copy of the document in addition to the e-copy (it is the duty of the Liaison Officer to enquire about the Visitors' preference in this respect before the RSER due date). The EAEVE Office does not need to receive a hard copy of the RSER.

The RSER must be concise, ***written in Times New Roman font, size 12, single spacing,*** *complete, accurate and written in English in agreement with this template. All Deficiencies must be addressed with Factual Information and, if necessary, with Comments and Suggestions. Updated ESEVT Indicators must also be provided (both sheets of the Excel table).*

The texts in italics in this template must be deleted in the final version of the RSER.

The RSER and the Re-visitation Report, which are considered confidential until the final decision of ECOVE, are eventually published on the websites of the VEE, EAEVE and DEQAR.

Contents of the RSER

Introduction
1. Correction of Major Deficiencies
2. Correction of Minor Deficiencies
3. ESEVT Indicators

Introduction

Brief summary of the conclusions from the previous Full Visitation and of the commitment of the VEE to correct the Deficiencies and to become fully compliant with the ESEVT Standards.

1. Correction of Major Deficiencies

1.1. Major Deficiency 1: ….
1.1.1. Factual information
1.1.2. Comments

1.2. Major Deficiency 2: ….
1.2.1. Factual information
1.2.2. Comments

…

2. Correction of Minor Deficiencies
2.1. Minor Deficiency 1: ….
2.1.1. Factual information
2.1.2. Comments
2.1.3. Suggestions for improvement

2.2. Minor Deficiency 2: ….
2.2.1. Factual information
2.2.2. Comments
2.2.3. Suggestions for improvement

…

3. ESEVT Indicators
3.1. Factual information (*Updated data based on the last three academic years)*
3.2. Comments
3.3. Suggestions for improvement

Annex 10. Timetable and guidelines for the Re-visitation

(as approved by the EAEVE Executive Committee on 7 June 2023)

INTRODUCTION

This document is a standardised programme for the Re-visitation. ECOVE may decide to adapt the duration of the Re-visitation (e.g. plus/minus ½ day) on the basis of the number and complexity of the Deficiencies identified after the Full Visitation.

The specific programme must be proposed by the Liaison Officer one month before the start of the Re-visitation at the latest and is finalised in agreement with the Chairperson and the Coordinator.

TIMETABLE

Day 1

By 19.00 at the latest: arrival of the Visitors (the Team) at the hotel

19.30-21.30: working dinner with the VEE's Head and Liaison Officer in the hotel or nearby

Day 2

08.00: transfer to the VEE Team room

08.30–13.00: for each Major Deficiency, visit to the relevant facilities, consultation of the relevant databases and meeting with the relevant people

13.00-14.00: informal lunch for the Team alone

14.00-16.30: evaluation if the Minor Deficiencies have been corrected or if an ongoing process to correct them is in place.

17.00-19.00: Team work in the Team room

19.00: Exit Presentation to the VEE's Head, Liaison Officer and representatives of staff and students (e.g. members of the VEE's Council)

19.30-21.30: informal dinner

Day 3

Transfer of the Visitors to the airport/train station

Note: Wi-Fi access, multiple electrical sockets (including adapters when necessary), soft drinks and one printed copy of the RSER, its Appendices and the relevant ESEVT SOP must be available upon arrival on Day 1 in the Team room.

Annex 11. Template and guidelines for the writing of the Re-visitation Report

(as approved by the EAEVE Executive Committee on 7 June 2023)

RE-VISITATION REPORT

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

On *(date of the Re-visitation)*

By the Re-visitation Team

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

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

Forewords (to be read by each Visitor before the writing of the Re-visitation Report)

The Re-visitation Report must be written in agreement with the ESEVT SOP (see Chapter 2, paragraph 2.6). The version of the SOP used to write the Re-visitation Report must coincide with the version the VEE followed when preparing its RSER, as stated in the official Re-visitation agreement.

***Twenty calendar days before the Re-visitation at the latest**, each Visitor must have read the RSER. If appropriate, questions to be asked to the VEE are sent to the Liaison Officer before the start of the Re-visitation.*

The Re-visitation Team is responsible for making an independent assessment and proposing an unambiguous statement on whether the Major Deficiencies identified during the previous visitation have been fully corrected and whether an ongoing process to correct the Minor Deficiencies is in place.

The Re-visitation Report must be written in UK English in Times New Roman font, size 12, single spacing, and it should be focused on the correction of the Major and Minor Deficiencies identified during the previous Full Visitation.

The draft A Re-visitation Report must be completed by each Visitor in the online document editor twenty calendar days before the start of the Re-visitation at the latest (at this stage it must include at least the 'Findings', and a list of questions to be asked to the VEE/issues to be clarified on-site) and it must be amended during the Re-visitation based on the replies to questions, onsite findings and onsite discussions within the Team. The resulting draft B must be completed before the end of the Re-visitation, edited by the Coordinator and Chairperson and sent to the VEE for correction of factual errors 14 calendar days after the Re-visitation at the latest.

The texts in italics in this template must be deleted in the final version of the Re-visitation Report.

