

**European Association  
of Establishments for Veterinary Education**



**VISITATION REPORT**

**To the Faculty of Veterinary Medicine of the University of Santiago de Compostela, Spain**

**On 24-28 September 2018**

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## **Introduction**

The Veterinary Faculty of Lugo (FVL) (called the **Establishment** in this report) has been part of the University of Santiago de Compostela (USC) since 1984. It is in Lugo in the ‘Campus Terra’ which is 95 km away from Santiago. It is the only Veterinary Faculty in the Autonomous Community of Galicia.

The Establishment was visited by EAEVE in 1998 (Non Approval), Re-visited in 2002 (full Approval) and visited again in 2008 (full Approval).

Since the last Visitation, many changes have been introduced, taking into account the suggestions of the 2008 Visiting team and the recently established legal changes regarding the Degree programme in Veterinary Medicine in Spain. These changes have concerned:

- organisation and management, e.g. new committees on Quality Assurance, Bioethics and Biosecurity, and a new departmental structure of the USC;
- study programme, e.g. increase of practical and clinical training, inclusion of Zoonoses and Public Health, a graduation thesis and problem-based learning as core subjects, development of e-learning;
- facilities, e.g. new buildings and equipment to enhance:
  - the quality of teaching, research and services;
  - the welfare and biosecurity of students, staff and patients;
  - the IT structure and energy efficiency of the facilities.

The major problems encountered by the Establishment during the last decade were linked to the economic crisis, with a negative impact mainly on human resources (e.g. almost no replacement of retired teachers). Fortunately, in the last two years, there has been an improvement that has permitted the promotion of new academic staff.

This Visitation Report is written in agreement with the ESEVT SOP 2016 and its standards. However, as agreed by ExCom and ECOVE and in order to follow the recommendations provided by the 2017 ENQA review, the format of the present Visitation Report has to be considered as a pilot document where chapters are subdivided not in standards but in sub-standards.

## **Standard 1: Objectives and Organisation**

**1.1. The Establishment must have as its main objective to provide, in agreement with the EU Directives and ESG recommendations, adequate, ethical, research-based, evidence-based veterinary training that enables the new graduate to perform as a veterinarian capable of entering all commonly recognised branches of the veterinary profession and to be aware of the importance of lifelong learning.**

### 1.1.1. Findings

The main goal of the FVL is the creation of an innovative, accredited, professional curriculum that educates students in the broad field of veterinary medicine, encourages critical and analytical thinking and prepares students for life-long learning and professional growth.

### 1.1.2. Comments

None.

### 1.1.3. Suggestions for improvement

None.

### 1.1.4. Decision

The Establishment is compliant with substandard 1.1.

**1.2. The Establishment must develop and follow its mission statement which must embrace all the ESEVT standards.**

### 1.2.1. Findings

The mission of FVL is to improve health and animal welfare and public health through excellence in education, research, professional practice and service.

### 1.2.2. Comments

None.

### 1.2.3. Suggestions for improvement

None.

### 1.2.4. Decision

The Establishment is compliant with substandard 1.2.

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

### 1.3.1. Findings

FVL is a faculty of the University of Santiago de Compostela (USC), and has been so since 1984. USC is a public university dependent on the Spanish Ministry of Education, Culture and Sport, and on the Government of the Autonomous Community of Galicia.

### 1.3.2. Comments

None.

1.3.3. Suggestions for improvement

None.

1.3.4. Decision

The Establishment is compliant with substandard 1.3.

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

1.4.1. Findings

The dean, the coordinator of the Veterinary Degree, the managing director of Rof Codina University Veterinary Teaching Hospital (HVURC) and the HVURC clinical and teaching director all hold veterinary degrees and they are also PhDs.

1.4.2. Comments

None.

1.4.3. Suggestions for improvement

None.

1.4.4. Decision

The Establishment is compliant with substandard 1.4.

**1.5. The organisational structure must allow input not only from staff and students but also from external stakeholders.**

1.5.1. Findings

FVL is one of the 25 faculties of USC, whose statutes decide the composition, structure and functions of the governing bodies of the Faculty. Both the Faculty and its departments are led by councils consisting of academic staff and elected representatives of other categories of staff and students.

The Faculty Council is the managing and governing body of FVL, and consists of, among others, all permanent academic staff and elected representatives of other categories, including students. The Faculty Council meets at least three times a year. One important responsibility of the Faculty Council is to elect the dean (elected from the tenured academic staff for a four-year term).

The Faculty Council is assisted by seven advisory Faculty Committees. Except for the Permanent Committee, which deals with and expedites day-to-day matters, the advisory committees have no decision-making authorities. All faculty collectives are guaranteed representation in the advisory committees, including undergraduate and postgraduate student representatives.

The Department Council is the governing body of each academic department and consists of academic staff above PhD-level and representatives of other staff and students. The Department director is elected by the council.

There are 17 departments that have teaching assignments for FVL, however, only two departments (Department of Anatomy, Animal Production and Veterinary Clinical Sciences

and Department of Veterinary Pathology) are based within FVL. Academic and support staff from the 15 other departments that have teaching assignments at FVL are located at the Campus Terra in Lugo and within the FVL facilities.

The management (administrative and financial) of the teaching hospital HVURC is independent of the Faculty but coordinated by an agreement between the Rof Codina Foundation (FRC) and USC. The HVURC is governed by the FRC board, assisted by an Executive Board that includes the Executive Manager and the Veterinary Director. The Veterinary Director is the link between hospital management and the teaching bodies of the Faculty.

Input from external stakeholders is provided through their formal participation in the USC Social Council and the FRC board. In addition, the Establishment maintains continuous interactions with stakeholders through the Veterinary Professional College, veterinary professional associations and tutors involved in external practical training (EPT).

#### 1.5.2. Comments

Input from staff and students is secured through the council and committee structure of FVL. However, the formal participation of external stakeholders in the development and improvement of the Establishment is weak, as the USC Social Council acts on the university level and the HVURC teaching hospital is independent of the Faculty. This is further commented under sub-standard 11.1.

#### 1.5.3. Suggestions for improvement

Interactions with external stakeholders should be strengthened.

#### 1.5.4. Decision

The Establishment is compliant with substandard 1.5.

### **1.6. The Establishment must have a strategic plan, which includes a SWOT analysis of its current activities, a list of objectives, and an operating plan with timeframe and indicators for its implementation.**

#### 1.6.1. Findings

FVL has a strategic plan based on a SWOT analysis that is valid for 2014-2018. The plan is focused around four major areas; 1) educational planning, 2) development of teaching activities, 3) management, material resources and general services, and 4) public information. Several strategic actions follow up the four major areas according to concrete strategic objectives. A time-frame in FVL's long-term plan defines implementation of the plan. Annual improvement plans and monitoring reports ensure a close follow-up of the main strategic plan.

#### 1.6.2. Comments

The faculty has a plan on how to revise and refine the current strategic plan for the new strategic period starting in 2019. This work will be led by the Quality Control Committee, and a draft will be presented to the Faculty Council for a final decision. The Faculty foresees that the main strategic lines for 2014-18 that were defined in accordance with the mission, vision and values of the FVL should remain valid.

#### 1.6.3. Suggestions for improvement

It is recommended that FVL should anchor concrete actions for enhancement of their national and international collaboration with regard to both education and research in the new strategic plan.

1.6.4. Decision

The Establishment is compliant with substandard 1.6.

## **Standard 2: Finances**

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

2.1.1. Findings

There are very strict rules for the financing of public universities in Spain. The University Organic Laws (2001 and 2007) says that “public universities will have economic and financial autonomy” and that “it will be guaranteed that universities have the necessary resources for a basic quality operation”.

Within USC, it is the university that manages and directly pays the staff costs, services, contracted work, maintenance services, waste collection and other important expenditure. The faculties and departments receive annual funds from USC to cover operating costs and equipment specifically related to teaching, and some maintenance costs.

HVURC is a foundation with its own independent financing. The foundation receives funding from several public sources, including USC.

2.1.2. Comments

The strict rules for financing and the centralization of the budgeting within USC is a challenge for the Faculty, because this situation reduces the flexibility of the Faculty with regard to allocation of funding for strategic purposes.

2.1.3. Suggestions for improvement

None.

2.1.4. Decision

The Establishment is compliant with substandard 2.1.

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

2.2.1. Findings

The finance report was well presented in the SER (page 12-16). The annual budgets managed directly by USC faculties are assigned according to specific criteria. Table 2.2.4 shows that the annual budget directly managed by FVL has increased substantially during the last three years; from around 80 000 euro in 2015 to more than 170 000 euro in 2017. All areas of expenditure, operating costs, maintenance costs and equipment have increased.

The accounting for HVURC shows a deficit of about 400 000 euro for 2017 (tables 2.2.5 and 2.2.6). However, as HVURC has its own and independent financing, this deficit will not impact the budget for FVL since it is covered every year by the foundation.

2.2.2. Comments

The annual revenues for research grants, diagnostic services and other services are low for a faculty of the size of FVL, being in the order of 2-3 million euro compared a total expenditure

in the order of 9-10 million euro.

#### 2.2.3. Suggestions for improvement

By enhancing their national and international collaborations (see substandard 1.6), FVL should try to increase their success rate in attracting national and international research grants.

#### 2.2.4. Decision

The Establishment is compliant with substandard 2.2.

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

#### 2.3.1. Findings

The SER confirms that the funding FVL gets from USC is sufficient for the normal operation of the Faculty. Any expenditure that exceeds this ordinary budget must be requested extraordinarily from the USC central services office.

The USC Infrastructure Area oversees the maintenance and repair of the university buildings. FVL gives input to the USC's three-year implementation plan for maintenance and repair of buildings. In table 2.4.1 in the SER there are several proposed investments in FVL that have been considered by the Infrastructure Area and the General University Manager of the USC. The main investments cover renewal of air conditioning systems and repair and renovation of roofs.

A similar procedure applies for increase in personnel; suggestions from the Faculty must be negotiated with central USC management, and priorities are chosen in competition with needs from the other faculties.

#### 2.3.2. Comments

There have been few possibilities for extra resource allocations over the last 10 years due to the generally difficult financial situation in Spain after the 2008 crisis. However, Spain is now steadily improving this situation.

#### 2.3.3. Suggestions for improvement

No specific suggestions. The FVL management is aware that there is real competition for funding resources from USC, and they constantly need to refine their arguments to strengthen their position in their negotiations with the USC management when they ask for increases in personnel and maintenance budgets.

#### 2.3.4. Decision

The Establishment is compliant with substandard 2.3.

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

#### 2.4.1. Findings

The SER and additional documents provided during the visit confirm that the main goal of HVURC is clinical training of students, even though the HVURC is a foundation organized independently of FVL. In addition to offering clinical services at market prices, they offer free services to non-profit entities to ensure an adequate case load for the students.

The costs for transport to field practices and elsewhere are covered by USC directly according

to the financial model.

2.4.2. Comments

None.

2.4.3. Suggestions for improvement

None.

2.4.4. Decision

The Establishment is compliant with substandard 2.4.

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

2.5.1. Findings

As described under sub-standard 1.5, several of the staff with teaching assignments at FVL are organized under departments outside FVL. Thus, the budgets of these departments are not under FVL control. Number of teachers, number of ECTS enrolled, number of teaching hours taught, and number of students are some of the main parameters in the USC budget model.

2.5.2. Comments

Together, the departmental structure and the centralized and rigid financial model challenge the autonomy of the Establishment to a substantial degree. The Establishment itself is not able to allocate resources (personnel and/or running costs) from one subject of the curriculum to another if they find that the balance between two subjects is no longer appropriate. For example, FVL cannot, if they wanted to, allocate resources from Food Technology to Equine Clinical Sciences if they thought this to be a strategically robust decision.

Furthermore, the centralized procedure for recruitment of staff hampers the opportunities for FVL to ensure that they have the right academic staff employed in the departments they don't host themselves. For example, in basics sciences like cell biology, physiology and pharmacology, the veterinary students are dependent on teachers that are able to tailor their teaching to the specific needs and relevance for veterinary medicine.

2.5.3. Suggestions for improvement

It is strongly recommended that the departmental structure of the FVL is changed, so that the Establishment itself will host the teaching activities associated with the veterinary programme and that the absolute majority of the academic and support staff that today are organized under departments outside FVL should be FVL employees. This would greatly increase the autonomy and flexibility of the Establishment.

2.5.4. Decision

The Establishment is partially compliant with sub-standard 2.5, because of insufficient autonomy of the Establishment for departmental restructuring and staff recruitment.

## **Standard 3: Curriculum**

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

### 3.1.1. Findings

The FVL curriculum is compliant with the EU Directive 2005/36/EC, which regulates veterinary studies in the European Union, and with Spanish legislation by RD 1837/2008. The curriculum must last for a minimum of 5 years, with a series of compulsory subjects for the three professional profiles - Medicine and Health, Animal Production and Economics, and Food Hygiene and Food Technology. The curriculum is based on a list of competences which are divided into 3 categories: General, Specific and Transversal competences. These correlate with the list of Day One Competences and the knowledge and understanding requirements defined by the EAEVE. The Degree of the FVL comprises 300 ECTS divided in veterinary Basic Sciences (93 ECTS), Clinical and Sanitary skills (109,5 ECTS), Animal Production (31,5 ECTS), Food Technology, Food Hygiene and Food Safety (24 ECTS), external practical training (EPT) including Hospital rotation (24 ECTS), elective subjects (12 ECTS) and a graduation thesis (6 ECTS). Each subject is restricted to a semester, with a total of five academic years (10 semesters). The EPT, Hospital Rotation and graduation thesis (TFG) are offered in the 10<sup>th</sup> semester, and in an extra-semester, the 11<sup>th</sup> semester. This extra-semester allows students who do not meet the prerequisites needed to enrol in these subjects in the 10<sup>th</sup> semester not to delay their graduation. Approximately 30% of the enrolled students in the last three years needed to take the opportunity of this extra semester. Through this curriculum organisation about 50% of the enrolled students can graduate in 5 years, 40% - in 6 years, and a final 10% - in 7 years. The size of the groups differs according to the specific teaching - lectures and blackboard practices: around 100 students/group; seminars: 30 students/group; tutorials: 10 students/group; laboratory practices, field practices and computer practices: 20 students /group; clinical animal work and non-clinical work: 7-10 students/group.

The Quality Control Committee is responsible for gathering the necessary information to promote any type of modification of the curriculum, whether substantial or non-substantial. To identify and correct the curricular critical issues, the following mechanisms of teaching coordination are available: 1) Coordination of the semester activity done by the Semester Coordination Working Group; the final reports issued are submitted to the Quality Control Committee; 2) Coordination of EPT and Hospital Rotation; 3) Coordination of Elective External Practical training; 4) Coordination of the grad issue.

### 3.1.2. Comments

The Curriculum is well designed. The information is clear and complete. Based on the opinions of staff and students, the current duration of the study programme is not long enough to allow sufficient time for implementing the full curriculum, including clinical rotations and completion of the final year thesis.

### 3.1.3. Suggestions for improvement

Although the duration of the study programme is defined by law, an increase of it (e.g. one semester) should be considered to have enough time for providing the theoretical, practical and clinical teaching.

### 3.1.4. Decision

The Establishment is compliant with substandard 3.1.

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

3.2.1. Findings

The Curriculum has as its main objectives: 1) Hygiene control, inspection and technology for the production and processing of food for human consumption, from primary production to the consumer; 2) The prevention, diagnosis and individual or collective treatment particularly in the case of zoonoses; 3) The control of the breeding, handling, welfare, reproduction, protection, and feeding of the animals; 4) The obtaining of products of animal origin and the assessment of their environmental impact; 5) Knowledge and application of legal, regulatory and administrative provisions in all areas of the veterinary profession and public health; 6) Development of professional practice with respect to other health professionals, acquiring skills related to teamwork, efficient use of resources and quality management; 7) Identification of emerging risks in all areas of the veterinary profession. To reach these aims the curriculum is organized in 5 content modules as described in 3.1 and the students acquire the competences and learning outcomes planned progressively in compliance with ECI/ ORDER 333/2008.

3.2.2. Comments

The FVL SER clearly describes the general objectives of the degree course underlining how the learning outcomes for the programme are articulated to form a cohesive framework. The tools put in place to verify in detail the achievement of these objectives, which by their nature are not limited to the evaluation of the single semesters of the course, are not highlighted.

3.2.3. Suggestions for improvement

None.

3.2.4. Decision

The Establishment is compliant with the substandard 3.2.