Contents of the Re-visitation Report

Introduction
1. Correction of the Major Deficiencies
2. Correction of the Minor Deficiencies
3. ESEVT Indicators
4. Executive Summary

Introduction
Brief summary of the conclusions of the previous Visitation, about the RSER and about the Re-visitation

1. Correction of the Major Deficiencies

1.1. Major Deficiency 1: ... *(to be completed)*
1.1.1. Findings
1.1.2. Analysis of the findings/Comments
1.1.3. Suggestions
1.1.4. Proposal from the Re-visitation Team *(whether Major Deficiency 1 has been fully corrected or not)*

1.2. Major Deficiency 2: ... *(to be completed)*
1.2.1. Findings
1.2.2. Analysis of the findings/Comments
1.2.3. Suggestions
1.2.4. Proposal from the Re-visitation Team *(whether Major Deficiency 2 has been fully corrected or not)*

…

2. Correction of the Minor Deficiencies
2.1. Minor Deficiency 1: ... *(to be completed)*
2.1.1. Findings
2.1.2. Analysis of the findings/Comments
2.1.3. Suggestions

2.2. Minor Deficiency 2: ... *(to be completed)*
2.2.1. Findings
2.2.2. Analysis of the findings/Comments
2.2.3. Suggestions

…

3. ESEVT Indicators
3.1. Findings
3.2. Analysis of the findings/Comments
3.3. Suggestions

4. Executive Summary

Proposal from the Re-visitation Team about the correction or not of the Major Deficiencies and the presence or not of at least an ongoing process to correct the Minor Deficiencies

Annex 12. Timetable and guidelines for the Preliminary Visitation

(as approved by the EAEVE Executive Committee on 7 June 2023)

INTRODUCTION

This document is a standardised programme for a Preliminary Visitation.
The specific programme must be proposed by the Liaison Officer one month before the start of the Preliminary Visitation at the latest and is finalised in agreement with the Chairperson and the Coordinator.

TIMETABLE

Day 1

By 19.00: arrival of the Preliminary Visitation Team at the hotel
19.30-21.30: working dinner with the VEE's Head and Liaison Officer

Day 2

08.00: transfer to the VEE Team Room
08.30- 09.00: meeting with the management of the VEE
09.00-13.00 and 14.00-17.00:
-) visit to the intra-mural facilities/departments/units by the Team with a very short introduction by the responsible person of each unit
-) visit in depth of some intra-mural facilities (e.g. the VTH);
-) virtual visit to the extra-mural facilities involved in the veterinary curriculum (clinics, dispensaries, teaching farms, slaughterhouses, ...) by a PowerPoint presentation with photos and/or videos in the presence of their respective responsible person
(strict timetable requested to avoid any delay)
13.00-14.00: informal lunch for the Team alone
14.00-17.00: see above
17.00-19.00: Team work in the Team room
19.30-21.30: informal dinner

Day 3

08.00: transfer to the VEE Team room
08.30–9.00: meeting with Teaching Staff (without the participation of the VEE's Head and Liaison Officer)
09.00-9.30: meeting with graduates involved with the veterinary curriculum (interns, residents, assistants, PhD students)
9.30-10.00: meeting with Support Staff (technical, laboratory, administrative, nursing, IT)
10.00-10.30: meeting with undergraduate students (several students from each year/semester of the curriculum)
11.00-13.00 and 14.00-16.30: separate meetings (around 30 minutes each) with the relevant responsible persons for each ESEVT Area, i.e. Objectives, Organisation and Quality Assurance Policy, Finances, Curriculum, Facilities, Animal Resources, Learning Resources, Students, Staff, Research and post-graduate programmes
(precise programme and name of attendees for each meeting to be finalised during the Day 1 dinner)
13.00-14.00: informal lunch for the Team alone
14.00-16.30: see above
17.00-19.00: Team work in the Team room
19.00-19.30: Exit Presentation to the VEE's Head, Liaison Officer and invited guests

19.30-21.30: dinner with the VEE's Head, Liaison Officer and invited guests.

Day 4
Transfer of the Visitors to the airport/train station

Note: Wi-Fi access, multiple electrical sockets, (including adapters when necessary) soft and hot drinks and one printed copy of the PSER, its Appendices and the relevant ESEVT SOP must be available upon arrival on Day 1 in the Team room.

Annex 13. Template and guidelines for the writing of the Preliminary Visitation Report

(as approved by the EAEVE Executive Committee on 7 June 2023)

PRELIMINARY VISITATION REPORT

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

On *(date of the Preliminary Visitation)*

By the Preliminary Visitation Team:

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

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

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

The Preliminary Visitation Report must be written in agreement with the ESEVT SOP (see Chapter 2, paragraph 3.6).

***Twenty calendar days before the Preliminary Visitation at the latest**, each Visitor must have read the full PSER. Questions to be asked are sent to the VEE before the start of the Preliminary Visitation in order to allow the Liaison Officer sufficient time to collect the required data.*

The Preliminary Visitation Report must be written in UK English in Times New Roman font, size 12, single spacing, and it must be concise and mainly focused on potential deficiencies.

The Preliminary Visitation Report must be much shorter than a Full Visitation Report with a maximum of 20 pages and it should be written to answer the following questions:
-) Is the VEE fully aware of the ESEVT SOP in general and the accreditation Standards in particular?
-) Is there an ongoing process in place to achieve compliance with these Standards?
-) Is the VEE sufficiently informed, organised and equipped for undergoing a Full Visitation within a 3-year period?
-) What are the areas of concern about the compliance of the VEE with the ESEVT Standards?

If some Indicators are out of range, it is expected from the Visitors to assess if this affects the quality of the education and the compliance of the VEE with the SOP.

The draft A Preliminary Visitation Report must be completed by each Visitor in the online document editor twenty calendar days before the start of the Preliminary Visitation at the latest (at this stage it must include at least the 'Findings', a list of questions to be asked to the VEE/issues to be clarified on-site) and it must be amended during the Preliminary Visitation based on the replies to questions, onsite findings and onsite discussions within the Team. The resulting draft B must be completed before the end of the Preliminary Visitation, edited by the Coordinator and Chairperson and sent to the VEE for correction of factual errors 14 calendar days after the Preliminary Visitation at the latest.

The texts in italics in this template must be deleted in the final version of the Preliminary Visitation Report.

Contents of the Preliminary Visitation Report

Introduction
Area 1. Objectives, Organisation and Quality Assurance Policy
Area 2. Finances
Area 3. Curriculum
Area 4. Facilities and equipment
Area 5. Animal resources and teaching material of animal origin
Area 6. Learning resources
Area 7. Student admission, progression and welfare
Area 8. Student assessment

Area 9. Teaching and support staff
Area 10. Research programmes, continuing and postgraduate education
11. ESEVT Indicators
12. Conclusions

Introduction

Brief history of the VEE

Main features of the VEE

1. Objectives, Organisation and Quality Assurance Policy

1.1. Findings

1.2. Analysis of the findings/Comments

1.3. Suggestions

2. Finances

2.1. Findings

2.2. Analysis of the findings/Comments

2.3. Suggestions

3. Curriculum

3.1. General curriculum

3.1.1. Findings

3.1.2. Analysis of the findings/Comments

3.1.3. Suggestions

3.2. Specific curriculum

3.2.1. Findings

Basic sciences

Clinical Sciences in companion animals (including equine and exotic pets)
Clinical Sciences in food-producing animals (including Animal production)

Veterinary Public Health (including Food Safety and Quality)

Professional knowledge (including soft skills, e.g. communication, team working skills, management skills)

3.2.2. Analysis of the findings/Comments

Basic sciences

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

Clinical Sciences in food-producing animals (including Animal production and Herd Health Management)

Veterinary Public Health (including Food Safety and Quality)

Professional knowledge (including soft skills, e.g. communication, team working skills, management skills)

3.2.3. Suggestions

3.3. Elective Practical training

3.3.1. Findings

3.3.2. Analysis of the findings/Comments

3.3.3. Suggestions

4. Facilities and equipment

4.1. Findings

4.2. Analysis of the findings/Comments

4.3. Suggestions

5. Animal resources and teaching material of animal origin

5.1. Findings

5.2. Analysis of the findings/Comments

5.3. Suggestions

6. Learning resources

6.1. Findings

6.2. Analysis of the findings/Comments

6.3. Suggestions

7. Student admission, progression and welfare

7.1. Findings

7.2. Analysis of the findings/Comments

7.3. Suggestions

8. Student assessment

8.1. Findings

8.2. Analysis of the findings/Comments

8.3. Suggestions

9. Teaching and support staff

9.1. Findings

9.2. Analysis of the findings/Comments

9.3. Suggestions

10. Research programmes, continuing and postgraduate education

10.1. Findings

10.2. Analysis of the findings/Comments

10.3. Suggestions

11. ESEVT Indicators

11.1. Findings

11.2. Analysis of the findings/Comments

11.3. Suggestions

12. Conclusions

-) Is the VEE fully aware of the ESEVT SOP in general and the accreditation Standards in particular?
-) Is there an ongoing process in place to achieve compliance with these Standards?
-) Is the VEE sufficiently informed, organised and equipped for undergoing a Full Visitation within a 3-year period?
-) What are the areas of concern about the compliance of the VEE with the ESEVT Standards?

Annex 14. Templates and guidelines for the Interim Report

(as approved by the EAEVE Executive Committee on 29 May 2024)

In accordance with Chapter 2, point 4 of the SOP, three years and five years after the Full Visitation, all VEEs that are members of EAEVE must send a concise Interim Report (IR) to the EAEVE Office.

For VEEs which have been accredited by ECOVE with Minor Deficiencies, an additional Interim Report must be sent to the EAEVE Office one year after the Full Visitation focussing on the correction of the Minor Deficiencies.

The IRs must be written in agreement with the IR template (Appendix 1a, 1b and 1c) and sent to the EAEVE Office via e-mail. An ESEVT Coordinator, designated by ECOVE, reviews the IR and notes major changes or concerns to the Chairperson of ECOVE, using the IR review template provided in Appendix 2. The IR and its review are then sent by the EAEVE Office to ECOVE for consideration during its next meeting.

The Review of the IR as amended by ECOVE is sent to the VEE by the EAEVE Office. In case of the lack of an Interim Report or evidence in the Interim Report of the occurrence of potential major issues, ECOVE may ask for further information from the VEE.
If the VEE does not reply within 30 calendar days, and/or does not provide a convincing plan for correcting these major issues, ECOVE may decide to send an ESEVT Coordinator on site (at the cost of the VEE) and may as a last resort decide to reclassify the VEE's Accreditation status to Pending Accreditation status.
In such a case, a Re-visitation must be completed in agreement with Chapter 2, point 2.

Appendix 1a: Template Interim Report to be provided one year after the Full Visitation for VEEs which have been accredited by ECOVE with Minor Deficiencies (maximum 2 pages)

Name and location of the Veterinary Education Establishment (VEE):

Name and details of the current VEE's Head and the head(s) of the VTH:

Date of the completion of the Interim Report:

Date of the previous visitation:

Progress in the correction of the Minor Deficiencies (partial compliance with the ESEVT Standards):
Minor Deficiency 1:

Minor Deficiency 2:

…

Plans for the near future:

Annex: Updated Excel table with ESEVT Indicators *(focusing on the last three complete academic years)*

Appendix 1b: Template Interim Report to be provided three years after the Full Visitation for all VEEs (maximum 2 pages)

Name and location of the Veterinary Education Establishment (VEE)

Name and details of the current VEE's Head and the head(s) of the VTH

Date of the completion of the Interim Report *(three years after the Full Visitation at the latest)*:

Date of the previous visitation(s)

Any major changes which may affect the compliance with the ESEVT Standards since the previous (R)SER/IR *(e.g. new national regulations, new foreign language track, more admitted students, less funding, lower caseload)*

Progress in the correction of:
-) Major Deficiencies (non-compliance with the ESEVT Standards);
-) Minor Deficiencies (partial compliance with the ESEVT Standards)
and plans for the near future

Annex: Updated Excel table with ESEVT Indicators *(focusing on the last three complete academic years)*

Appendix 1c: Template Interim Report to be provided five years after the Full Visitation for all VEEs (maximum 2 pages)