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

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

3.3.1. Findings

The relationship between the competences, the learning outcomes and how they are achieved is defined at subject level and described in the syllabus of each individual subject. On an annual basis, syllabi are reviewed, discussed and approved by the Department Council; finally validated by the Faculty Council.

3.3.2. Comments

The re-evaluation of the syllabus of each individual subject is carried out annually according to a described procedure, however the effectiveness of the reassessment and the perception of its effectiveness by the students should be improved. In general, it appears that the students perceive the effectiveness of the procedure as the result of the teachers' willingness to accept the suggestions and requests coming from the Quality Control Committee, rather than as a process commonly accepted by the teaching community.

3.3.3. Suggestions for improvement

The Faculty should highlight and communicate to the student community the changes carried out following the revision of the previous academic year to stimulate them as active players in the assessment and analysis of the delivery of teaching. Furthermore, the Faculty could consider specific awards to professors who show an outstanding ability to innovate the courses which they are responsible for, with respect to the mission of the degree programme.

#### 3.3.4. Decision

The Establishment is compliant with substandard 3.3.

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

- **determine the pedagogical basis, design, delivery methods and assessment methods of the curriculum,**
- **oversee QA of the curriculum, particularly gathering, evaluating, making change and responding to feedback from stakeholders, peer reviewers and external assessors, and data from examination/assessment outcomes,**
- **review the curriculum at least every seven years by involving staff, students and stakeholders,**
- **identify and meet training needs for all types of staff, maintaining and enhancing their competence for the on-going curriculum development.**

#### 3.4.1. Findings

The Faculty Council appointed a specific committee for the design of the curriculum, ratified by the Rector, formed by professors representing the 5 content modules, student body representatives and the person responsible for the Administrative Unit. This procedure guarantees the participation of various stakeholders, such as the Official Veterinary Colleges of Galicia and professional associations, as well as periods of public notification and display and presentation of amendments.

Since its implementation in the academic year 2010-11, the curriculum is subject to a continuous evaluation for which the Quality Control Committee (QCC) is responsible, and in which the student body is represented. Every year the QCC receives the inputs from different sources (GCTS, graduated students, EPT and Hospital Rotation tutors and students, administrative staff, etc.) and analyses the validity of the curriculum to compile the annual Monitoring Report, and if necessary, improvement actions are proposed to be applied during the next academic term. Among these improvement actions training courses for teachers are organized every year.

Administrative staff has its own formative programme stipulated by the management of the USC. The distribution of the competences and the hours dedicated to the different training activities has been reorganized. In addition, the 6 ECTS elective subject "External Practical Training" has been incorporated.

#### 3.4.2. Comments

EPT and hospital rotation ECTS could be evaluated according to a more precise procedure that involves the various stakeholders of the professional profiles.

#### 3.4.3. Suggestions for improvement

None.

#### 3.4.4. Decision

The Establishment is compliant with substandard 3.4.

**3.5. The curriculum must include the subjects (input) listed in Annex V of EU Directive 2005/36/EC and must allow the acquisition of the Day One Competences (output) (see Annex 2).**

**This must concern all groups of subjects, i.e.:**

- **Basic Sciences;**
- **Clinical Sciences;**
- **Animal Production;**
- **Food Safety and Quality;**
- **Professional Knowledge.**

#### **3.5.1. Basic Sciences**

##### 3.5.1.1. Findings

The Degree of the FVL allocates 93 of the 300 ECTS in Basic sciences. The basic subjects of animal biology, zoology, molecular biology, medical physics, feed plant biology, chemistry and biomedical statistic are taught for a total of 137 hours. Anatomy, including histology and embryology, is taught in the first 2 semesters, and comprises 128 hours and 130 hours of theoretical and practical lessons, respectively. Practical-based work is primarily focused on non-clinical animal work (80 hours). Physiology comprises 44 hours in lecture and 46 hours in desk-based laboratory, mainly based on computer exercises. Biochemistry comprises 121 contact hours of teaching, from which approximately 60 are lectures/seminars. Microbiology (including virology, bacteriology and mycology) consists of approximately 48 hours of theoretical teaching and 20 hours of practical coursework. Toxicology comprises 60 hours of theoretical teaching and 25 practice-based hours. Pharmacology, including pharmacy and pharmacotherapy, comprises 60 hours in lectures and 21 hours is laboratory work, with 6 hours of practical teaching in veterinary hospital pharmacy. Parasitology comprises 35 hours of lectures and 20 hours of laboratory work. Pathology (including general pathology and immunology) comprises 58 (33+3 and 20+2) hours of lectures and 37 (16.5 and 6) hours of laboratory or desk-based work. Veterinary Ethology comprise 4 hours of lecture and 7.5 hours in the course of Physiology. Animal nutrition comprises 24 hours of lectures and 35 hours of practical teaching. Epidemiology comprises 25 hours of lectures and 8 hours of laboratory or desk-based work.

##### 3.5.1.2. Comments

The distribution of theoretical and practical training hours in basic subjects is not well-balanced. The different availability of teachers in the individual disciplines may have partly caused this distribution. The teaching of Veterinary Physiology, in terms of theoretical and practical hours provided, appears to be insufficient and dramatically fewer when compared to Anatomy subjects. The veterinary functional science should be more integrated with morphological science in domestic animals.

##### 3.5.1.3. Suggestions for improvement

A more balanced distribution of theoretical lectures between veterinary anatomy, physiology and biochemistry is suggested. Practical activity must be strengthened and better distributed; the possibility for better communication between the veterinary anatomy, veterinary physiology and veterinary pathology units should be investigated to increase the amount of practical teaching in both non-clinical and clinical animals.

### **3.5.2. Clinical Sciences in companion animals (including equine and exotic pets)**

#### 3.5.2.1. Findings

The veterinary curriculum comprises a total of 300 ECTS. For the competences of clinical and sanitary skills 109,5 ECTS are assigned (SER p.17). In the general table of curriculum hours taken by all students (SER p. 21, Tab. 3.5.1) the amount of teaching hours spent in clinical animal work in the 3<sup>rd</sup>, 4<sup>th</sup> and 5<sup>th</sup> year sums up to 669 hours. Curriculum hours for Clinical sciences are listed in Table 3.5.2 (SER p. 22), and Table 3.5.3 (SER p.23 Electives). Lectures amount to 445 hours, lab and desk-based work 19 hours, non-clinical animal work 195 hours and clinical animal work 623 hours. A detailed list of subjects is listed in Annex 3.5.1. Only 12 ECTS of electives are designed in the curriculum.

There is a high number of “practices” scheduled between the 5<sup>th</sup> and 9<sup>th</sup> semester before starting the clinical rotations. These subjects include all clinical disciplines as well as paraclinical issues such as parasitology, pharmacology and epidemiology.

Clinical propaedeutics include 35 hours of practice in bovine or small animal modules.

Table 3.7.2. (SER p.30) summarises these subjects under academic supervision. These subjects include also ambulatory clinical service, especially in farm animals. An ovario-hysterectomy in female canine is scheduled in clinical veterinary medicine and surgery in the 5<sup>th</sup> semester.

Clinical rotations are scheduled during the 10<sup>th</sup> semester and last 2 weeks or 104 hours (5 ECTS). During this time students rotate in groups of 8-10 students between 6 different stations (example p.27). These rotations include two 12-hour emergency shifts during night or weekends at the hospital (HVURC).

#### 3.5.2.2. Comments

There is a detailed and extensive clinical programme with well described learning outcomes and objectives of the various clinical courses. Clinical propaedeutics are given only in dogs and cattle and would be beneficial using Faculty owned pigs and horses as well.

The programme of the clinical rotations includes a high number of learning outcomes, which are described as to complement the academic training. At least 62 clinical tasks have to be performed and assessed for each student. An emergency service is offered for all species, and students have to perform night duties also during these two weeks. This seems to be too short a period and very demanding to complete all tasks and to gain sufficient training and experience in all species and disciplines.

#### 3.5.2.3. Suggestions for improvement

It is suggested to:

- Increase the duration (ECTS) of clinical rotations for small animals, equine and farm animals significantly;
- Introduce regular clinical propaedeutics in horses and pigs.

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

#### 3.5.3.1. Findings

The Degree of the FVL comprises 300 ECTS with 31,5 attributable to Animal Production, it is also recognised that elements of Basic Sciences, Clinical and Sanitary skills, Food Hygiene, EPT and Elective subjects may also relate to clinical sciences in food-producing animals.

#### 3.5.3.2. Comments

The development of the new farm is to be welcomed and will be a very important addition to

the Establishment's facilities supporting teaching (and research). Students need to see more pigs either at the Establishment or elsewhere.

#### 3.5.3.3. Suggestions for improvement

The new dairy farm should be finished as a matter of urgency to optimise/maximise its use in teaching using not just the animals, but also the production, health, nutrition and other data it can generate to promote Herd Health Management teaching.

### **3.5.4. Food Safety and Quality**

#### 3.5.4.1. Findings

Food Hygiene, Food Technology and Food Safety is module 4 of the curriculum. In total, it consists of 464 curriculum hours, of which 191 hours can be chosen as part of the non-clinical EPT. The module contains four courses: Food Technology I and II (3<sup>rd</sup> year subjects, 4.5 ECTS each) and Hygiene II and Hygiene III (5<sup>th</sup> year subjects, 4.5 ECTS each).

Hygiene III includes the practical fieldwork in food processing plants and slaughterhouses. The students visit a dairy plant, a fish market, a slaughterhouse for cattle (4 days) and another for poultry (1 day). In the cattle slaughterhouse, the students start day 1 with the ante mortem control of the animals and then follow the consecutive steps of the slaughter process throughout the week. The students do not visit any pig slaughterhouse.

Module 4 is taught by teachers (including 5 professors) organised in the Department of Analytical Chemistry, Nutrition and Bromatology, which is not part of the FVL. However, all teachers are localised at the Terra Campus in Lugo, within the FVL facilities. When the students go to practical field work they go in groups of 20 and are accompanied by two teachers.

#### 3.5.4.2. Comments

Food hygiene and food safety are applied subjects that are rooted in basic, paraclinical and clinical subjects, such as toxicology, microbiology and pathology. The subjects are also closely associated with Epidemiology, Preventive Medicine and Sanitary Police, and Zoonoses and Public Health. These are courses that are taught in the 4<sup>th</sup> and 5<sup>th</sup> years, by teachers from other departments.

The absence of visits to a pig slaughterhouse could have been compensated by extensive teaching in pig farms and high caseload of pig cadavers for necropsy. However, this is not the case as the main focus in food production animals is on cattle.

#### 3.5.4.3. Suggestions for improvement

Teaching in the "from farm to fork" porcine value chain needs to be improved.

FVL should encourage their teachers in Food Safety and Quality to explore synergies with other related subjects across departmental borders to offer training that puts the veterinary responsibility for food production and safety into a clear One Health perspective.

### **3.5.5. Professional Knowledge**

#### 3.5.5.1. Findings

Professional knowledge is not precisely described in the SER and the information is available in only two tables (3.5.2 & 3.5.3). The basic subjects are professional ethics and behaviour, veterinary legislation, veterinary certification and report writing, professional communication, practice management and business, information literacy and data management.

Professional knowledge represents 372.5 hours in the curriculum, and 461 hours when it is also taken as an elective.

A lot is done by supervised self-learning.

Concerning professional communication, students are taught not only how to write official reports (e.g. necropsy report, surgery report) or scientific papers but also how to express themselves orally by making presentations (e.g. clinical cases) or explaining the medical condition of the animal to its owner.

The veterinary legislation encompasses legislation regarding the veterinarians and legislation related to the veterinary environment.

#### 3.5.5.2. Comments

Students are also taught how to communicate to society in simple terms, avoiding technical words, and can practice in real conditions with “people from the street”.

#### 3.5.5.3. Suggestions for improvement

None.

#### 3.5.6. Decision

The Establishment is partially compliant with sub-standard 3.5, because of insufficient training in functional sciences.

The Establishment is not compliant with sub-standard 3.5, because of insufficient clinical training in common animal species, especially in equine and porcine, and in porcine food safety and quality.

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

#### 3.6.1. Findings

EPT takes place during semester 10 and brings 10 ECTS when clinical and 9 ECTS when non-clinical. Before starting the EPT, students must have already acquired 75% of the curriculum ECTS. Clinical EPT lasts 5 weeks whereas non-clinical EPT lasts 4 weeks. Students have to take both.

The Vice Dean is in charge of the EPT with the support of UXA (Unit of Academic Management), which deals with the administrative tasks, and the registration of external entities where EPT will take place.

The coordination of EPT is carried out by 2 academic coordinators. The coordinator must solve all the different problems, carry out the dialogue with professional tutors, check the learning process and coordinate the unified criterion for the preparation as well as the assessment of the reports that the students must write about the work done. The work of the student is assessed both by the non-academic tutor and a FVL teacher.

In total, 4 academics are involved in the clinical EPT whereas 12 are involved in the non-clinical EPT.

New EPT locations can be proposed by students but need to be approved by the Vice Dean.

The EPT folder is rather an administrative document and the final evaluation of the student by the professional tutor is based on transversal skills only.

#### 3.6.2. Comments

There is a huge number (413) and a wide range of locations for EPT. Apart from the “classic” veterinary clinics, one can undertake environmental management, wildlife, pharmaceutical

company, cat clinic, pest control, canned fish industry, cookies and desserts analysis, genetic, conservation of European bison, milk and water analysis, seafood, biomedicine research, etc.

3.6.3. Suggestions for improvement

None.

3.6.4. Decision

The Establishment is compliant with sub-standard 3.6.

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

3.7.1. Findings

When all the possible EPT locations are considered, it is clear that EPT can complement and strengthen the academic situation.

3.7.2. Comments

None.

3.7.3. Suggestions for improvement

None.

3.7.4. Decision

The Establishment is compliant with sub-standard 3.7.

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

3.8.1. Findings

The USC Rectorate signs an official agreement with every single EPT provider. The professional tutor assesses the work and activities carried out by the students and is responsible for certifying the achievement of professional skills on site. The academic tutor evaluates a detailed report delivered by the student.

The EPT coordinators directly contact each one of the professional tutors to gather information about their degree of satisfaction with the performance of the student. The professional tutors can express their opinions on the EPT programme.

3.8.2. Comments

None.

3.8.3. Suggestions for improvement

None.

3.8.4. Decision

The Establishment is compliant with sub-standard 3.8.

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

3.9.1. Findings

The Vice Dean in charge of EPT supervises the overall EPT with two coordinators from the academic staff.

3.9.2. Comments

None.

3.9.3. Suggestions for improvement

None.

3.9.4. Decision

The Establishment is compliant with sub-standard 3.9.

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

3.10.1. Findings

Students do not use logbooks but write a reflective report, the guidelines of which are available in the syllabus, and in which they describe some clinical cases for the clinical EPTs.

Students evaluate the EPT and can directly report to the Vice Dean or the coordinators in charge of EPT in case of problems.

3.10.2. Comments

None.

3.10.3. Suggestions for improvement

None.

3.10.4. Decision

The Establishment is compliant with sub-standard 3.10.

**Standard 4: Facilities and equipment**

**4.1. All aspects of the physical facilities must provide an environment conducive to learning.**

4.1.1. Findings

Using an area of 31,728 m<sup>2</sup> the Faculty consists of eight structural units including the clinics (HVURC). All are planned for education, training, research and services.

4.1.2. Comments

Most educational facilities are concentrated in the campus of the Faculty, offering a good environment for students and staff.

4.1.3. Suggestions for improvement

None.

4.1.4. Decision

The Establishment is compliant with sub-standard 4.1.

**4.2. The veterinary Establishment must have a clear strategy and programme for maintaining and upgrading its buildings and equipment.**

4.2.1. Findings

The infrastructure is maintained by the USC. There is an annually meeting and a three-year planning for the implementation of maintenance and repair. The HVURC is managed independently, where maintenance is financed by the Rof Codina foundation. Special Faculty funds are used for equipment and operating costs.

4.2.2. Comments

Many of the buildings date back to 1990 and will need an exhaustive maintenance programme in the coming years. Funding for these maintenance works seem to be secured.

There are several pieces of high-fidelity equipment in the HVURC. This leads to a need for enough experienced personnel.

4.2.3. Suggestions for improvement

None.

4.2.4. Decision

The Establishment is compliant with sub-standard 4.2.