Name and location of the Veterinary Education Establishment (VEE)

Name and details of the current VEE's Head and the head(s) of the VTH

Date of the completion of the Interim Report *(five years after the Full Visitation at the latest)*:

Date of the previous visitation(s)

Any major changes which may affect the compliance with the ESEVT Standards since the previous (R)SER/IR *(e.g. new national regulations, new foreign language track, more admitted students, less funding, lower caseload)*

Progress in the correction of:
-) Major Deficiencies (non-compliance with the ESEVT Standards);
-) Minor Deficiencies (partial compliance with the ESEVT Standards)
and plans for the near future

Proposed dates for the next Full Visitation which should be completed:
-) at the latest two months before the date of the ECOVE meeting preceding the end of granted status;
-) during a period of full teaching activities.
Please propose a **minimum of two different weeks to allow the EAEVE Office to select a week which is still available in the ESEVT diary.**

Annex: Updated Excel table with ESEVT Indicators *(focusing on the last three complete academic years)*

Appendix 2: Template review of the Interim Report (maximum 2 pages)

(as approved by the EAEVE Executive Committee on 10 December 2025)

Name and location of the Veterinary Education Establishment (VEE)

Name of the Coordinator reviewing the Interim Report (IR)

Date of the review

1. Overall analysis:
Is the IR written in agreement with the SOP?
Additional comments:

2. Major changes since the previous (R)SER/IR:
Brief summary of these changes:
Could these changes significantly affect compliance with the ESEVT Standards?

3. Progress in the correction of Deficiencies:
Have the Deficiencies identified during the previous visitation been fully corrected?
If not, are there a plan and a timeframe to do so?

4. ESEVT Indicators:
Are some Indicators below the current minimum value?
If yes, could this significantly affect the VEE's compliance with the ESEVT Standards?

5. Suggestions to ECOVE from the Coordinator Reviewing the Interim Report:
□ No action requested

□ Send a formal request to the VEE for additional information to address current deficiencies (e.g., previous Minor Deficiencies not yet fully corrected, Indicators with negative balance) and potential future issues (e.g., increased student admissions, decreased funding or teaching staff)
Comment of Coordinator:

□ Issue a warning if the VEE does not plan to correct certain deficiencies
Comment of Coordinator:

□ Send a Coordinator onsite if the VEE does not respond to previous requests from ECOVE
Comment of Coordinator:

□ Propose any other recommendations/actions
Comment of Coordinator:

Annex 15. Declaration for the ESEVT Visitors

(as approved by the EAEVE Executive Committee on 7 June 2023)

I hereby declare that:

-) I am committed to strictly respect the ESEVT SOP and the EAEVE Code of Conduct;

-) I am aware that the corporate travel insurance provided by EAEVE covers the risk of accidents that might occur during travelling and the visitation itself and it does not cover negative medical impacts resulting from any disease, and that EAEVE is not responsible for any disease that could be contracted during a visitation;

-) I have no direct connection or personal interest with the visited VEE;

- *with the exception of ongoing international research projects – if they exist, such collaboration must be disclosed here:*

- *if not applicable, please cross out*

-) I have neither studied at nor have been employed by this VEE;

-) None of my close family members are studying at or being employed by this VEE;

-) I have neither received nor have been promised any gifts or benefits of any nature by this VEE;

-) I am not a citizen of the country within which the VEE to be visited is situated;

Name of the Visitor:

Name of the visited VEE:

Date of the visitation:

Signature:

Date of signature:

Annex 16a. Post-visitation Questionnaire for Team Members – Full Visitation

(as approved by the EAEVE Executive Committee on 9 October 2023)

In order to have the highest level of internal quality assurance and to be able to continuously improve its visitation procedures, EAEVE needs post-visitation feedback from the members of the ESEVT visiting Team (referred to as 'Visitors' below).
Please fill in this post-visitation feedback form.
The post-visitation questionnaires are handled <u>confidentially</u> by EAEVE's Committee on Internal Quality Assurance (**CIQA**).

Please note that Visitors who deliberately do not complete the feedback form may eventually be removed from the List of ESEVT Experts.

Name of the Visitor:

Position of the Visitor: *(Chairperson, Coordinator, Visitor in ((Basic Sciences, Clinical Sciences, etc.))*

Were you the Chairperson of the Team?

Veterinary Education Establishment (VEE) visited: *(name and location)*

Date of the Full Visitation:

1) Using a **scale of 1 to 4** (where **1 is complete disagreement** and **4 is complete agreement**), please indicate the extent to which you agree with the following statements. Please tick the respective box.

Please indicate to which extent you agree with the following statements about the visitation in general:

	1	2	3	4
1. The visitation was performed in agreement with the ESEVT SOP.	☐	☐	☐	☐

Additional comments (if any):

2. The SER was provided on time and was written in agreement with the ESEVT SOP.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

3. The Liaison Officer helped the visitation efficiently.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

4. The Liaison Officer had a good level of proficiency in English.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

5. The Coordinator trained and supervised the Visitors prior to and during the visitation.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

6. The Coordinator was supporting the Team by ensuring strict implementation of the SOP and without trying to influence its decisions.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

7. The Coordinator supported the writing of the Full Visitation Report at all stages.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

8. The Chairperson was leading the visitation in a professional manner.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

9. The visitation had a friendly, collegial atmosphere.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

10. The EAEVE Office supported the visitation in a professional and timely manner.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

2) Using a **scale of 1 to 4** (where **4 1 is complete disagreement** and **4 is complete agreement**), please indicate the extent to which you agree with the following statements **for each of the Visitors**:

Please DO NOT rate your own performance!
Use N/A (not applicable) if you are the visitor in question.