**4.3. Lecture theatres, teaching laboratories, tutorial rooms, clinical facilities and other teaching spaces must be adequate in number, size and equipped for the instructional purposes and must be well maintained. The facilities must be adapted for the number of students enrolled.**

4.3.1. Findings

There are 7 lecture halls (three very large), 24 medium sized group work rooms and additional working spaces. Media systems and Wi-Fi is provided. A very basic clinical skills lab is established.

Most of the facilities and equipment are well maintained and renewed. The small animal clinic was recently rebuilt and offers plenty of space for all types of examinations.

4.3.2. Comments

There are enough lecture halls and teachings rooms. The skills lab offers a few low fidelity models, but the development and maintenance of this facility is not secured for future years.

4.3.3. Suggestions for improvement

The skills lab should be expanded and included more into various courses. Dedicated financing and personnel support should be provided.

4.3.4. Decision

The Establishment is compliant with sub-standard 4.3.

**4.4. Students must have ready access to adequate and sufficient study, self-learning, recreation, locker, sanitary and food services facilities.**

4.4.1. Findings

Study rooms, PC-places (in the central pavilion and the library *Intercentros*) and working areas are provided. Canteen, lockers, accommodation for the emergency night shifts are provided.

4.4.2. Comments

The areas for students are spacy and functional. Sanitary and food service facilities are of high standard.

4.4.3. Suggestions for improvement

None.

4.4.4. Decision

The Establishment is compliant with sub-standard 4.4.

**4.5. Offices, teaching preparation and research laboratories must be sufficient for the needs of the academic and support staff.**

4.5.1. Findings

Several offices (125) and laboratories (100) are available for the academic and supporting staff. The CEBIOVET provides a dedicated research surgery area with all necessary preparation and surgery rooms.

4.5.2. Comments

Though many offices seemed small, number and quality seem adequate.

4.5.3. Suggestions for improvement

None.

4.5.4. Decision

The Establishment is compliant with sub-standard 4.5.

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

4.6.1. Findings

There is an FVL biosecurity and risk prevention committee to manage all aspects of biosecurity. They provide guides and protocols, available both online as well as signalling and information in every lab. The waste management unit of the USC is responsible for hazardous waste. A USC Bioethics committee is responsible for the protection of the animals during teaching and research.

4.6.2. Comments

Laboratories as well as clinical facilities comply with the standards and provide clear information and instructions for safety measures in Spanish.

4.6.3. Suggestions for improvement

None.

#### 4.6.4. Decision

The Establishment is compliant with sub-standard 4.6.

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

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

#### 4.7.1. Findings

There is housing for sound animals, but only for dogs, cows and horses. A new teaching farm is planned. No facilities are available for pigs for teaching at the Establishment.

Facilities for hospitalized animals at the HVURC are low in number for dogs, cats and exotic animals. Housing for hospitalized cattle and horses at the Establishment is combined in only one stable for 8 animals in total.

There is one isolation box each for horses and cattle, as well as 4 places for dogs and cats.

#### 4.7.2. Comments

The housing for small animals is modern and adequate. Large animal stables are in the CEBIOVET building. Due to the separation of the research section from the HVURC, only one stable is used together for horses and cattle, including a separated space for the examination of horses. No other standard examination rooms for horses and cows separately with suitable floor and equipment are available.

The Establishment's current cattle teaching farm facilities are inadequate. The farm no longer provides fit for purpose animal housing, handling and teaching facilities and equipment. The facilities do not promote best husbandry, welfare and management practices or ensure relevant biosecurity and bio-containment.

#### 4.7.3. Suggestions for improvement

Adequate examination rooms with space for restrained as well as unrestrained horses should be available.

The Establishment is to be congratulated on the advanced plans to replace the farm.

#### 4.7.4. Decision

The Establishment is partially compliant with sub-standard 4.7, because of insufficient housing and examination facilities for horses and pigs and the new farm not yet being built and fully functional.

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

#### 4.8.1. Findings

At the HVURC a small and large animal area has been established. The small animal area provides facilities for several different services: internal medicine, ophthalmology, dermatology, neurology, cardiorespiratory problems, surgery as well as an ICU service.

The large animal area is not divided between ruminants and horses and has only 1 examination area in the stable. Additionally an x-ray room, 1 induction/recovery room, and 1 surgery room are available.

A central service area offers anaesthetic service, diagnostic imaging including radiography, ultrasound, CT and MRI diagnostics, a pharmacy service and a small animal reproduction service.

There are animal health diagnostic services (parasitology and microbiology), pathology and laboratory services.

An Emergency service is provided, however providing a service of one vet only for all species and disciplines. Specialists for surgery, internal medicine and anaesthesiology are on call.

#### 4.8.2. Comments

The small animal hospital provides state of the art facilities of sufficient number and equipment. The equine facilities do not reach the level of comparable national and international clinics.

#### 4.8.3. Suggestions for improvement

Facilities, equipment and a sufficient number of specialized staff should be provided for the equine service. Close co-operation with private equine clinics in the region of Lugo might help achieve this goal.

#### 4.8.4. Decision

The Establishment is compliant with sub-standard 4.8.

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

#### 4.9.1. Findings

The HVURC applies all legal and ethical standards. All specialists of the small animal clinic are collegiate members.

#### 4.9.2. Comments

There is no indication of facilities not meeting the national practice standards.

#### 4.9.3. Suggestions for improvement

None.

#### 4.9.4. Decision

The Establishment is compliant with sub-standard 4.9.

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

#### 4.10.1. Findings

Adequate teaching facilities and equipment as well as free WIFI is provided.

#### 4.10.2. Comments

Internet access is available at all campus locations.

4.10.3. Suggestions for improvement

None.

4.10.4. Decision

The Establishment is compliant with sub-standard 4.10.

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

4.11.1. Findings

The access for the students to all facilities is guaranteed.

4.11.2. Comments

All necessary clinical facilities are available in the HVURC.

4.11.3. Suggestions for improvement

None.

4.11.4. Decision

The Establishment is compliant with sub-standard 4.11.

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

4.12.1. Findings

The FVL Biosafety and risk prevention committee provides biosafety manuals and specific protocols for each type of practical activity. These are available on site as well as the virtual classroom. All issues are taught before the specific practical sessions.

4.12.2. Comments

The biosecurity measures are well prepared and used at all relevant locations.

4.12.3. Suggestions for improvement

Complement safety and biosecurity instructions in English at critical locations.

4.12.4. Decision

The Establishment is compliant with sub-standard 4.12.

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

4.13.1. Findings

The HVURC has an independent section in the large animal unit building with one unit each for cattle, horses and small ruminants. 4 cages are available for dogs and cats.

4.13.2. Comments

The premises of large animals are quite new and obviously not used prior to the Visitation.

4.13.3. Suggestions for improvement

None.

4.13.4. Decision

The Establishment is compliant with sub-standard 4.13.

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

4.14.1. Findings

An ambulatory service is provided for the large animal service under supervision of the large animal internal medicine professors. These serve farm animals (mainly cattle) as well as horses and a dog and cat shelter.

4.14.2. Comments

Every effort should be made to maintain and wherever possible expand the range of farms visited and the student learning experience. Particular emphasis on Herd Health Management as well as individual animal diagnosis and treatment is important. Production and health data management is an important skill for production animal veterinarians of the future.

4.14.3. Suggestions for improvement

None.

4.14.4. Decision

The Establishment is compliant with sub-standard 4.14.

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

4.15.1. Findings

Two vans provide transport for small student groups for the farm animal and equine service. They are fully equipped for ambulatory services. Larger groups of students are transported by a hired private bus service. Animal transport is possible using a trailer. Cadaver transport can be done using one van with a lifting platform.

4.15.2. Comments

The ambulatory service fulfils the needs for staff and students.

4.15.3. Suggestions for improvement

None.

4.15.4. Decision

The Establishment is compliant with sub-standard 4.15.

## **Standard 5: Animal resources and teaching material of animal origin**

**5.1. The number and variety of healthy and diseased animals, cadavers, and material of animal origin must be adequate for providing the practical training (in the area of Basic Sciences, Clinical Sciences, Pathology, Animal Production, Food Safety and Quality) and adapted to the number of students enrolled.**

### 5.1.1. Findings

The global strategy of the FVL about the use of animals and materials of animal origin is, first, to guarantee the acquisition of all the competencies defined in the curriculum, including Day One Competences. This must be achieved while also achieving a balance between what is needed to assure an adequate hands-on training and what can be reduced or replaced using cadavers or models instead of live animals. This is to optimise both education and animal welfare.

The clinical training is mainly supported by the HVURC (teaching hospital) as its chief foundational mission. A constant goal is to maintain a sufficient caseload in the areas of small and large animals, with respect to intramural cases and those attended with the ambulatory clinics.

In 2016 a Clinical Skills Laboratory (LHC) was opened, where a very small number of low-fidelity dummies gives students a risk-free hands-on experience in different practical simulated procedures to enhance their abilities beyond the regular training during the practices e.g. sutures and Robert Jones bandages.

The medical records do not discriminate between first opinion patients and referral cases and are not fully digitalised.

The necropsy ratio falls within the satisfactory range and the number of companion animal necropsies seems adequate, but the numbers of equine necropsies is totally insufficient: 2015 zero, 2016 three and 2017 five.

The number of intramurally seen horses is very low with only 9 hospitalized horses and 47 ambulatory cases in 2017.

### 5.1.2. Comments

The equine cadavers available for the teaching of pathology are insufficient.

Increasing the number of HVURC clinicians with European or American professional boards as accredited specialists would be advantageous in attracting case load.

### 5.1.3. Suggestions for improvement

The Establishment must find a way of exposing students to more equine cadavers. Consideration might for example be given to the purchase and euthanasia of horses and ponies or the acquisition of abattoir derived pathological material, as well as offering a free necropsy service to local equine veterinarians.

### 5.1.4. Decision

The Establishment is partially compliant with sub-standard 5.1, because of insufficient number of equine necropsies.

**5.2. It is essential that a diverse and sufficient number of surgical and medical cases in all common domestic animals and exotic pets be available for the students' clinical educational experience and hands-on training.**

#### 5.2.1. Findings

The SER describes the number and diversity of cases as sufficient to guarantee the hands-on training. There is a 24/7/365 hospital with one veterinarian for all animals on duty and specialists on call. 2-3 students support the vet during the night duties. However, the hospital is only fully operational during the morning on week days.

The number of cases seen by the hospital is limited, with there being a particularly low number of horses seen. The students are also exposed to very few pigs.

#### 5.2.2. Comments

The number of cases in general in horses as well as the number of hospitalized patients is concerning. Students need to see more pig cases.

#### 5.2.3. Suggestions for improvement

The Establishment must find a way of exposing students to more equine cases. This might involve employing an equine specialist (European or American Diplomate) to attract cases or perhaps forming an arrangement with an equine facility elsewhere in Spain or a partnership with a local equine practice. The visitors were told of one equine practice for example with three veterinarians, based just 14km from the Establishment seeing 20,000 equine patients per year.

The HVURC caseload is very low with the hospital only working in the mornings. This severely impacts on caseload and thus undergraduate and postgraduate training as well as meaning the facilities are underutilised. The hospital staff includes very few European Specialists and few residency programmes are offered. A plan needs to be put in place to correct this and better utilise the hospital infrastructure.

Dedicated investment, including dedicated staff time, needs to be made into the clinical skills facility.

Students need to be exposed to more pig farms and the management of pig diseases.

#### 5.2.4. Decision

The Establishment is partially compliant with sub-standard 5.2, because of insufficient caseload of horses and pigs.

**5.3. In addition to the training provided in the Establishment, experience can include practical training at external sites, provided this training is organised under direct academic supervision and at the same standards as those applied in the Establishment.**

#### 5.3.1. Findings

In the visits to external sites a professor always goes with the students in one of the HVURC vehicles and when necessary, transportation for students and professors is contracted by the Faculty with an external company.

During the HVURC practical activities for Herd Health Management, students go with the professor to external farms in order to deal with the common medical and surgical problems in the farming of food-producing animals and horses.

#### 5.3.2. Comments

The use of external sites needs to be increased. This may provide a way of compensating in part for the deficiencies seen in equine and porcine teaching and caseload.

#### 5.3.3. Suggestions for improvement

Consider forming a contractual relationship with one, or more, equine first opinion practices to deliver first opinion equine training and encourage the referral of cases to the hospital.

5.3.4. Decision

The Establishment is compliant with sub-standard 5.3.

**5.4. The VTH must provide nursing care skills and instruction in nursing procedures.**

5.4.1. Findings

Nursing is part of the clinical rotation, although the rotation is only 2 weeks long in total.

5.4.2. Comments

The structure of clinical teaching should be reconsidered to greatly expand clinical rotations in the final year. This might include a dedicated nursing rotation.

5.4.3. Suggestions for improvement

Expand clinical rotations.

5.4.4. Decision

The Establishment is compliant with sub-standard 5.4.

**5.5. Under all situations students must be active participants in the workup of patients, including physical diagnosis and diagnostic problem oriented decision making.**

5.5.1. Findings

Group size for students is maximally 7 per group. The SER lists a long list of activities, including first opinion and specialty consultations, hospitalization and emergencies, surgeries, anaesthesia, diagnostic imaging and necropsies, which should be performed during the clinical training. The clinical training is spread over a number of semesters and starts early in the programme. Ambulatory clinics involve up to 5 students who are active in the physical examination, diagnosis and treatment.

5.5.2. Comments

The integration of clinical training from an early point in the programme is to be commended and welcomed. However, the 2 weeks of clinical rotations is far too short to allow students to follow cases throughout their clinical work-up or to follow-up cases.

5.5.3. Suggestions for improvement

Greatly expand clinical rotations, perhaps considering a 'lecture free' final year. It is recognised that to do this the hospital would need to see cases all day and not just in the mornings, more specialist staff and a greater caseload would be needed.

5.5.4. Decision

The Establishment is partially compliant with sub-standard 5.5, because of the structure of the clinical training not allowing the active participation of undergraduate students in the full investigation and follow-up of patients.

**5.6. Medical records must be comprehensive and maintained in an effective retrieval system (preferably an electronic patient record system) to efficiently support the teaching, research, and service programmes of the Establishment.**

5.6.1. Findings

Each patient's record is kept in a folder along with handwritten clinical data and reports on the different tests performed. These record folders are stored, in numerical order, in the HVURC

files, maintained by the Reception/Admission staff. Although a bespoke electronic case database exists, it does not contain detailed patient records.

#### 5.6.2. Comments

An electronic patient record system available for the students during the whole clinical rotations would be useful and allow students to follow-up their cases.

#### 5.6.3. Suggestions for improvement

Ensure all case records are digitalised and searchable within the case record database and that first opinion and referral cases can be identified.

#### 5.6.4. Decision

The Establishment is compliant with sub-standard 5.6.

## **Standard 6: Learning resources**

**6.1. State-of-the-art learning resources must be available to support veterinary education, research, services and continuing education. Timely access to learning resources, whether through print, electronic media or other means, must be available to students and staff and, when appropriate, to stakeholders. State-of-the-art procedures for bibliographical search and for access to databases and learning resources must be taught to undergraduate students.**

#### 6.1.1. Findings

The main available resources are the USC library, the Campus Terra library called *Intercentros*, the e-learning centre (CETA), the clinical skills laboratory and the Anatomy museum. ATIC, a USC service, is in charge of all the IT equipment. The user service to support incidents with hardware or software is provided by an external company whose contract is publicly negotiated. All the electronic information and e-learning courses are available to students and staff as well as veterinary and non-veterinary (e)books and (e)periodicals.

Welcome sessions for new students are organised by the FVL at the beginning of the first year, and two student tutors are in charge of guiding new students. The *Intercentros* library also organises a welcome seminar and a guided tour for the new students.

Training courses are set up for the teaching staff and students in order to use specific tools like Open Access, Office 365, etc.

Students also have access to all the teaching materials on the Virtual Campus.

EPT professional tutors may access the USC library and electronic resources.

#### 6.1.2. Comments

Involving students in guiding new students is an excellent initiative as it creates cohesion and brotherhood.

The library teaches students and staff how to search for, manage and edit scientific information.

#### 6.1.3. Suggestions for improvement

None.

#### 6.1.4. Decision

The Establishment is compliant with sub-standard 6.1.

**6.2. Staff and students must have full access on site to an academic library, which is administered by a qualified librarian, an Information Technology (IT) unit, which is managed by an IT expert, an e-learning platform, and the relevant human and physical resources necessary for development by the staff and use by the students of instructional materials.**

6.2.1. Findings

The library is located in a spacious building with reading rooms and teamwork rooms as well as workstations. It opens daily, even during the weekends, and is run by a team of 17 persons who are employed full-time. Librarians are fully qualified. Books, periodicals, journals, e-books, etc. are fully available.