-) Name of the Visitor in Basic Sciences:

Please indicate to which extent you agree with the following statements about the Visitor in Basic Sciences:

	1	2	3	4
The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor was well informed about the evaluation procedure and the SOP and made the required reviews in an appropriate way.	☐	☐	☐	☐
The Visitor was fully cooperative and acted as a responsible member of the Team.	☐	☐	☐	☐
The Visitor was able to relate the local characteristics of the VEE with the ESEVT Standards.	☐	☐	☐	☐
The Visitor had an adequate level of proficiency in English.	☐	☐	☐	☐
The Visitor wrote his/her Chapters of the Full Visitation Report in a timely manner.	☐	☐	☐	☐
The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Please briefly comment on the overall strengths and weaknesses of the Visitor in Basic Sciences:

-) Name of the Visitor in Clinical Sciences – Companion Animals:

Please indicate to which extent you agree with the following statements about the Visitor in Clinical Sciences – Companion Animals:

	1	2	3	4
The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor was well informed about the evaluation procedure and the SOP and made the required reviews in an appropriate way.	☐	☐	☐	☐
The Visitor was fully cooperative and acted as a responsible member of the Team.	☐	☐	☐	☐
The Visitor was able to relate the local characteristics of the VEE with the ESEVT Standards.	☐	☐	☐	☐
The Visitor had an adequate level of proficiency in English.	☐	☐	☐	☐
The Visitor wrote his/her Chapters of the Full Visitation Report in a timely manner.	☐	☐	☐	☐

The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Please briefly comment on the overall strengths and weaknesses of the Visitor in Clinical Sciences – Companion Animals:

-) Name of the Visitor in Clinical Sciences – Food-producing Animals:

Please indicate to which extent you agree with the following statements about the Visitor in Clinical Sciences – Food-producing Animals:

	1	**2**	**3**	**4**
The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor was well informed about the evaluation procedure and the SOP and made the required reviews in an appropriate way.	☐	☐	☐	☐
The Visitor was fully cooperative and acted as a responsible member of the Team.	☐	☐	☐	☐
The Visitor was able to relate the local characteristics of the VEE with the ESEVT Standards.	☐	☐	☐	☐
The Visitor had an adequate level of proficiency in English.	☐	☐	☐	☐
The Visitor wrote his/her Chapters of the Full Visitation Report in a timely manner.	☐	☐	☐	☐
The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Please briefly comment on the overall strengths and weaknesses of the Visitor in Clinical Sciences – Food-producing Animals:

-) Name of the Practitioner:

Please indicate to which extent you agree with the following statements about the Practitioner:

	1	**2**	**3**	**4**
The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor was well informed about the evaluation procedure and the SOP and made the required reviews in an appropriate way.	☐	☐	☐	☐
The Visitor was fully cooperative and acted as a responsible member of the Team.	☐	☐	☐	☐
The Visitor was able to relate the local characteristics of the VEE with the ESEVT Standards.	☐	☐	☐	☐
The Visitor had an adequate level of proficiency in English.	☐	☐	☐	☐
The Visitor wrote his/her Chapters of the Full Visitation Report in a timely manner.	☐	☐	☐	☐
The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Please briefly comment on the overall strengths and weaknesses of the Practitioner:

-) Name of the Visitor in Veterinary Public Health (including Food Safety and Quality):

Please indicate to which extent you agree with the following statements about the Visitor in Veterinary Public Health (including Food Safety and Quality):

	1	2	3	4
The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor was well informed about the evaluation procedure and the SOP and made the required reviews in an appropriate way.	☐	☐	☐	☐
The Visitor was fully cooperative and acted as a responsible member of the Team.	☐	☐	☐	☐
The Visitor was able to relate the local characteristics of the VEE with the ESEVT Standards.	☐	☐	☐	☐
The Visitor had an adequate level of proficiency in English.	☐	☐	☐	☐
The Visitor wrote his/her Chapters of the Full Visitation Report in a timely manner.	☐	☐	☐	☐
The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Please briefly comment on the overall strengths and weaknesses of the Visitor in Veterinary Public Health (including Food Safety and Quality:

-) Name of the Visitor in Quality Assurance:

Please indicate to which extent you agree with the following statements about the Visitor in Quality Assurance:

	1	2	3	4
The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor was well informed about the evaluation procedure and the SOP and made the required reviews in an appropriate way.	☐	☐	☐	☐
The Visitor was fully cooperative and acted as a responsible member of the Team.	☐	☐	☐	☐
The Visitor was able to relate the local characteristics of the VEE with the ESEVT Standards.	☐	☐	☐	☐
The Visitor had an adequate level of proficiency in English.	☐	☐	☐	☐
The Visitor wrote his/her Chapters of the Full Visitation Report in a timely manner.	☐	☐	☐	☐
The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Please briefly comment on the overall strengths and weaknesses of the Visitor in Quality Assurance:

-) Name of the Student Visitor:

Please indicate to which extent you agree with the following statements about the Student Visitor:

	1	2	3	4
The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor was well informed about the evaluation procedure and the SOP and made the required reviews in an appropriate way.	☐	☐	☐	☐
The Visitor was fully cooperative and acted as a responsible member of the Team.	☐	☐	☐	☐
The Visitor was able to relate the local characteristics of the VEE with the ESEVT Standards.	☐	☐	☐	☐
The Visitor had an adequate level of proficiency in English.	☐	☐	☐	☐
The Visitor wrote his/her Chapters of the Full Visitation Report in a timely manner.	☐	☐	☐	☐
The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Please briefly comment on the overall strengths and weaknesses of the Student Visitor:

Suggestions for further improvement (if any):

Please indicate the date of submission:

Annex 16b. Post-visitation Questionnaire for visited VEEs – Full Visitation

(as approved by the EAEVE Executive Committee on 9 October 2023)

In order to have the highest level of internal quality assurance and to be able to continuously improve its visitation procedures, EAEVE needs post-visitation feedback from the visited VEEs.
Please fill in this post-visitation feedback form.
The post-visitation questionnaires are handled <u>confidentially</u> by EAEVE's Committee on Internal Quality Assurance (**CIQA**).