Access to two well-equipped computer rooms is possible.

Moodle is used as an e-learning platform. Specific training courses are offered to the teaching staff.

The Virtual Campus allows the sharing of teaching materials with students, to open discussion forums, to perform evaluation tests, etc. There is a virtual classroom for each discipline. The total 74 disciplines are using Moodle.

6.2.2. Comments

A lot of information is readily available for the students on Moodle by the teaching teams. All disciplines are using Moodle.

6.2.3. Suggestions for improvement

None.

6.2.4. Decision

The Establishment is compliant with sub-standard 6.2.

**6.3. The Establishment must provide students with unimpeded access to learning resources which include scientific and other relevant literature, internet and internal study resources, and equipment for the development of procedural skills (e.g. models). The use of these resources must be aligned with the pedagogical environment and learning outcomes within the programme, and have mechanisms in place to evaluate the teaching value of innovations in learning resources.**

6.3.1. Findings

Students have access to numerous veterinary (e)books (around 14,000) and (e)periodicals (36) and all the teaching materials through the Virtual Campus. Students can also practice on homemade models and simulators in the clinical skills lab (LHC) and visit the Anatomy museum.

6.3.2. Comments

The LHC is a teacher initiative which provides students with training for sutures, palpation, injections and bandages. Courses are supervised by teachers or by already trained students. The reproduction department has made its own dummy for transrectal palpation.

6.3.3. Suggestions for improvement

The clinical skills lab pilot project must be enhanced and the lab should increase its learning capacity by acquiring tools such as dummies.

6.3.4. Decision

The Establishment is compliant with sub-standard 6.3.

**6.4. The relevant electronic information, database and other intranet resources must be easily available for students and staff both in the Establishment's core facilities via wireless connection (Wi-Fi) and from outside the Establishment via Virtual Private Network (VPN).**

6.4.1. Findings

Wi-Fi and VPN allow access for students and staff to electronic learning resources from inside and outside the FVL.

6.4.2. Comments

Wi-Fi works perfectly well all over the campus and VPN allows students to have access from home to a large variety of information, including clinical cases.

6.4.3. Suggestions for improvement

None.

6.4.4. Decision

The Establishment is compliant with sub-standard 6.4.

**Standard 7: Student admission, progression and welfare**

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

7.1.1. Findings

The mission of the FVL is to improve health and animal welfare and public health through excellence in education, research, professional practice and service committed to society. The admission procedure is based on prospective student's academic transcripts from the last two years of secondary school, and their university entrance exam (PAU results).

Each year, the Faculty Council proposes to the USC Government Board the number of places to be offered. Their approval is then sent to the Inter-University Commission of Galicia (CIUG) to be decided. Usually the USC proposal is accepted. Limiting the admitted number of students to 110 responds to available resources.

7.1.2. Comments

None.

7.1.3. Suggestions for improvement

None.

7.1.4. Decision

The Establishment is compliant with sub-standard 7.1.

**7.2. In relation to enrolment, the Establishment must provide accurate information in all advertisements regarding the educational programme by providing clear and current information for prospective students. Further, printed catalogue and electronic information must state the purpose and goals of the programme, provide admission requirements, criteria and procedures, state degree requirements, present Establishment descriptions, clearly state information on tuition and fees along with procedures for withdrawal, give necessary information for financial aid programmes, and provide an accurate academic calendar.**

7.2.1. Findings

Access to the degree programmes in the Galician University System (SUG) is under the responsibility of the Inter-University Commission of Galicia (CIUG), which publishes all the information, instructions and management associated with the process through a website (*Plantaforma Nerta*). Updated information for prospective students is available on the USC website (requirements, criteria and procedures; courses; scholarships; grants and students' welfare), USC information office (e.g. pre-registration process) and FVL website (curriculum, syllabi, academic and support staff, schedule and general description of the Establishment). Further information can be requested on the website through the "Do you have any question about the Faculty?" or by e-mail to the FVL secretariat or USC Information Office. All information regarding enrolment, policy for disabled students, progression etc. can be accessed through the USC website and the UCS Information Office webpage.

The USC has designed a programme for students carrying on the last two years of their secondary education. The programme includes visits and lectures in secondary schools, participating in fairs, open days to visit the FVL, university orientation days and a Summer Campus. The USC invites the best students of the general phase of the admission test (PAU) to participate in a ceremony of recognition in which the University is presented and prospective students are provided information.

Most students are enrolled full time (60 ECTS) which is mandatory for first-year students. For working or other personal circumstances students can be authorized to enrol part time (50% of the ECTS) but this opportunity is very rarely used.

7.2.2. Comments

None.

7.2.3. Suggestions for improvement

None.

7.2.4. Decision

The Establishment is compliant with sub-standard 7.2.

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

7.3.1. Findings

Based on the SER, information about EAEVE, ESEVT, FVL's status and last SER and visitation report can be found on the FVL webpage.

7.3.2. Comments

The link on the FVL webpage links to the EAEVE front page. The Visitation Report from 2008

could be found but the previous SER had been too large to be uploaded on the EAEVE webpage.

#### 7.3.3. Suggestions for improvement

The availability of the reports should be increased by direct link to them on the Establishment's website.

#### 7.3.4. Decision

The Establishment is compliant with sub-standard 7.3.

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

#### 7.4.1. Findings

All public universities use the same access system and admission procedure based on prospective student's academic transcript from the last two years of the secondary school, and their university entrance exam (PAU results). There is no specific committee for student admission. The Autonomous Government and USC General Governance are in charge of amendment of procedures related to student admission that fall out of the FVL competences.

After finishing their Secondary School studies students must pass the University Access Exam (PAU), which is the same two-phase test for all public universities in Galicia. In addition to the general phase that is compulsory for all students (max. 10 points), students admitting to the Veterinary Degree are encouraged to complete the voluntary specific phase (max. 14 points). The final admission score is calculated according to a formula, which is slightly modified for international students. The average admission score of new students has showed a constant increase during the last three years (from 10.79 to 11.18 on a 14 points maximum scale).

It is mandatory in all USC faculties to reserve a certain percentage of places for applicants from special collectives (university graduates, disabled people, high-level and high-performance athletes, people over 25 and people over 40). 5% of admission places are reserved for disabled and ill students (who must present an official certificate of their disability) provided they reach the minimum scores required. They may apply for part time enrolment and alternative teaching systems and other support can be considered for them.

#### 7.4.2. Comments

None.

#### 7.4.3. Suggestions for improvement

None.

#### 7.4.4. Decision

The Establishment is compliant with sub-standard 7.4.

### **7.5. The Establishment must regularly review and reflect on the selection processes to ensure they are appropriate for students to complete the programme successfully, including consideration of their potential to meet all the ESEVT Day One Competences in all common domestic species (see Annex 2).**

#### 7.5.1. Findings

The FVL finds the annual monitoring of the programme an effective tool to detect deficiencies

and to adopt appropriate corrective measures. Teachers, students, administration and services staff are involved in this work. The satisfaction reports of the EPT providers give evidence of students' level of competence.

7.5.2. Comments

The FVL has limited opportunities to affect the selection processes as they are common to all public universities but reviews and reflects on the programme on a regular basis.

7.5.3. Suggestions for improvement

None.

7.5.4. Decision

The Establishment is compliant with sub-standard 7.5.

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

7.6.1. Findings

Non applicable.

7.6.2. Comments

Non applicable.

7.6.3. Suggestions for improvement

Non applicable.

7.6.4. Decision

Non applicable.

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

7.7.1. Findings

The Service of Participation and University Integration (SPIU) is responsible for policies related to incorporation and integration of students with special needs.

Most FVL facilities allow access to students with reduced mobility. One student residence on Campus Terra is adapted for students with physical disabilities and visits to extramural practices can be carried out using adapted vehicles if necessary.

The SPIU also includes technical resources and personnel who advise and assist in the curriculum adaptation and provide information about specific scholarships, volunteer programmes and labour insertion. Thus far, major adaptations have not been needed.

7.7.2. Comments

None.

7.7.3. Suggestions for improvement

None.

7.7.4. Decision

The Establishment is compliant with sub-standard 7.7.

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

#### 7.8.1. Findings

The Resolution of June 13<sup>th</sup> of 2011 (DOG, 17<sup>th</sup> July 2012) and the Resolution of December 3<sup>rd</sup> of 2014 (DOG, 10<sup>th</sup> December 2014) regulate student continuance and the number of examination periods for each subject.

Control systems include the Semester Coordination Working Group (GTCS) and the QCC that continuously monitor the programme. The development of the Degree is monitored yearly to detect any incident and determination of how to correct the error. At the end of each semester, GTCS analyses how the syllabus has been fulfilled and if the specific competences have been acquired. A special follow-up of the Day One Skills is carried out as well. Once the first semester assessment has been completed, the USC's Quality Office sends the FVL a list of students who did not pass any subject to carry out the corrective measures.

For students who need learning assistance, tutorial sessions by Professors are a way to offer them direct personalised help. They offer orientation and advice on all teaching aspects which may improve the learning process but there is no systematic training for this. The Vice Dean of Students has been responsible for this action for students in the first semester and has conducted individual interviews with students having difficulties to pass the subjects. The University also makes annually an official announcement for students to request extra tutorial help at the late stage of their studies. It is meant to help students who have less than 18 ECTS or three subjects (excluding TFG, Hospital Rotation and EPTs) left and have used at least two exam periods in each, to overcome the subjects they have special difficulties in. However, students do not commonly take advantage of this extra tutorial help (only one student in the 2016/2017 academic year).

The new Degree has been gradually introduced since 2010/2011; until 2013/2014 both curricula coexisted. Since 2014/2015 only students in the new curriculum received teaching but those studying according to the old curriculum have been allowed to take exams of the pending subjects to be able to finish their studies. There was a two-year transition period and students of the old curriculum were able to change to the new one. In 2016/2017, there were 218 registered students on year 5 compared to 106 on year 1 and 114 on year 4, and based on the numbers for later academic years presented on site the same trend continues.

#### 7.8.2. Comments

There is a high number of students accumulated in the fifth year of the programme and the same trend continues even though the FVL had expected this to be only a temporary phenomenon. Guidelines for termination of studies are not clear.

There is evidence that the tutorial sessions have been helpful for first-year students, but for the later years there is no clear picture of dropouts or the causes of delay in completing the studies. However, veterinary students throughout the world have been reported to suffer of problems such as stress, lack of motivation and procrastination, and this is likely to be the case also in the FVL. The Professors do not receive any specific training for tutorial sessions as the students are expected to be only in need of methodological advice. There are no counselling psychologists available.

7.8.3. Suggestions for improvement

It is strongly suggested to the Establishment to clarify the reasons behind the accumulation of students in the fifth year and tailor support mechanisms accordingly. The guidelines for termination of studies should be clarified.

7.8.4. Decision

The Establishment is partially compliant with sub-standard 7.8, because of the unexplained accumulation of students in the fifth year.

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

7.9.1. Findings

The dropout for students who abandon the programme during the first-year ranges between 4.85 and 7.84, and the dropout, which takes students who drop out later into account, has a mean of 7.46. Both numbers are below the USC average and place the Veterinary Degree among the five with the lowest dropout rate. The FVL has not considered them so alarming that special measures beyond the advice and guidance offered during the first term would have been needed. The reasons for attrition include transfer to other veterinary schools closer to home, non-adequate study habits and poor time management skills, degree not meeting their expectations, and cutbacks in scholarships. These reasons have been clarified for the first-year students through the direct contacts between academics (especially the Vice Dean of Students) and students.

7.9.2. Comments

The need of students for support during later years of studies has not been clarified.

7.9.3. Suggestions for improvement

Consider systematic monitoring of students' progression and needs for support throughout the programme (see 7.8.).

7.9.4. Decision

The Establishment is compliant with sub-standard 7.9.

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

7.10.1. Findings

The information regarding criteria for progression can be accessed through the webpages of USC and its Information Office. Academic failure may be a cause of student non-continuance, though the non-payment of taxes or a disciplinary sanction may also result in the loss of student status.

7.10.2. Comments

None.

7.10.3. Suggestions for improvement

None.

7.10.4. Decision

The Establishment is compliant with sub-standard 7.10.

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

7.11.1. Findings

Unsuccessful applicants and those who disagree with their marks can appeal to the examining board of the CIUG.

The students' ways to appeal against decisions include USC Office of Analysis of Complaints, USC Ombudsman, FVL website and the GTCS meetings. The UCS Office of Analysis of Complaints channels and responds to complaints and suggestions for improvement made by students in relation to the functioning of teaching, administrative and support services of the USC. Its results are collected in an annual report that is presented to the university community. The USC General Secretary Office ensures that proposals for improvement be sent to the entities involved in their implementation.

7.11.2. Comments

None.

7.11.3. Suggestions for improvement

None.

7.11.4. Decision

The Establishment is compliant with sub-standard 7.11.

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

7.12.1. Findings

Remediation and support strategies for students who do not perform adequately include tutorial sessions by teachers to provide direct personalised help for learning assistance. All academic staff have specific office hours (it is mandatory to have a minimum of 6 hours/week).

USC provides students with insurance that covers students under 28 years against school accidents, illness or family misfortune, granting them medical, pharmaceutical and economic benefits. Older students pay a fee for the insurance. A health, accident and liability insurance policy is included in the registration fees. Medical care in Spain is provided by public sanitary services.

The university ID card allows the student access to various services (e.g. book loan, university facilities, car parks, discounts in cultural or commercial activities). Student Virtual Secretariat provides administrative procedures (e.g. registration, modification of enrolment, academic transcripts) and USC Office of Student Aid and Services centralises e.g. the management of scholarships, grants and requests from the university residences. USC International Relations

Office is responsible for national and international mobility programmes.

USC Participation and Integration Service coordinates the offer of voluntary activities and social participation, promotes respect for diversity, incorporates and integrates students with special needs and promotes equality in the university community. USC Sports Office plans and manages sports activities and facilities and the USC Area of Culture offers numerous and varied cultural activities inside and outside the university. USC Modern Languages Centre offers courses and promotes the learning of languages. USC Office of Gender Equality seeks to achieve equality by assuming the principles of dignity, equality and gender equity, and USC Sustainable Development Plan encourages student collaboration through fellowships.

Two offices manage and offer various activities focused on the search for employment or the realisation of courses and training programmes. Each year the FVL organizes several meetings and briefings on career guidance and job opportunities, in which the participating professionals bring their experience and advice.

7.12.2. Comments

No other comments than those presented in 7.8.

7.12.3. Suggestions for improvement

None.

7.12.4. Decision

The Establishment is compliant with sub-standard 7.12.

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

7.13.1. Findings

The USC Ombudsman is responsible for defending and protecting the rights of university students and for ensuring that they fulfil their obligations. He/she can be approached directly by email. The Ombudsman also acts as a mediator and conciliator when required by any member of the university community. The Dean's Executive Board tries to solve minor conflicts on a day-to-day basis.

7.13.2. Comments

None.

7.13.3. Suggestions for improvement

None.

7.13.4. Decision

The Establishment is compliant with sub-standard 7.13.

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

7.14.1. Findings

The GTCS meetings offer the students a platform to transmit their complaints and suggestions. Student representatives and teachers acting as semester coordinators serve as contact persons for students' questions and concerns. Students appeared satisfied with this system. FVL website also provides a link *Incidents and suggestions or claims* that any member can use. Once

received, the Dean's Executive Board is responsible for analysis, resolving and informing the related entity.

7.14.2. Comments

None.

7.14.3. Suggestions for improvement

None.

7.14.4. Decision

The Establishment is compliant with sub-standard 7.14.

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

7.15.1. Findings

Students have the opportunity to send suggestions, comments and complaints regarding compliance of the Faculty with the ESEVT standards on the webpage. This link was implemented at the time of writing the SER but no responses had been received by the on-site Visitation. Students can also use the routine feedback mechanisms for this purpose.

7.15.2. Comments

None.

7.15.3. Suggestions for improvement

None.

7.15.4. Decision

The Establishment is compliant with sub-standard 7.15.

## **Standard 8: Student assessment**

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

8.1.1. Findings

The process for assessment of learning is regulated according to the PC-11 process of the SGIC extensive manual which establishes how to evaluate the achievement of the objectives and the acquisition of the competences by the students. The objective is to guarantee objectivity and equity in assessment.

The Resolution of June 15<sup>th</sup>, 2011 (DOG 21<sup>st</sup> July 2011) regulates the assessment of students' academic performance and the revision of USC marks. The Resolution establishes that the calendar must prevent the students from taking more than one exam of subjects from the same term within 24 hours. The FVL must decide on the procedure to guarantee the right of the students to take official exams of subjects corresponding to different terms. The Resolution of

June 13<sup>th</sup> 2011 (DOG of 17<sup>th</sup> July 2012) regulates student continuity (number of exam opportunities).

The assessment system has been approved by the ACSUG in 2017.

#### 8.1.2. Comments

None.

#### 8.1.3. Suggestions for improvement

None.

#### 8.1.4. Decision

The Establishment is compliant with the sub-standard 8.1.

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

#### 8.2.1. Findings

As a general reference, continuous assessment activities have a weight of not less than 20% of the grade and the final evaluation activities do not exceed 80%. Most subjects combine continuous assessment of the student's day-to-day activity based on different methodologies, together with a written exam.

The assessment methodology, including the method and grading scale, are available on the website and on the Virtual Classroom of every subject. Thus, students can predict the consequences of their performance and control the result of their evaluation.

The transparency of the assessment criteria and procedures is guaranteed by the Resolution of June 15<sup>th</sup>, 2011 (DOG 21<sup>st</sup> July 2011), amended by the Resolution of April 5<sup>th</sup>, 2017 (DOG 8<sup>th</sup> May 2017), which regulates the assessment of students' academic performance and the revision of the grading system of the USC. These Resolutions indicate that the syllabus of each subject must describe the aspects to be assessed, the criteria and the methodology, as well as the grading system for the final mark. Both Resolutions also establish that the schedules, dates of exams and subject programmes must be published before the 30<sup>th</sup> of May or the beginning of the enrolment period for the next academic year. The complete exam calendar is available on the website well before the beginning of the academic year. The publication of exam results should be communicated to students within a reasonable time (at most 15 days after examination) together with the dates for exam revision.

The process of awarding grades is officially regulated by the USC academic standards (Resolution June 22<sup>nd</sup>, 2007 by which the academic management rules are modified; DOG 2<sup>nd</sup> August 2007). Grades must be expressed as numbers with qualitative grades (Failing 0-4.9, Passing Grade 5-6.9, Grade B 7-8.9, Distinction 9-10). The award of Excellent can be awarded to those students with a grade equal or higher than 9.0 but national norms dictate that these distinctions cannot exceed 5% of the number of students enrolled in subjects (unless there are fewer than 20 students enrolled).

Two actions have been included in the 2014-2018 Strategic Plan regarding this standard: 1) improvement of the level of the specification of the assessment criteria and the grading of different elements of evaluation in the syllabi of subjects; 2) improvement of the procedure for

preparing the exam and classroom calendar.

#### 8.2.2. Comments

There are no rubrics describing the definition of grades.

#### 8.2.3. Suggestions for improvement

It is suggested to the Establishment to continue the improvement of the level of specification of the assessment criteria and the grading of different elements.

#### 8.2.4. Decision

The Establishment is compliant with the sub-standard 8.2.

### **8.3. Requirements to pass must be explicit.**

#### 8.3.1. Findings

The requirements to pass are described in the syllabus of each subject and include also the continuous assessment. The cut-off score is 5 (out of 10). Both the students and teachers interviewed on site affirmed that the requirements to pass the subjects are found clear.

#### 8.3.2. Comments

There are generally no defined criteria for passing the continuous assessments nor for the passing score 5/10 and thus, they remain subjective to some extent. The pre-defined criteria for scores is one of the activities that have been planned to continue during the next strategic period.

#### 8.3.3. Suggestions for improvement

It is suggested to the Establishment to confirm that the definition of scores and continuous assessment criteria are included in the next strategic plan.

#### 8.3.4. Decision

The Establishment is compliant with sub-standard 8.3.

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

#### 8.4.1. Findings

If a student does not agree with a final exam revision outcome, he/she can appeal the grade to the Dean. Non-admission by the Dean must be sufficiently justified and can be further appealed to the Rector. If the claim is accepted for hearing, the Dean will notify the professor responsible for the initial marking of the exam, and in the view of his/her response the Dean makes the decision. In case of dismissal of the claim, the student can again appeal to the Rector. If the Dean accepts the claim, it will be proceeded to a commission including the Dean, three professors and one student. This procedure is described in detail in the SGIC (Chapter 7, PC-10). It is in accordance with the Resolution of June 15<sup>th</sup> 2011 (DOG 21<sup>st</sup> July 2011) and the Student Statutes (Spanish Royal Decree 1791/2010, 30<sup>th</sup> December).

#### 8.4.2. Comments

None.

#### 8.4.3. Suggestions for improvement

None.

#### 8.4.4. Decision

The Establishment is compliant with sub-standard 8.4.

### **8.5. The Establishment must have a process in place to review assessment outcomes and to change assessment strategies when required.**

#### 8.5.1. Findings

The syllabi of all subjects are annually reviewed by the academic staff in charge and approved for the next academic year both by the Department Council and by the CTCS before being addressed to the Faculty Council. The Faculty Council approves the timing of assessment, methodology and grading criteria, and schedules exams with the consensus of student representatives. This process is transparent.

The procedure for reviewing assessment outcomes and changing assessment strategies when required complies with the curriculum. The subject coordinators together with other responsible teachers update the criteria and the assessment system in the assigned subjects. The modifications are taken to the Department Council for approval. Afterwards, the Vice Dean of Academic Coordination contacts all semester coordinators to start a process to check that the syllabus complies with the curriculum (including the assessment strategy). The syllabi are reviewed by the QCC and are finally approved by the Faculty Council and published on the website.

Subject Coordinators and the Semester Coordinator are responsible for verifying how professors apply the assessment system. When deviations are detected, they will inform the professor in charge and will communicate it to the QCC which monitors the incidence in the following evaluations to ensure compliance with the assessment system. The procedure is described in the extended SGIC manual, Chapter 7, PC-11.

The FVL is working on the ACSUG's recommendation: to monitor the subjects with lower success and performance rates and to initiate actions to raise these rates.

#### 8.5.2. Comments

The failure rates and distribution of grades of individual examinations are not monitored.

#### 8.5.3. Suggestions for improvement

It is suggested to the Establishment to continue the work on the ACSUG's recommendation.

#### 8.5.4. Decision

The Establishment is compliant with sub-standard 8.5.

### **8.6. Programme learning outcomes covering the full range of professional knowledge, skills, competences and attributes must form the basis for assessment design and underpin decisions on progression.**

#### 8.6.1. Findings

Assessment of theoretical knowledge is based mainly on written exams, which include multiple choice questions, short answer questions and/or essays. Theoretical knowledge is also evaluated through continuous assessment and evaluation of supervised work.

Pre-clinical practical skills are primarily evaluated through continuous assessment based on written reports, supervised work and oral exams. They may be performed on healthy animals, organs, cadavers or in the laboratory. As a general rule, attendance and a positive evaluation of practical skills are mandatory.

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The EPT period is assessed based on a placement report and during the hospital rotation students have to complete a personal logbook in which their tutors certify the completion of scheduled activities. In case the student is not able to successfully complete the scheduled activities during the EPT period, he/she must repeat the EPT in a different location.

The Resolution of June 13<sup>th</sup> of 2011 (DOG, 17<sup>th</sup> July 2012) regulates student continuance. The enrolled students must have a maximum of four ordinary official examination periods for each subject, with two evaluation opportunities per year. One waiver without cause will be admitted for each subject and in case of *force majeure* the student can request for that exam period not to count in the total. In the fourth one, the students who attended the previous exam period may request to be assessed by a committee. The Resolution of December 3<sup>rd</sup> of 2014 (DOG, 10<sup>th</sup> December 2014) established the special circumstances for which a student may ask the Rector for permission to be allowed to have a fifth final retake exam period.

New students must pass at least one subject during their first year. Otherwise, they can enrol again but must pass a minimum of first year 30 ECTS if full time and 15 ECTS if part time to be able to continue in the programme. For enrolment to hospital rotation, EPT and TFG, the student must have passed a minimum of 75% ECTS. The TFG cannot be defended until all the subjects of the Degree have been passed.

### 8.6.2. Comments

None.

### 8.6.3. Suggestions for improvement

None.

### 8.6.4. Decision

The Establishment is compliant with sub-standard 8.6.

## **8.7. Students must receive timely feedback on their assessments.**

### 8.7.1. Findings

In accordance with the Resolution of June 15<sup>th</sup>, 2011 (DOG 21<sup>st</sup> July 2011) exam revision should work as a useful tool for students to know their level of knowledge and weaknesses. The review period takes place no later than 10 days after marks are posted and the exam revision can be individual or in small groups depending on the teacher's preferences or students' demand. Students always get access to their corrected exams and, if applicable, to a correction template. The continuous assessment allows feedback for learning. All students that the team met on site appeared satisfied with the level of feedback they receive.

### 8.7.2. Comments

None.

### 8.7.3. Suggestions for improvement

None.

### 8.7.4. Decision

The Establishment is compliant with sub-standard 8.7.

## **8.8. Assessment strategies must allow the Establishment to certify student achievement of learning objectives at the level of the programme and individual units of study.**

#### 8.8.1. Findings

The curriculum has been designed on the basis that all the competences are addressed by the different subjects. Day One Skills are assessed during the Degree programme where they are developed.

At present, work is being done to create a signature portfolio for the evaluation of competencies (like the logbook in hospital rotation). Professors are encouraged to participate in workshops “Assessment based on competences” and present improvement actions. Additionally, the FVL is working on the ACSUG’s recommendation: carry out a continuous analysis on the acquisition of competences and the obtention of learning results in different subjects.

#### 8.8.2. Comments

None.

#### 8.8.3. Suggestions for improvement

It is suggested to the Establishment to continue the work on the ACSUG’s recommendation.

#### 8.8.4. Decision

The Establishment is compliant with sub-standard 8.8.

**8.9. Methods of formative and summative assessment must be valid and reliable and comprise a variety of approaches. Direct assessment of clinical skills and Day One Competences (some of which may be on simulated patients), must form a significant component of the overall process of assessment. It must also include the quality control of the students logbooks in order to ensure that all clinical procedures, practical and hands-on training planned in the study programme have been fully completed by each individual student.**

#### 8.9.1. Findings

The curriculum defines general evaluation criteria for all subjects so that the assessment of each student will be done through continuous evaluation and final exams. Both formative and summative methods, using a variety of approaches, are used.

Assessment of the hospital rotation is based on a logbook together with a final practice report. Assessment of clinical and non-clinical EPT is based on practical training reports submitted at the end of the placements, together with the report of the professional tutor. The TFG is assessed by a specific examination committee on the basis of the quality of the documentation submitted by the student, the defence of the work and the tutor report. The details of the reports and the grading of subjects are described in the syllabus.

#### 8.9.2. Comments

Students’ logbooks ensure that the student has completed the defined training, but the quality control of the logbooks appears somewhat mechanical. Taking into account the deficiencies in the animal species in Standards 3 and 5 as well as the individual variation in students’ clinical training, there is an evident risk that not all clinical competences are fulfilled. Confirming the attainment of clinical Day One Competences would require, in addition to the already used logbook and practice reports, direct assessment of the skills. Simulated patients and models could be used to complement the assessment.

#### 8.9.3. Suggestions for improvement

Summative assessment of clinical skills using pre-defined criteria using methods such as OSCE

(Objective Structured Clinical Examination) should be included in the curriculum.

#### 8.9.4. Decision

The Establishment is partially compliant with sub-standard 8.9, because of sub-optimal assessment of Day One Competences.

### **Standard 9: Academic and support staff**

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

#### 9.1.1. Findings

It is expected that greater than 2/3 of the instruction that the students receive, as determined by student teaching hours, is delivered by qualified veterinarians.

By law, in Spain, all university teachers involved in the different subjects must be accredited either by a national or regional quality agency (ENQA members), in the corresponding subject areas. This is done by considering their teaching and research activities. Only after obtaining the accreditation, is it possible to attain a teaching position in any of the different categories. At the FVL all members of the academic staff meet the legal requisites which guarantee that they comply with the national and EU regulations, and hence are appropriately qualified and prepared for their role in any particular subject.

In relation to the ongoing-learning process for the teaching staff, the USC has a consolidated formal training programme which has been in place for many years called the Innovation Programme for Training and Teaching (PFID). PFID offers structured training in the following pillars:

- Information and communication technologies applied to teaching;
- Teaching-learning strategies;
- Assessment;
- Tutoring and guidance;
- Professional development: research, management, languages.

PFID also promotes the recognition of training activities aimed at improving innovation and teaching practices that academic staff carry out in the Centres and Departments (<http://www.usc.es/es/servizos/pfid/>). Staff were generally satisfied with this provision.

#### 9.1.2. Comments

The Establishment (or the veterinary hospital) must do all it can to increase the numbers of specialist clinical staff to both assist in the expansion of the hospital caseload but also establish externally accredited (e.g. European Board of Veterinary Specialisation, EBVS) residency programmes in the common clinical disciplines.

#### 9.1.3. Suggestions for improvement

Make the recruitment of specialist clinical staff a priority goal for the Establishment.

#### 9.1.4. Decision

The Establishment is compliant with sub-standard 9.1.

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

#### 9.2.1. Findings

In recent years, due to the economic situation in Europe in general, and in Spain in particular, the Government decided to decrease recruitment in the public sector including Universities, with only one in ten retiring staff being replaced. This has caused the average age of FVL academic staff to increase (the average age is now over 50).

The needs of academic staff are established based on the number of students, ECTS, and type of practical teaching of each area of knowledge or subject, so that it guarantees adequate teaching in every study programme. As a rule, the different subjects are assigned to teachers with special training in that topic, although there are few boarded specialist clinical staff.

#### 9.2.2. Comments

The average age of academic staff is of great concern given that a generation of teachers has been lost. This situation must be swiftly rectified if the long-term viability of the teaching Establishment is to be maintained.

#### 9.2.3. Suggestions for improvement

Make the recruitment of younger staff a priority goal for the Establishment. Produce a strategic plan and an implementation plan to close the ‘generation gap’ that currently exists amongst the staff. Also restructure departments to make staff allocation more flexible and make it easier to achieve the Establishment’s long-term strategic goals.

#### 9.2.4. Decision

The Establishment is partially compliant with sub-standard 9.2, because of insufficient recruitment of junior staff and because of insufficient specialised academic staff in some key clinical disciplines.

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

#### 9.3.1. Findings

There is no formal training programme in Spain before the selection and recruitment of the academic staff. Anyone whose vocation is teaching and research, begins his or her academic career as a MA or PhD student. Once the selection process (see below) has been passed, new teachers who normally already have some academic experience are integrated in the subject teaching team. The professors help them in the preparation of classes and the assessment of students and will monitor their integration process. They are encouraged to take some of the different formation courses organized by the PFID. Subsequently, the opinion of students expressed in satisfaction surveys also helps to identify potential teaching training needs. In the case of permanent positions, a competitive examination is held, for which the candidates must previously have the required accreditation.

Satisfaction surveys made by students are an essential element for the assessment of the academic staff as part of the SGIC, as well as for the personal promotion programmes ACSUG. The surveys are conducted by the Area of Quality and Improvement of Procedures (ACMP), and their outcomes are transferred to all those involved. At the FVL level the reports are analysed by the Quality Control Committee to elaborate the annual monitoring report for this degree programme. Additionally, student representatives are part of the GTCS that monitors teaching activity.

#### 9.3.2. Comments

The satisfaction survey made by students is not functioning well due to poor response rates and must be improved. Specialist clinical staff must be recruited especially in critical areas such as equine clinical studies.

#### 9.3.3. Suggestions for improvement

A way needs to be found within the promotions system to recognise and reward clinical qualifications such as American and European Diplomas.

#### 9.3.4. Decision

The Establishment is compliant with sub-standard 9.3.

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

#### 9.4.1. Findings

Academic staff are required to hold a PhD. As for the balance between teaching, research and other activities, each academic position has a limited number of teaching hours in the academic year: 240 hours for tenured, and less for non-tenured or other teaching positions. The rest of the working time is devoted to research, clinical activity, self-training, continuing education or other services. The academic staff achieve a reduction in the number of teaching hours when they carry out other relevant activities in management positions or a particularly intense research activity.