Please note that the visitation Report of your VEE can only be put on the agenda of the next meeting of the European Committee of Veterinary Education (ECOVE) after you have completed this post-visitation feedback form.

Name:

Position: *(Head of VEE, Liaison Officer, members of staff, Other (please specify))*

Veterinary Education Establishment (VEE) visited:

Date of the Full Visitation:

1) Using a **scale of 1 to 4** (where **1 is complete disagreement** and **4 is complete agreement**), please indicate the extent to which you agree with the following statements. Please tick the respective box.

Please indicate to which extent you agree with the following statements about the visitation in general:

	1	2	3	4
1. The visitation was performed in agreement with the ESEVT SOP.	☐	☐	☐	☐

Additional comments (if any):

2. The Team respected the deadlines for submitting the list of questions to the VEE and requesting additional information before the visitation.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

3. The Team followed the previously agreed timetable during the visitation, with any subsequent changes during the actual visitation agreed on by all parties.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

4. The Coordinator coordinated the visitation in close contact with the VEE and facilitated contacts with the VEE.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

5. The Chairperson was leading the visitation in a professional manner.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

6. The visitation had a friendly, collegial atmosphere.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

7. The Team respected the deadline for submitting draft C of the Full Visitation Report for factual corrections to the VEE after the visitation.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

8. The EAEVE Office supported the visitation in a professional and timely manner.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

2) Using a **scale of 1 to 4** (where **1 is complete disagreement** and **4 is complete agreement**), please indicate the extent to which you agree with the following statements **for each of the Visitors (i.e. members of the ESEVT visiting Team).**

-) Name of the Visitor in Basic Sciences:

Please indicate to which extent you agree with the following statements about the Visitor in Basic Sciences:

	1	2	3	4
The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor understood the local characteristics of the VEE.	☐	☐	☐	☐
The Visitor's spoken English was easy to understand.	☐	☐	☐	☐
The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Additional comments (if any) on the overall performance of the Visitor in Basic Sciences:

-) Name of the Visitor in Clinical Sciences – Companion Animals:

Please indicate to which extent you agree with the following statements about the Visitor in Clinical Sciences – Companion Animals:

	1	2	3	4
The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor understood the local characteristics of the VEE.	☐	☐	☐	☐
The Visitor's spoken English was easy to understand.	☐	☐	☐	☐
The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Additional comments (if any) on the overall performance of the Visitor in Clinical Sciences – Companion Animals:

-) Name of the Visitor in Clinical Sciences – Food-producing Animals:

Please indicate to which extent you agree with the following statements about the Visitor in Clinical Sciences – Food-producing Animals:

	1	2	3	4
The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor understood the local characteristics of the VEE.	☐	☐	☐	☐
The Visitor's spoken English was easy to understand	☐	☐	☐	☐
The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Additional comments (if any) on the overall performance of the Visitor in Clinical Sciences – Food-producing Animals:

-) Name of the Practitioner:

Please indicate to which extent you agree with the following statements about the Practitioner:

	1	2	3	4
The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor understood the local characteristics of the VEE.	☐	☐	☐	☐
The Visitor's spoken English was easy to understand.	☐	☐	☐	☐
The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Additional comments (if any) on the overall performance of the Practitioner:

-) Name of the Visitor in Veterinary Public Health (including Food Safety and Quality):

Please indicate to which extent you agree with the following statements about the Visitor in Veterinary Public Health (including Food Safety and Quality):

	1	2	3	4
The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor understood the local characteristics of the VEE.	☐	☐	☐	☐
The Visitor's spoken English was easy to understand.	☐	☐	☐	☐
The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Additional comments (if any) on the overall performance of the Visitor in Veterinary Public Health (including Food Safety and Quality):

-) Name of the Visitor in Quality Assurance:

Please indicate to which extent you agree with the following statements about the Visitor in Quality Assurance:

	1	2	3	4
The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor understood the local characteristics of the VEE.	☐	☐	☐	☐
The Visitor's spoken English was easy to understand.	☐	☐	☐	☐
The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Additional comments (if any) on the overall performance of the Visitor in Quality Assurance:

-) Name of the Student Visitor:

Please indicate to which extent you agree with the following statements about the Student Visitor:

	1	2	3	4

The Visitor was well prepared and had read the SER carefully in advance.	☐	☐	☐	☐
The Visitor understood the local characteristics of the VEE.	☐	☐	☐	☐
The Visitor's spoken English was easy to understand.	☐	☐	☐	☐
The Visitor interacted with both staff and students in a friendly and constructive way.	☐	☐	☐	☐

Additional comments (if any) on the overall performance of the Student Visitor:

Suggestions for further improvement (if any):

Please indicate the date of submission:

Annex 16c. Post-visitation Questionnaire for Team Members – Re-/Preliminary Visitation

(as approved by the EAEVE Executive Committee on 9 October 2023)

In order to have the highest level of internal quality assurance and to be able to continuously improve its visitation procedures, EAEVE needs post-visitation feedback from the members of the ESEVT visiting Team (referred to as 'Visitors' below).

Please fill in this post-visitation feedback form.
The post-visitation questionnaires are handled confidentially by EAEVE's Committee on Internal Quality Assurance (**CIQA**).

Please note that experts who deliberately do not complete the feedback forms may eventually be removed from the List of ESEVT Experts.

Name of the Visitor:

Position of the Visitor: *(Chairperson, Coordinator, Visitor in ((Basic Sciences, Clinical Sciences, etc.))*

Were you the Chairperson of the Team?