#### 9.4.2. Comments

The balance of teaching and other activities seems to be accepted by staff, although like veterinary academic staff everywhere they feel under pressure to complete all that was asked of them. The positive attitude that all staff (academic and support) has towards teaching and student support is admirable and worthy of comment here.

#### 9.4.3. Suggestions for improvement

Consider whether staff holding EBVS (or American) Diplomas and with a research track record also need a PhD. Perhaps find a way to recruit specialist clinical staff into the hospital (HVURC), even if they don't satisfy the strict requirements of the USC.

#### 9.4.4. Decision

The Establishment is compliant with sub-standard 9.4.

**9.5. The Establishment must provide evidence that it utilises a well-defined, comprehensive and publicised programme for the professional growth and development of academic and support staff, including formal appraisal and informal mentoring**

**procedures. Staff must have the opportunity to contribute to the Establishment's direction and decision making processes.**

9.5.1. Findings

The professional progression of the academic and support staff is regulated by national and regional laws, which are public and guarantee equal opportunities for everyone.

9.5.2. Comments

Staff are happy that the appraisal process and mentoring are fair and transparent, and meet their needs.

9.5.3. Suggestions for improvement

There should be greater participation on the part of the Faculty or Departments in the recruitment of the support staff to guarantee a good match to the profile required. It is unacceptable that the Departments are not able to recruit these staff.

9.5.4. Decision

The Establishment is compliant with sub-standard 9.5.

**9.6. Promotion criteria for academic and support staff must be clear and explicit. Promotions for teaching staff must recognise excellence in, and (if permitted by the national or university law) place equal emphasis on all aspects of teaching (including clinical teaching), research, service and other scholarly activities.**

9.6.1. Findings

The hired non-permanent academic staff have the possibility to access a permanent position through an examination process (public, open access, and with the participation of an examining board), once they have obtained the specific accreditation by ANECA or the ACSUG for any of the above-mentioned permanent positions. Similarly, permanent staff can be promoted in their teaching career through the same type of examinations, once they get the corresponding accreditation from ANECA. The whole promotion process is developed according to strict rules published by the Spanish Government. Concerning the staff belonging to HVURC, this institution has the capacity to contract clinical, support and administrative staff who are paid out of its own budget (see also 9.4.3). In addition, the HVURC budget includes specific assignments to run internship programmes for Veterinary Graduates. The selection process for these posts depends directly on the HVURC Executive Board in accordance with objective criteria.

9.6.2. Comments

Staff seems happy that the promotions process is transparent and fair.

9.6.3. Suggestions for improvement

Serious consideration should be given to HVURC employing clinical specialists (Diplomates) if they cannot be employed and adequately rewarded within the University (FVL). This might allow clinical specialists (sometimes without a PhD) to be employed to increase the hospital caseload, further enhance student teaching and deliver against ambitious targets in the hospital.

9.6.4. Decision

The Establishment is compliant with sub-standard 9.6.

## **Standard 10: Research programmes, continuing and postgraduate education**

### **10.1. The Establishment must demonstrate significant and broad research activities of staff that integrate with and strengthen the veterinary degree programme through research-based teaching.**

#### 10.1.1. Findings

In FVL there are 15 main research groups with 140 members, 38 PhD students and 19 support staff. The activities developed by these research groups are focused on improving the animal and human quality of life under the "One Health" perspective with the development of novel strategies for diagnosis and therapeutics, innovative biotechnological products, sustainable production systems and safe animal products of high quality. Research is supported by good laboratory facilities dedicated to basic and clinical research, central research facilities allocated to multidisciplinary use, specialized core service laboratory facilities, and animal housing facilities.

#### 10.1.2. Comments

FVL shows a good degree of research activities, in some cases remarkable, with a general attitude for research-based teaching. Noteworthy is the recent HR Excellence in Research award, which contributes to certify the strategy programme of the Faculty towards a search for excellence.

#### 10.1.3. Suggestions for improvement

It is always important to support a faculty policy which encourages any initiative aimed at improving the internationalisation of scientific collaboration, also through the exchange of researchers and students.

#### 10.1.4. Decision

The Establishment is compliant with sub-standard 10.1.

### **10.2. All students must be trained in scientific method and research techniques relevant to evidence-based veterinary medicine.**

#### 10.2.1. Findings

In FVL there are several mandatory courses of study from the first year in basic and preclinical sciences, organised with the specific aim of introducing students to the scientific method in order to make them familiar with an attainment based on observation, deductive thinking, experimentation and analysis of results. This series of activities is meant to be a preparation for the Evidence Based Medicine before the clinical activity begins. This mission in education has been carried out through: 1) Direct information from the teacher; 2) Use of EBM to study clinical cases in supervised self-learning; 3) Graduation Thesis; 4) The Central Library.

#### 10.2.2. Comments

The number of courses that are organised according to this method is still limited (i.e. Veterinary Genetics, Pharmacology, Anatomy, Pathology) but it is a good start which should be extended to most of the other courses, including those related to clinical subjects.

#### 10.2.3. Suggestions for improvement

In order to increase the impact and the enrolment in the proposed elective course in "Drafting, writing, and presenting scientific papers", a possible reallocation in the first semesters maybe considered, also with a modification of the delivered content so that it is more focused on the

introduction of scientific methods in veterinary science. A strong boost to complete all the teachings using the Evidence Based Medicine strategy is strongly suggested.

#### 10.2.4. Decision

The Establishment is compliant with sub-standard 10.2.

### **10.3. All students must have opportunities to participate in research programmes.**

#### 10.3.1. Findings

FVL allows its undergraduate students to participate actively in the research activities, in particular through the evaluation of a Graduation Thesis which has often been carried out as an experimental thesis at the end of the degree course. There is a merit-critique evaluation of the best experimental thesis of the year.

#### 10.3.2. Comments

FVL offers various solutions for integrating a scientific approach into the students' educational activities. Some students are also included through scholarships in research projects conducted within the Faculty. The number of scholarships is perhaps limited, and not all the scientific areas are involved in this worthy process. An award for the best graduation thesis is given each year. Some research groups within the FLV permanently offer opportunities for students to participate in research activities.

#### 10.3.3. Suggestions for improvement

No suggestions are offered other than to keep supporting the initiatives presented and to formalise them according to public recognition.

#### 10.3.4. Decision

The Establishment is compliant with sub-standard 10.3.

### **10.4. The Establishment must provide advanced postgraduate degree programmes, e.g. PhD, internships, residencies and continuing education programmes that complement and strengthen the veterinary degree programme and are relevant to the needs of the profession and society.**

#### 10.4.1. Findings

There are two planned residency training programmes (Aquatic animal health and Animal welfare and behaviour) which have been approved, and some postgraduates collaborate in the practical training of undergraduate students in different subjects during the degree. The number of internships is 10. In relation to the postgraduate programmes of the USC, only the MS degrees depend on FVL; PhD programmes are the responsibility of the International Centre for Advanced Doctorate Studies, while different agents (faculties, companies, HVURC, etc.) participate in the continuing education courses.

There are two PhD degree programmes fully developed by FVL academic staff: Basic Research Applied to Veterinary Science and Veterinary Medicine and Health but the FVL academic staff and students also participate in other PhD programmes in the veterinary, biomedical and biological research fields. A new MS in Genomic and Genetics started in 2018-19 and provides an innovative formative offer. The candidates for these positions are selected based on their *Curriculum Vitae*. The International Centre for Advanced Doctorate Studies (CIEDUS) by means of its four doctorate schools oversees the organisation, planning, management, supervision and monitoring of all the doctoral activities offered at the university.

#### 10.4.2. Comments

It appears that the control of the doctorate programme depends mostly on the central management of the University of Santiago which makes it difficult to plan improvements in the programme formation. Scholarships are determined by the University and the main core of the regulation depends on the central control.

Continuing Education programmes and the opportunities for the different categories of teaching and support staff are satisfactory. The two residency programmes and the science education activities are interesting but considered insufficient.

#### 10.4.3. Suggestions for improvement

It is necessary to increase the number of residency programmes in most of the clinical subjects. The two planned residencies are considered insufficient and all efforts are necessary for the implementation of the programmes from both an economic and scientific point of view.

Further, the improvement of the doctorate programme has to be taken into consideration because at present it suffers from the partial autonomy of its organisation, which prevents the continuing education in scientific research. Activities which may support the educational goal in the PhD programme should be supported, for example an official calendar of journal club or seminars held by the teachers or the doctoral students themselves. Furthermore, Research PhD programme policy should be focused on the effort to improve international collaboration and student mobility.

#### 10.4.4. Decision

The Establishment is partially compliant with sub-standard 10.4. because of the absence of residency programmes in most common clinical disciplines.

## **Standard 11: Outcome Assessment and Quality Assurance**

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

#### 11.1.1. Findings

The SGC framework for the USC (approved 2009) was designed following the model of both national and regional QA agencies. It is articulated in 5 main points with 9 criteria and 46 guidelines according to the general operating programme named FIDES-AUDIT. The adaptation of the general SGC framework by the FVL was approved by both the USC and the ACSUG in 2011; amendments have been introduced almost annually in order to achieve greater simplicity in its application.

The SGIC is put into practice through the QCC and the Faculty Council. The annual Quality Report compiled by the QCC contains information on e.g. the evolution and degree of compliance with the Establishment's strategic plan and with the improvement plan from the previous year (quality objectives and monitoring of improvement actions), and the annual improvement plan proposal. The University Governing Council Committee of Quality and Planning evaluates and eventually approves the Quality Report.

The FVL has written assessment procedures for QA to guide the different processes to make them consistent, reliable, fair and valid. The extended manual of the SGIC of the FVL included processes and procedures which identify the responsibilities and participation of the

stakeholders. The procedures are hosted on the ACMP website and the surveys that are used for continuous improvement are conducted by this central service with the ATIC support. Currently there are 9 different satisfaction surveys related to teaching activities.

The outcome assessment policy requires permanent monitoring and tuning activity. The FVL comments in the SER that internal stakeholders would perceive the benefits of SGIC better if processes were easier to understand, follow and implement, and had more direct results on a day-to-day basis. Many are seen as an extra task with too much paperwork and too little impact. Internal stakeholders do not always see the satisfaction surveys as essential tools for the process.

External stakeholders are present in the organisational structure of the FVL by means of USC Social Council and FRC Board. Additionally, the Establishment maintains a continuous interaction with professional colleges and associations and through tutors of EPT. FVL suggests in their SER that external stakeholders (Official College of Veterinarians, Public Administration, private and professional companies) should contribute to the Degree programme with a more global vision. In spite of the evident need, it is difficult to get the external advisory committee to formulate changes that need to be made since this means a great amount of work for the external stakeholders and it is often difficult to harmonise the agendas of all the members. The participation on this committee is absolutely altruistic as they receive no compensation.

#### 11.1.2. Comments

The FVL has an established system for QA and an ambition to continuous enhancement of quality. However, there are still challenges regarding the simplicity of the processes and involvement of the external stakeholders as the Establishment states in their SER. The response rates of the satisfaction surveys were not included in the SER but were provided when asked before the Visitation. These surveys are important e.g. for the assessment of academic staff and in their promotion. The response rates of satisfaction surveys have been very low in the recent academic years shown and the Establishment has not taken any systematic actions to increase it.

#### 11.1.3. Suggestions for improvement

It is suggested to the Establishment to 1) find ways for the external stakeholders to participate in QA and 2) create new approaches to increase the survey response rates and closely monitor the impact of them.

#### 11.1.4. Decision

The Establishment is partially compliant with sub-standard 11.1, because of insufficient involvement of external stakeholders in Quality Assurance.

**11.2. The Establishment must have processes for the design and approval of their programmes. The programmes must be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme must be clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.**

#### 11.2.1. Findings

The specific conditions that must be included in the programmes, and the requirements for qualifications to practice as veterinarians are dictated by the Spanish Law. The Royal Decree 96/2014 has recognised the Veterinary Degree as equivalent to a Master's level (Spanish

Qualification Framework for Higher Education [MECES], level 3).

The curriculum describes the strategy followed to form a cohesive framework and achieve the learning outcomes that are summarized in the main objectives of the curriculum. Each subject has an evaluation system that guarantees that students have attained all the defined competencies. On an annual basis, syllabi are reviewed, discussed and finally approved by the Department Councils and lastly by the Faculty Council. The new curriculum was introduced during the academic term 2010/2011 and was verified by the Spanish Agency for Quality Assessment and Accreditation (ANECA) which is an ENQA member and approved by the Spanish Council of Universities in 2010.

11.2.2. Comments

None.

11.2.3. Suggestions for improvement

None.

11.2.4. Decision

The Establishment is compliant with sub-standard 11.2.

**11.3. The Establishment must ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.**

11.3.1. Findings

During recent years, new strategies have been introduced to make the students active thinkers and problem-solvers. With few exceptions, the subjects include different types of report writing as part of learning, while some of the preclinical and most of the clinical groups also use problem-based learning and case studies. Assessment of learning includes not only traditional theoretical exams but also a series of practical trials and verifications. The most common way to verify the active role of the students in the learning process is through assessment of hands-on work (continuous evaluation in some cases), demonstration of critical thinking and correct identification of problems related to diverse professional scenarios. Students get a mark accordingly. All the information regarding the assessment, including continuous evaluation is described in detail in the syllabi. Students become active participants in their training process through the feedback provided by the continuous assessment.

11.3.2. Comments

The structure of the clinical training does not allow the active participation of undergraduate students in the full investigation and follow-up of patients as stated in substandard 5.5.

11.3.3. Suggestions for improvement

None.

11.3.4. Decision

The Establishment is compliant with sub-standard 11.3.

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

#### 11.4.1. Findings

Access to the degree programmes in the Galician University System (SUG) falls within the competence of the Inter-University Commission of Galicia (CIUG), who publishes all the information, instructions and management associated with the process through a website (*Plantaforma Nerta*). This information is also available on the USC website.

The resolution of June 13<sup>th</sup> of 2011 (DOG, 17<sup>th</sup> July 2012) regulates student continuance. The enrolled students must have a maximum of four ordinary official examination periods for each subject, with two evaluation opportunities per year. One waiver without cause will be admitted for each subject and in case of *force majeure* the student can request for that exam period not to count in the total. In the fourth one, the students who attended the previous exam period may request to be assessed by a committee. The resolution of December 3<sup>rd</sup> of 2014 (DOG, 10<sup>th</sup> December 2014) established the special circumstances for which a student may ask the Rector for permission to be allowed to have a fifth final retake exam period.

All information regarding enrolment, policy for disabled students, progression etc. can be accessed through the USC website and especially the UCS Information Office webpage.

#### 11.4.2. Comments

There is accumulation of students in year 5. This issue is further discussed in substandard 11.10.

#### 11.4.3. Suggestions for improvement

It is suggested to the Establishment to clarify the reasons behind the accumulation of student in year 5 and revise the regulations regarding student progression in the late stage of studies if needed.

#### 11.4.4. Decision

The Establishment is compliant with sub-standard 11.4.

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

#### 11.5.1. Findings

By law, in Spain, all university teachers must be accredited either by a national or regional quality agency (ENQA members), in the corresponding subject areas by considering their teaching and research activities. Only after obtaining the accreditation, it is possible to apply for an academic position. At the FVL, all members of the academic staff meet the legal requisites.

There is no formal training programme in Spain before the selection and recruitment of the academic staff. The USC has a formal training programme “Innovation Programme for Training and Teaching” (PFID) that has been in place for many years and offers numerous short courses in the Lugo Campus. The programme allows teacher to acquire new strategies and improve teaching, research and management skills. Based on the interviews on site, the teaching staff finds the courses useful. Online courses are appreciated as they widen the opportunities for participation.

Satisfaction surveys made by students are an essential part of the assessment of the academic staff as part of the SGIC, as well as for the personal promotion programmes ACSUG. The surveys are conducted by the Area of Quality and Improvement of Procedures (ACMP) and their outcomes are transferred to all those involved. At the FVL level, the reports are analysed

by the QCC to elaborate the annual monitoring report for this degree programme.

There are certain requirements for each category of academic staff.

#### 11.5.2. Comments

The satisfaction surveys by students are a key element for assessment and promotion of academic staff and the low response rate is discussed in substandard 11.1.

#### 11.5.3. Suggestions for improvement

The suggestion for raising the response rate is given in 11.1.

#### 11.5.4. Decision

The Establishment is compliant with sub-standard 11.5.

### **11.6. The Establishment must have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided.**

#### 11.6.1. Findings

The overall financial protocol of the FVL is legally defined; public universities in Spain are under strict rules for their finances.

The University manages and pays directly the most important areas of expenditure. The Faculties and Departments receive annual funds from the USC in order to cover the operating costs and equipment specifically related to teaching, and some specific maintenance costs. This annual fund is used to implement the strategic plan and achieve ESEVT standards in those aspects that the general budget does not cover. In general, these funds are sufficient for the normal operation of the Faculty, considering that the HVURC has an independent financing process guaranteed by the participation of its official shareholders. Any expenditure that exceeds the ordinary budget must be requested extraordinarily from the USC central services office.

Individualised tutoring by teachers is used at the FVL to carry out orientation and support for the student during the learning period. The review of exams is an essential part of the educational process and the sharing point for feedback after the assessment; showing weaknesses and strengths helps to redirect the study strategy and its future performance.

#### 11.6.2. Comments

The deficiencies in learning and teaching activities and learning resources have already been discussed in Standards 3 and 5. No counselling psychologists or learning specialists are involved in the student support system as discussed in Standard 7.

#### 11.6.3. Suggestions for improvement

It is suggested to the Establishment to reconsider the use of the annual fund.

#### 11.6.4. Decision

The Establishment is compliant with sub-standard 11.6.

### **11.7. The Establishment must ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.**

#### 11.7.1. Findings

Annually, the FVL collects, analyses and uses information from several sources. This information includes e.g. the annual Monitoring report of the degree, analysis of the progress of the curriculum by means of the end-of-semester follow-up meetings (GTCS), direct input from students that participate in satisfaction surveys and from their representatives from the Faculty Council and all delegated committees, report on incidences and satisfaction surveys conducted by the ACMP, which are completed by students, academic and support staff, and external stakeholders including former alumni. All questionnaires, procedures and reports can be accessed on the USC website. The annual Monitoring Report of the degree uses data available from the central services of the USC about the results and performance indicators, as well as suggestions and satisfaction survey inputs coming from all groups of interest.

The QCC analyses the overall functioning of the SGIC in the FVL, and the results of the curriculum based on different sources. This analysis is compiled in the annual Quality Report that contains information on the Monitoring report of the degree together with the proposal of the corresponding improvement actions, the validity of the quality policy, the evolution and degree of compliance with the Establishment's strategic plan, the functioning and results of the different processes considered in the SGIC, the evolution and degree of compliance with the improvement plan from the previous year, the annual improvement plan proposal, which includes the quality objectives and the improvement actions planned for the following term and any potential changes in the processes to make the system. Every year the University Governing Council Committee of Quality and Planning evaluates and eventually approves the Quality Report.

#### 11.7.2. Comments

The work of the QCC appears very systematic and has both an annual cycle and strategic period cycle. The committee's way of documentation is worthy of praise. However, there appears to be a need to include also longstanding and gradually developing issues (that are not necessarily included in the indicators that are constantly monitored) on the agenda at certain points in order to include also them in the "quality loop", e.g. the Establishment has been aware of the low response rate to the satisfaction surveys for a long time, but no concrete actions have been initiated.

#### 11.7.3. Suggestions for improvement

It is suggested to the Establishment not to limit the perspective of the QA work in annual and strategic periods but widen the view to cover the activities in a wider sense.

#### 11.7.4. Decision

The Establishment is compliant with sub-standard 11.7.

### **11.8. The Establishment must publish information about their activities, including programmes, which is clear, accurate, objective, up-to date and readily accessible.**

#### 11.8.1. Findings

All information concerning QA and any other aspect regarding the Establishment and the curriculum is available and on public display on the website. The strategy and the policies of the FVL are developed according to the general guidelines established by the USC. The related information is accessible on the institutional website.

All information regarding the educational programme is available via the FVL website and/or the Virtual Campus of the different subjects. Any update or modification related to organisation

(annual schedule and academic planning) or contents (curriculum, syllabi) is published and, if applicable, also sent by email to the distribution lists of the different interest groups (teachers, administrative staff, students). Besides the end-of-semester follow-up reviews of the syllabi by the GTCS, there is an annual Monitoring report of the degree with its associated improvement actions. The webpage 'USC by the numbers' offers numerous statistical data on different aspects, among others, those related to students and the academic offer: educational programmes, enrolment, student profiles, entry and graduation results, mobility programmes, grants, etc.

The operational activities are communicated to the interest groups via informative screens, the electronic (website) and physical bulletin boards and/or by email: the minutes of the different committee meetings are stored in digital or paper format and are provided to the members of the interest groups upon request.

#### 11.8.2. Comments

Only the Galician version of the webpage contains all information.

#### 11.8.3. Suggestions for improvement

None.

#### 11.8.4. Decision

The Establishment is compliant with sub-standard 11.8.

**11.9. The Establishment must monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society. These reviews must lead to continuous improvement of the programme. Any action planned or taken as a result must be communicated to all those concerned.**

#### 11.9.1. Findings

The current Spanish legislation considers the veterinary profession as a regulated profession whose practice requires the obtention of the corresponding official degree. In that sense, the Royal Decree 1393/2007 modified by RD 861/2010, declares that the Ministry of Education and Science must specify the contents that have to be fulfilled by the curricula to obtain an official degree that allows a person the practice of regulated professions. The monitoring of the curriculum is carried out to ensure that the degree programme continues to be up-to-date and to guarantee the renewal of its accreditation (every 7 years as mandatory by law/ Royal Decree 967/14).

In that sense, the ECI/333/2008 Order establishes the requirements for the study plans leading to the Degree in Veterinary Medicine of the USC. The Degree obtained positive Verification from the Ministry of Education in 2010 to comply with the provisions of the above-mentioned Royal Decree. The whole curriculum, including the SGIC of the FVL was evaluated by ACSUG and its accreditation was renewed in 2017.

The QCC of the FVL is responsible for gathering all necessary information to promote any type of modification of the curriculum (substantial and non-substantial). The GCTS is an essential tool in the process of monitoring the degree, where students feel particularly involved.

The curriculum describes the strategy followed to form a cohesive framework and achieve the learning outcomes that are summarised in the main objectives of the curriculum. On an annual basis, syllabi are reviewed, discussed and finally approved by the Department Councils and lastly by the Faculty Council. At the end of each semester, the GTCS analyses how the syllabus

has been fulfilled and if the specific competences have been acquired. A special follow-up of the Day One Skills is carried out as well. The GTCS includes the Vice Dean for Academic Organisation and Students, Degree Coordinator, Semester Coordinators, Subject Coordinators, and 2 representatives of students of each course.

The curriculum is subject to continuous evaluation for which the QCC is responsible and in which the student body is represented. Every year the QCC receives input from different sources (GCTS, graduated students, EPT and hospital rotation tutors, students, administrative staff etc.), analyses the validity of the curriculum to compile the annual Monitoring Report and, if necessary, improvement actions are proposed to be applied during the next academic term. Among these improvement actions, training courses for teachers are organised every year. Administrative staff has its own formative programme stipulated by the Management of the USC.

As a consequence of this analysis, some minor modifications and improvements have been made: distribution of the competences and the hours dedicated to different training activities have been reorganized and 6 ECTS elective subject External Practical Training has been incorporated. The channel to any modification proposal is procedure PM-01 (SGIC, Chapter 5).

#### 11.9.2. Comments

The internal structures allow monitoring, reviewing and development of the programme. The perspectives of external stakeholders would be valuable in this cycle.

#### 11.9.3. Suggestions for improvement

The suggestion regarding external stakeholders is given in 11.1.

#### 11.9.4. Decision

The Establishment is compliant with sub-standard 11.9.

### **11.10. The Establishment must undergo external quality assurance in line with the ESG on a cyclical basis.**

#### 11.10.1. Findings

All public universities in Spain follow the unified procedures for QA evaluation established by the ANECA (Spanish QA Agency) and fully implemented by the ACSUG (Galician QA Agency). Both are full members of the ENQA and listed in the European Quality Assurance Register for Higher Education (EQAR). The accreditation of the curriculum and SGIC of the FVL was renewed in 2017, made by ACSUG, and is valid for a maximum of 7 years. The accreditation for the Veterinary Degree of the FVL was renewed by the ACSUG and the Spanish Council of Universities in 2017.

The previous EAEVE visitation was in 2008.

#### 11.10.2. Comments

None.

#### 11.10.3. Suggestions for improvement

None.

#### 11.10.4. Decision

The Establishment is compliant with sub-standard 11.10.

## 12. ESEVT Indicators

		ESEVT Indicators											
		A	B	C	D	E	F	G	H	I	J	K	L
1	<b>Name of the Establishment:</b>												
2	<b>Date of the form filling:</b>												
3	<b>Calculated Indicators from raw data</b>												
4													
							<b>Establishment</b>	<b>Median</b>	<b>Minimal</b>	<b>Balance<sup>3</sup></b>			
							<b>values</b>	<b>values<sup>1</sup></b>	<b>values<sup>2</sup></b>				
5	<b>I1</b>	n° of FTE academic staff involved in veterinary training / n° of undergraduate students					0,152	0,16	0,13	0,026			
6	<b>I2</b>	n° of FTE veterinarians involved in veterinary training / n° of students graduating annually					1,106	0,87	0,59	0,516			
7	<b>I3</b>	n° of FTE support staff involved in veterinary training / n° of students graduating annually					0,760	0,94	0,57	0,194			
8	<b>I4</b>	n° of hours of practical (non-clinical) training					850,500	905,67	595,00	255,500			
9	<b>I5</b>	n° of hours of clinical training					675,000	932,92	670,00	5,000			
10	<b>I6</b>	n° of hours of FSQ & VPH training					229,000	287,00	174,40	54,600			
11	<b>I7</b>	n° of hours of extra-mural practical training in FSQ & VPH					30,000	68,00	28,80	1,200			
12	<b>I8</b>	n° of companion animal patients seen intra-murally / n° of students graduating annually					89,165	70,48	42,01	47,156			
13	<b>I9</b>	n° of ruminant and pig patients seen intra-murally / n° of students graduating annually					0,622	2,69	0,46	0,159			
14	<b>I10</b>	n° of equine patients seen intra-murally / n° of students graduating annually					1,585	5,05	1,30	0,287			
15	<b>I11</b>	n° of rabbit, rodent, bird and exotic seen intra-murally / n° of students graduating annually					3,021	3,35	1,55	1,476			
16	<b>I12</b>	n° of companion animal patients seen extra-murally / n° of students graduating annually					0,011	6,80	0,22	-0,213			
17	<b>I13</b>	n° of individual ruminants and pig patients seen extra-murally / n° of students graduating annually					17,564	15,95	6,29	11,269			
18	<b>I14</b>	n° of equine patients seen extra-murally / n° of students graduating annually					1,351	2,11	0,60	0,756			
19	<b>I15</b>	n° of visits to ruminant and pig herds / n° of students graduating annually					12,388	1,33	0,55	11,841			
20	<b>I16</b>	n° of visits of poultry and farmed rabbit units / n° of students graduating annually					0,660	0,12	0,04	0,615			
21	<b>I17</b>	n° of companion animal necropsies / n° of students graduating annually					3,149	2,07	1,40	1,749			
22	<b>I18</b>	n° of ruminant and pig necropsies / n° of students graduating annually					2,011	2,32	0,97	1,040			
23	<b>I19</b>	n° of equine necropsies / n° of students graduating annually					0,043	0,30	0,09	-0,050			
24	<b>I20</b>	n° of rabbit, rodent, bird and exotic pet necropsies / n° of students graduating annually					3,394	2,05	0,69	2,701			
25	<b>I21*</b>	n° of FTE specialised veterinarians involved in veterinary training / n° of students graduating annually					0,319	0,20	0,06	0,256			
26	<b>I22*</b>	n° of PhD graduating annually / n° of students graduating annually					0,739	0,15	0,09	0,651			
27	1	Median values defined by data from Establishments with Approval status in April 2016											
28	2	Recommended minimal values calculated as the 20th percentile of data from Establishments with Approval status in April 2016											
29	3	A negative balance indicates that the Indicator is below the recommended minimal value											
30	*	Indicators used only for statistical purpose											

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

<b>Standard 1: Objectives and Organisation</b>	<b>C</b>	<b>PC</b>	<b>NC</b>
1.1. The Establishment must have as its main objective to provide, in agreement with the EU Directives and ESG recommendations, adequate, ethical, research-based, evidence-based veterinary training that enables the new graduate to perform as a veterinarian capable of entering all commonly recognised branches of the veterinary profession and to be aware of the importance of lifelong learning.	X		
1.2. The Establishment must develop and follow its mission statement which must embrace all the ESEVT standards.	X		
1.3. The Establishment must be part of a university or a higher education institution providing training recognised as being of an equivalent level and formally recognised as such in the respective country.	X		
1.4. The person responsible for the veterinary curriculum and the person(s) responsible for the professional, ethical, and academic affairs of the Veterinary Teaching Hospital (VTH) must hold a veterinary degree.	X		
1.5. The organisational structure must allow input not only from staff and students but also from external stakeholders.	X		
1.6. The finance report must have a strategic plan, which includes a SWOT analysis of its current activities, a list of objectives, and an operating plan with timeframe and indicators for its implementation.	X		
<b>Standard 2: Finances</b>			
2.1. Finances must be demonstrably adequate to sustain the requirements for the Establishment to meet its mission and to achieve its objectives for education, research and services.	X		
2.2. The finance report must include both expenditures and revenues and must separate personnel costs, operating costs, maintenance costs and equipment.	X		
2.3. Resources allocation must be regularly reviewed to ensure that available resources meet the requirements.	X		
2.4. Clinical and field services must function as instructional resources. Instructional integrity of these resources must take priority over financial self-sufficiency of clinical services operations. Clinics must be run as efficiently as possible.	X		
2.5. The Establishment must have sufficient autonomy in order to use the resources to implement its strategic plan and to meet the ESEVT Standards.		X	
<b>Standard 3: Curriculum</b>			
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.	X		
3.2. The learning outcomes for the programme must be explicitly articulated to form a cohesive framework.	X		
3.3. Programme learning outcomes must be communicated to staff and students and: -) underpin and ensure the effective alignment of all content, teaching, learning and assessment activities of the degree programme; -) form the basis for explicit statements of the objectives and learning outcomes of individual units of study; -) be regularly reviewed, managed and updated to ensure they remain relevant, adequate and are effectively achieved.	X		
3.4. The Establishment must have a formally constituted committee structure (which includes effective student representation), with clear and empowered reporting lines, to oversee and manage the curriculum and its delivery. The committee(s) must: -) determine the pedagogical basis, design, delivery methods and assessment methods of the curriculum, -) oversee QA of the curriculum, particularly gathering, evaluating, making change and responding to feedback from stakeholders, peer reviewers and external assessors, and data from examination/assessment outcomes, -) review the curriculum at least every seven years by involving staff, students and stakeholders, -) identify and meet training needs for all types of staff, maintaining and enhancing their competence for the on-going curriculum development.	X		
3.5. The curriculum must include the subjects (input) listed in Annex V of EU Directive 2005/36/EC and must allow the acquisition of the Day One Competences (output) (see Annex 2). This must concern all groups of subjects, i.e. Basic Sciences, Clinical Sciences, Animal Production, Food Safety and Quality, and Professional Knowledge.		X	X
3.6. External Practical Training (EPT) are training activities organised outside the Establishment, the student being under the direct supervision of a non-academic person (e.g. a practitioner). EPT cannot replace the core intramural training nor the extramural training under the close supervision of academic staff (e.g. ambulatory clinics, herds visits, practical training in FSQ).	X		
3.7. Since the veterinary degree is a professional qualification with Day One Competences, EPT must complement and strengthen the academic education by enhancing for the student the handling of all common domestic animals, the understanding of the economics and management of animal units and veterinary practices, the communication skills for all aspects of veterinary work, the hands-on practical and clinical training, the real-life experience, and the employability of the prospective graduate.	X		
3.8. The EPT providers must have an agreement with the Establishment and the student (in order to fix their respective rights and duties, including insurance matters), provide a standardised evaluation of the performance of the student during their EPT and be allowed to provide feedback to the Establishment on the EPT programme.	X		
3.9. There must be a member of the academic staff responsible for the overall supervision of the EPT, including liaison with EPT providers.	X		
3.10. Students must take responsibility for their own learning during EPT. This includes preparing properly before each placement, keeping a proper record of their experience during EPT by using a logbook provided by the Establishment and evaluating the EPT. Students must be allowed to complain officially or anonymously about issues occurring during EPT.	X		
<b>Standard 4: Facilities and equipment</b>			
4.1. All aspects of the physical facilities must provide an environment conducive to learning.	X		
4.2. The veterinary Establishment must have a clear strategy and programme for maintaining and upgrading its buildings and equipment.	X		