Veterinary Education Establishment (VEE) visited: *(name and location)*

Type of the visitation: *(Re-visitation or Preliminary Visitation)*

Date of the visitation:

1) Using a **scale of 1 to 4** (where **1 is complete disagreement** and **4 is complete agreement**), please indicate the extent to which you agree with the following statements. Please tick the respective box.

Please indicate to which extent you agree with the following statements about the visitation in general:

	1	2	3	4
1. The visitation was performed in agreement with the ESEVT SOP.	☐	☐	☐	☐

Additional comments (if any):

2. The SER was provided on time and was written in agreement with the ESEVT SOP.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

3. The Liaison Officer helped the visitation efficiently.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

4. The visitation had a friendly, collegial atmosphere.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

5. The EAEVE Office supported the visitation in a professional and timely manner.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

Name of the Chairperson:

(Please DO NOT rate your own performance!
Use **N/A** (not applicable) if you are the Chairperson.).

1. The Chairperson was leading the visitation in a professional manner.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

2. The Chairperson was well prepared and had read the SER carefully in advance.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

3. The Chairperson made the required reviews in an appropriate way.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

4. The Chairperson was fully cooperative.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

5. The Chairperson was able to relate the local characteristics of the VEE with the ESEVT Standards.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

6. The Chairperson had an adequate level of proficiency in English.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

7. The Chairperson wrote his/her Chapters of the visitation report in a timely manner.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

8. The Chairperson interacted with both staff and students in a friendly and constructive way.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

Name of the Coordinator:

(Please DO NOT rate your own performance!
Use **N/A** (not applicable) if you are the Coordinator).

1. The Coordinator was supporting the visitation by ensuring strict implementation of the SOP.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

2. The Coordinator participated in the writing of the visitation report in a timely manner.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

3. The Coordinator contributed to the proposals/conclusions of the Team.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

4. The Coordinator was fully cooperative.	**1** ☐	**2** ☐	**3** ☐	**4** ☐

Additional comments (if any):

Suggestions for further improvement (if any):

Please indicate the date of submission:

Annex 16d. Post-visitation Questionnaire for visited VEEs – Re-/Preliminary Visitation

(as approved by the EAEVE Executive Committee on 9 October 2023)

In order to have the highest level of internal quality assurance and to be able to continuously improve its visitation procedures, EAEVE needs post-visitation feedback from the visited VEEs.
Please fill in this post-visitation feedback form.
The post-visitation questionnaires are handled <u>confidentially</u> by EAEVE's Committee on Internal Quality Assurance (**CIQA**).

Please note that the visitation Report of your VEE can only be put on the agenda of the next meeting of the European Committee of Veterinary Education (ECOVE) after you have completed this post-visitation feedback form.

Name:

Position: *(Head of VEE, Liaison Officer, members of staff, Other (please specify))*

Veterinary Education Establishment (VEE) visited:

Type of the visitation: *(Re-visitation or Preliminary Visitation)*

Date of the visitation:

1) Using a **scale of 1 to 4** (where **1 is complete disagreement** and **4 is complete agreement**), please indicate the extent to which you agree with the following statements. Please tick the respective box.

Please indicate to which extent you agree with the following statements about the visitation in general:

	1	2	3	4
1. The visitation was performed in agreement with the ESEVT SOP.	☐	☐	☐	☐

Additional comments (if any):

2. The Team respected the deadlines for submitting the list of questions to the VEE and requesting additional information before the visitation.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

3. The Team followed the previously agreed timetable during the visitation, with any subsequent changes during the actual visitation agreed on by all parties.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

4. The Coordinator coordinated the visitation in close contact with the VEE and facilitated contacts with the VEE.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

5. The visitation had a friendly, collegial atmosphere.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

6. The Team respected the deadline for submitting draft C of the visitation report for factual corrections to the VEE after the visitation.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

7. The EAEVE Office supported the visitation in a professional and timely manner.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

Name of the Chairperson:

Please indicate to which extent you agree with the following statements about the Chairperson:

1. The Chairperson was well prepared and had read the SER carefully in advance.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

2. The Chairperson was leading the visitation in a professional manner.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

3. The Chairperson's spoken English was easy to understand.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

4. The Chairperson understood the local characteristics of the VEE.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

5. The Chairperson interacted with both staff and students in a friendly and constructive way.	**1**	**2**	**3**	**4**
	☐	☐	☐	☐

Additional comments (if any):

Suggestions for further improvement (if any):

Please indicate the date of submission:

Annex 17. ESEVT transitional procedures between SOP 2019 as amended in September 2021 and SOP 2023

(as approved by the EAEVE Executive Committee on 2 October 2024)

The SOP 2023 is valid for all types of visitations performed after June 2023.

However, if an agreement for a specific visitation has been formally signed by the VEE with the EAEVE Office before June 2023 and if the Full Visitation is planned after June 2023, this VEE may decide which SOP is valid for this visitation, i.e. the SOP 2019 as amended in 2021 or the SOP 2023. This must be agreed with the EAEVE Office and mentioned both in the SER and the visitation Report.

Any Re-visitation will be completed under the SOP which was used for the relevant Full Visitation.

The Interim Reports as described in the SOP 2023 are valid for all VEEs independent of the date of their last visitation.

Annex 18. Observers at ESEVT visitations

(as approved by the EAEVE Executive Committee on 04 February 2025)

General Rule

No more than one observer per Full Visitation may be accepted, except in case of visitations with observers from other accreditation agencies.

The maximum size of the Full Visitation Team, including all members and observers, must not exceed 10 people.

On any Full Visitation, the Head of VEE must provide his/her official agreement and is not obliged to accept the proposal. Furthermore, the observers must financially support their expenses related to the Full Visitation on their own (incl. travel and accommodation expenses and insurance).

Type of observers

There may be two types of observers at ESEVT visitations, who, depending on their category, have different rights:

1) An observer from an official accrediting agency (e.g. a national QA agency or a sister organisation), who behaves in accordance with a signed Code of Conduct of their own. They may participate as observers in all activities/meetings of the Full Visitation Team without voting rights but must not have access to the draft A Full Visitation Report issued before the Full Visitation. When selected for a Full Visitation they have priority over the second type of observers, and the VEEs are encouraged to include observers of this type in the ESEVT visitation, the objective being for the VEE to avoid the disadvantages of several separate visitations.

2) An observer who is not a member of an official accrediting agency (e.g. a Head of a not yet visited VEE). They are allowed to participate in the visits/meetings on Tuesday and Wednesday (without interfering with the visitation process) but not in the private meetings of the Full Visitation Team nor the Thursday meetings, and must not have access to the draft A Full Visitation Report issued before the Full Visitation.

Procedure

Upon receipt of a formal request, the Director of ESEVT may decide whether to accept the request of an observer to participate in an ESEVT Full Visitation. Following the decision, the EAEVE Office will ask the Head of the VEE to be visited for endorsement and, if positive, will send the current procedure and the EAEVE Code of Conduct to the observer.

In any case, in agreement with the ECOVE Rules of Operation, the Team composition must be approved by ECOVE, ensuring that the total number of members and observers does not exceed 10.

During the Visitation, observers may ask questions to the VEE's representatives after the questions of the ESEVT Visitors and if there is sufficient time left in the slot set out in the visitation timetable.

Observers' questions related to specificities of their own SOP/Standards should be asked on Wednesday morning during a special session to be organised with VEE representatives.

Glossary

CIQA: Committee on Internal Quality Assurance
CCT: Core Clinical Training
D1C: ESEVT Day One Competences
DEQAR: Database of the European Quality Assurance Register
EAEVE: European Association of Establishments for Veterinary Education
EBVS: European Board of Veterinary Specialisation
ECCVT: European Coordinating Committee on Veterinary Training
ECDC: European Centre for Disease Prevention and Control
ECOVE: European Committee on Veterinary Education
ENQA: European Association for Quality Assurance in Higher Education
EPT: Elective Practical Training
ESEVT: European System of Evaluation of Veterinary Training
ESG: Standards and Guidelines for Quality Assurance in the European Higher Education Area
ExCom: EAEVE Executive Committee
FSQ: Food Safety and Quality
FTE: Full-Time Equivalent
FVE: Federation of Veterinarians of Europe
IAWG: International Accreditors Working Group
IT: Information Technology
OSCE: Objective Structured Clinical Examination
PDCA: Plan Do Check Adjust
QA: Quality Assurance
SER: Self-Evaluation Report
SOP: Standard Operating Procedure
SWOT: Strengths, Weaknesses, Opportunities and Threats
VEE: Veterinary Education Establishment
VPH: Veterinary Public Health
VTH: Veterinary Teaching Hospital
WHO: World Health Organisation
3R: Replacement, Reduction, Refinement

Standardised terminology ***(to be used in all Reports)***
Accreditation: status of a VEE that is considered by ECOVE as compliant with the ESEVT Standards normally for a 7-year period starting from the date of the last Full Visitation;
Ambulatory clinic: clinical training done extra-murally and fully supervised by teaching staff;
Biosecurity: the processes employed to ensure that biological, biochemical and biophysical agents are managed safely such that people, animals and the environment are protected from contamination by these agents. Biosecurity includes other concepts like biosafety, biocontainment and biohazard.
Elective Practical Training (EPT): elective training periods which are an integral part of the curriculum, and which may be taken either outside the VEE under the supervision of a qualified person (e.g. a practitioner) or intra-murally, the student being under the supervision of a teaching staff or a qualified person. They should be available to all students but, like all elective activities, their contents may vary from one undergraduate student to another.
Full Visitation: a full visitation organised on-site in agreement with the ESEVT SOP in order to evaluate if the veterinary degree provided by the visited VEE is compliant with all ESEVT

Standards; any chronological reference to 'the Visitation' means the first day of the full on-site Visitation;

Full Visitation Report: a document prepared by the Full Visitation Team, corrected for factual errors and finally issued by ECOVE; it contains, for each ESEVT Standard, findings, analysis of the findings/comments, suggestions and identified deficiencies.

Major Deficiency: a deficiency that significantly affects the quality of education and the VEE's compliance with one or several ESEVT Standards;

Minor Deficiency: a deficiency that does not significantly affect the quality of education or the VEE's compliance with one or several ESEVT Standards;

Propaedeutics: a preliminary collection of data about a patient by observation, palpation, temperature measurement, etc., without specialised diagnostic procedures;

Re-visitation: a partial visitation organised in agreement with the ESEVT SOP in order to evaluate if the Major Deficiencies identified during a previous Visitation have been corrected

VEE's Head: the person who officially chairs the above-described VEE, i.e. Rector, Dean, Director, Head of Department, President, Principal, ...;

Veterinary Education Establishment (VEE): the official and legal unit that organises the veterinary degree as a whole, e.g. a university, faculty, school, department, institute, etc..

Tracking system

ESEVT SOP 2023

	Prepared by:	Reviewed by:	Approved by:
Name:	Pierre Lekeux and SOP WG	ECOVE, CIQA, FVE Board, EAEVE ExCom, EAEVE Members, IVSA	EAEVE GA (for Chapters 2 & 3) FVE Board (for Chapters 2 & 3) EAEVE ExCom (for Annexes 4 to 18)
Date:	From – to: 23/02/2022 – 27/06/2022 From – to: 06/12/2022– 25/01/2023	From – to: 10/03/2022 – 10/06/2022 From – to: 22/09/2022 – 05/12/2022	03/04/2023 (FVE Board) 07/06/2023 (EAEVE ExCom) 08/06/2023 (EAEVE GA)