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4.3. Lecture theatres, teaching laboratories, tutorial rooms, clinical facilities and other teaching spaces must be adequate in number, size and equipped for the instructional purposes and must be well maintained. The facilities must be adapted for the number of students enrolled.	X		
4.4. Students must have ready access to adequate and sufficient study, self-learning, recreation, locker, sanitary and food services facilities.	X		
4.5. Offices, teaching preparation and research laboratories must be sufficient for the needs of the academic and support staff.	X		
4.6. Facilities must comply with all relevant legislation including health, safety, biosecurity and EU animal welfare and care standards.	X		
4.7. The Establishment's livestock facilities, animal housing, core clinical teaching facilities and equipment must: - ) be sufficient in capacity and adapted for the number of students enrolled in order to allow hands-on training for all students - ) be of a high standard, well maintained and fit for purpose - ) promote best husbandry, welfare and management practices - ) ensure relevant biosecurity and bio-containment - ) be designed to enhance learning.		X	
4.8. Core clinical teaching facilities must be provided in a VTH with 24/7 emergency services at least for companion animals and equines, where the Establishment can unequivocally demonstrate that standard of education and clinical research are compliant with all ESEVT Standards, e.g. research-based and evidence-based clinical training supervised by academic staff trained to teach and to assess, availability for staff and students of facilities and patients for performing clinical research and relevant QA procedures. For ruminants and pigs, on-call service must be available if emergency services do not exist for those species in a VTH. The Establishment must ensure state-of-the-art standards of teaching clinics which remain comparable with the best available in the private sector.	X		
4.9. The VTH and any hospitals, practices and facilities (including EPT) which are involved with the curriculum must meet the relevant national Practice Standards.	X		
4.10. All core teaching sites must provide dedicated learning spaces including adequate internet access.	X		
4.11. The Establishment must ensure students have access to a broad range of diagnostic and therapeutic facilities, including but not limited to: pharmacy, diagnostic imaging, anaesthesia, clinical pathology, intensive/critical care, surgeries and treatment facilities, ambulatory services and necropsy facilities.	X		
4.12. Operational policies and procedures (including biosecurity, good laboratory practice and good clinical practice) must be taught and posted for students, staff and visitors.	X		
4.13. Appropriate isolation facilities must be provided to meet the need for the isolation and containment of animals with communicable diseases. Such isolation facilities must be properly constructed, ventilated, maintained and operated to provide for animal care in accordance with updated methods for prevention of spread of infectious agents. They must be adapted to all animal types commonly handled in the VTH.	X		
4.14. The Establishment must have an ambulatory clinic for production animals or equivalent facilities so that students can practise field veterinary medicine and Herd Health Management under academic supervision.	X		
4.15. The transport of students, live animals, cadavers, materials from animal origin and other teaching materials must be done in agreement with national and EU standards, to ensure the safety of students and staff and to prevent the spread of infectious agents.	X		
<b>Standard 5: Animal resources and teaching material of animal origin</b>			
5.1. The number and variety of healthy and diseased animals, cadavers, and material of animal origin must be adequate for providing the practical training (in the area of Basic Sciences, Clinical Sciences, Pathology, Animal Production, Food Safety and Quality) and adapted to the number of students enrolled.		X	
5.2. It is essential that a diverse and sufficient number of surgical and medical cases in all common domestic animals and exotic pets be available for the students' clinical educational experience and hands-on training.		X	
5.3. In addition to the training provided in the Establishment, experience can include practical training at external sites, provided this training is organised under direct academic supervision and at the same standards as those applied in the Establishment.	X		
5.4. The VTH must provide nursing care skills and instruction in nursing procedures.	X		
5.5. Under all situations students must be active participants in the workup of patients, including physical diagnosis and diagnostic problem oriented decision making.		X	
5.6. Medical records must be comprehensive and maintained in an effective retrieval system (preferably an electronic patient record system) to efficiently support the teaching, research, and service programmes of the Establishment.	X		
<b>Standard 6: Learning resources</b>			
6.1. State-of-the-art learning resources must be available to support veterinary education, research, services and continuing education. Timely access to learning resources, whether through print, electronic media or other means, must be available to students and staff and, when appropriate, to stakeholders. State-of-the-art procedures for bibliographical search and for access to databases and learning resources must be taught to undergraduate students.	X		
6.2. Staff and students must have full access on site to an academic library, which is administered by a qualified librarian, an Information Technology (IT) unit, which is managed by an IT expert, an e-learning platform, and the relevant human and physical resources necessary for development by the staff and use by the students of instructional materials.	X		
6.3. The Establishment must provide students with unimpeded access to learning resources which include scientific and other relevant literature, internet and internal study resources, and equipment for the development of procedural skills (e.g. models). The use of these resources must be aligned with the pedagogical environment and learning outcomes within the programme, and have mechanisms in place to evaluate the teaching value of innovations in learning resources.	X		
6.4. The relevant electronic information, database and other intranet resources must be easily available for students and staff both in the Establishment's core facilities via wireless connection (Wi-Fi) and from outside the Establishment via Virtual Private Network (VPN).	X		
<b>Standard 7: Student admission, progression and welfare</b>			
7.1. The selection criteria for admission to the programme must be consistent with the mission of the Establishment. The number of students admitted must be consistent with the resources available at the Establishment for staff, buildings, equipment, healthy and diseased animals, and materials of animal origin.	X		

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7.2. In relation to enrolment, the Establishment must provide accurate information in all advertisements regarding the educational programme by providing clear and current information for prospective students. Further, printed catalogue and electronic information must state the purpose and goals of the programme, provide admission requirements, criteria and procedures, state degree requirements, present Establishment descriptions, clearly state information on tuition and fees along with procedures for withdrawal, give necessary information for financial aid programmes, and provide an accurate academic calendar.	X		
7.3. The Establishment's website must mention the ESEVT Establishment's status and its last Self Evaluation Report and Visitation Report must be easily available for the public.	X		
7.4. The selection and progression criteria must be clearly defined, consistent, and defensible, be free of discrimination or bias, and take account of the fact that students are admitted with a view to their entry to the veterinary profession in due course.	X		
7.5. The Establishment must regularly review and reflect on the selection processes to ensure they are appropriate for students to complete the programme successfully, including consideration of their potential to meet all the ESEVT Day One Competences in all common domestic species (see Annex 2).	X		
7.6. Adequate training (including periodic refresher training) must be provided for those involved in the selection process to ensure applicants are evaluated fairly and consistently. NA			
7.7. There must be clear policies and procedures on how applicants with disabilities or illnesses will be considered and, if appropriate, accommodated in the programme, taking into account the requirement that all students must be capable of meeting the ESEVT Day One Competences by the time they graduate.	X		
7.8. The basis for decisions on progression (including academic progression and professional fitness to practise) must be explicit and readily available to the students. The Establishment must provide evidence that it has mechanisms in place to identify and provide remediation and appropriate support (including termination) for students who are not performing adequately.		X	
7.9. The Establishment must have mechanisms in place to monitor attrition and progression and be able to respond and amend admission selection criteria (if permitted by national or university law) and student support if required.	X		
7.10. Mechanisms for the exclusion of students from the programme for any reason must be explicit.	X		
7.11. Establishment policies for managing appeals against decisions, including admissions, academic and progression decisions and exclusion, must be transparent and publicly available.	X		
7.12. Provisions must be made by the Establishment to support the physical, emotional and welfare needs of students. This includes, but is not limited to, learning support and counselling services, careers advice, and fair and transparent mechanisms for dealing with student illness, impairment and disability during the programme. This shall include provision of reasonable accommodations/adjustments for disabled students, consistent with all relevant equality and/or human rights legislation.	X		
7.13. There must be effective mechanisms for resolution of student grievances (e.g. interpersonal conflict or harassment).	X		
7.14. Mechanisms must be in place by which students can convey their needs and wants to the Establishment.	X		
7.15. The Establishment must provide students with a mechanism, anonymously if they wish, to offer suggestions, comments and complaints regarding compliance of the Establishment with the ESEVT standards.	X		
<b>Standard 8: Student assessment</b>			
8.1. The Establishment must ensure that there is a clearly identified structure within the Establishment showing lines of responsibility for the assessment strategy to ensure coherence of the overall assessment regime and to allow the demonstration of progressive development across the programme towards entry level competence.	X		
8.2. The assessment tasks and grading criteria for each unit of study in the programme must be clearly identified and available to students in a timely manner well in advance of the assessment.	X		
8.3. Requirements to pass must be explicit.	X		
8.4. Mechanisms for students to appeal against assessment outcomes must be explicit.	X		
8.5. The Establishment must have a process in place to review assessment outcomes and to change assessment strategies when required.	X		
8.6. Programme learning outcomes covering the full range of professional knowledge, skills, competences and attributes must form the basis for assessment design and underpin decisions on progression.	X		
8.7. Students must receive timely feedback on their assessments.	X		
8.8. Assessment strategies must allow the Establishment to certify student achievement of learning objectives at the level of the programme and individual units of study.	X		
8.9. Methods of formative and summative assessment must be valid and reliable and comprise a variety of approaches. Direct assessment of clinical skills and Day One Competences (some of which may be on simulated patients), must form a significant component of the overall process of assessment. It must also include the quality control of the students logbooks in order to ensure that all clinical procedures, practical and hands-on training planned in the study programme have been fully completed by each individual student.		X	
<b>Standard 9: Academic and support staff</b>			
9.1. The Establishment must ensure that all staff are appropriately qualified and prepared for their roles, in agreement with the national and EU regulations. A formal training (including good teaching and evaluation practices, learning and e-learning resources, biosecurity and QA procedures) must be in place for all staff involved with teaching. Most FTE academic staff involved in veterinary training must be veterinarians. It is expected that greater than 2/3 of the instruction that the students receive, as determined by student teaching hours, is delivered by qualified veterinarians.	X		
9.2. The total number, qualifications and skills of all staff involved with the programme, including teaching staff, 'adjunct' staff, technical, administrative and support staff, must be sufficient and appropriate to deliver the educational programme and fulfil the Establishment's mission.		X	
9.3. Staff who participate in teaching must have received the relevant training and qualifications and must display competence and effective teaching skills in all relevant aspects of the curriculum that they teach, regardless of whether they are full or part time, residents, interns or other postgraduate students, adjuncts or off-campus contracted teachers.	X		
9.4. Academic positions must offer the security and benefits necessary to maintain stability, continuity, and competence of the academic staff. Academic staff should have a balanced workload of teaching, research and service depending on their role; and should have reasonable opportunity and resources for participation in scholarly activities.	X		
9.5. The Establishment must provide evidence that it utilises a well-defined, comprehensive and publicised programme for the professional growth and development of academic and support staff, including formal appraisal and informal	X		

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mentoring procedures. Staff must have the opportunity to contribute to the Establishment's direction and decision making processes.			
9.6. Promotion criteria for academic and support staff must be clear and explicit. Promotions for teaching staff must recognise excellence in, and (if permitted by the national or university law) place equal emphasis on all aspects of teaching (including clinical teaching), research, service and other scholarly activities.	X		
<b>Standard 10: Research programmes, continuing and postgraduate education</b>			
10.1. The Establishment must demonstrate significant and broad research activities of staff that integrate with and strengthen the veterinary degree programme through research-based teaching.	X		
10.2. All students must be trained in scientific method and research techniques relevant to evidence-based veterinary medicine.	X		
10.3. All students must have opportunities to participate in research programmes.	X		
10.4. The Establishment must provide advanced postgraduate degree programmes, e.g. PhD, internships, residencies and continuing education programmes that complement and strengthen the veterinary degree programme and are relevant to the needs of the profession and society.		X	
<b>Standard 11: Outcome Assessment and Quality Assurance</b>			
11.1. The Establishment must have a policy for quality assurance that is made public and forms part of their strategic management. Internal stakeholders must develop and implement this policy through appropriate structures and processes, while involving external stakeholders.		X	
11.2. The Establishment must have processes for the design and approval of their programmes. The programmes must be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme must be clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.	X		
11.3. The Establishment must ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.	X		
11.4. The Establishment must consistently apply pre-defined and published regulations covering all phases of the student "life cycle", e.g. student admission, progression, recognition and certification.	X		
11.5. The Establishment must assure themselves of the competence of their teachers. They must apply fair and transparent processes for the recruitment and development of staff.	X		
11.6. The Establishment must have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided.	X		
11.7. The Establishment must ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.	X		
11.8. The Establishment must publish information about their activities, including programmes, which is clear, accurate, objective, up-to date and readily accessible.	X		
11.9. The Establishment must monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society. These reviews must lead to continuous improvement of the programme. Any action planned or taken as a result must be communicated to all those concerned.	X		
11.10. The Establishment must undergo external quality assurance in line with the ESG on a cyclical basis.	X		
<i>C: (total or substantial) compliance; PC: partial compliance (Minor Deficiency); NC: non-compliance (Major Deficiency)</i>			

## **Executive Summary**

The Veterinary Faculty of Lugo (FVL) has been part of the University of Santiago de Compostela (USC) since 1984. It is the only Veterinary Faculty in the Autonomous Community of Galicia.

The Establishment was visited by EAEVE in 1998 (Non Approval), Re-visited in 2002 (full Approval) and visited again in 2008 (full Approval).

The SER was provided on time and written in agreement with the 'Uppsala' SOP 2016. Replies to the pre-Visitation questions from the experts were provided before the start of the Visitation.

The Visitation was very well organised and the Liaison Officer did a great job to adapt the schedule of the Visitation, to search for the requested information and to organise the relevant meetings.

Areas worthy of praise (i.e. Commendations):

- strong commitment of most staff to the education of veterinary students;
- evident care for the welfare of students;
- commitment of staff in Quality Assurance;
- spacious buildings and adequate equipment devoted to teaching, research and services;
- excellent e-learning platform widely used throughout the curriculum.

Areas of concern (i.e. Minor Deficiencies):

- partial compliance with sub-standard 2.5, because of insufficient autonomy of the Establishment for departmental restructuring and staff recruitment;
- partial compliance with sub-standard 3.5, because of insufficient training in functional sciences;
- partial compliance with sub-standard 4.7, because of insufficient housing and examination facilities for horses and pigs and the new farm not yet being built and fully functional;
- partial compliance with sub-standard 5.1, because of insufficient number of equine necropsies;
- partial compliance with sub-standard 5.2, because of insufficient caseload of horses and pigs;
- partial compliance with sub-standard 5.5, because of the structure of the clinical training not allowing the active participation of undergraduate students in the full investigation and follow-up of patients;
- partial compliance with sub-standard 7.8, because of the unexplained accumulation of students in the 5<sup>th</sup> year;
- partial compliance with sub-standard 8.9, because of sub-optimal assessment of Day One Competences
- partial compliance with sub-standard 9.2, because of insufficient recruitment of junior staff and because of insufficient specialised academic staff in some key clinical disciplines
- partial compliance with sub-standard 10.4, because of the absence of residency programmes in most common clinical disciplines
- partial compliance with sub-standard 11.1, because of insufficient involvement of external stakeholders in Quality Assurance.

Additional suggestions of improvement are listed in the Visitation Report, e.g. enhancement of national and international collaborations and further development of the clinical skills lab.

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Items which are not compliant with the ESEVT Standards (i.e. Major Deficiencies):

- non-compliance with sub-standard 3.5, because of insufficient clinical training in common animal species, especially in equine and porcine, and in porcine food safety and quality.

## **Glossary**

ACMP: Area of Quality and Improvement of Procedures  
ACSUG: Agency for Quality Assurance in the Galician University System  
ANECA: Spanish Agency for Quality Assessment and Accreditation  
CEBIOVET: Veterinary Biomedicine Centre  
CIEDUS: International Centre for Advanced Doctorate Studies  
CIUG: Inter-University Commission of Galicia  
EAEVE: European Association of Establishments for Veterinary Education  
EBVS: European Board of Veterinary Specialisation  
ECOVE: European Committee on Veterinary Education  
ECTS: European Credit Transfer and Accumulation System  
EPT: External Practical Training  
ESEVT: European System of Evaluation of Veterinary Training  
ESG: Standards and Guidelines for Quality Assurance in the European Higher Education Area  
FRC: Rof Codina Foundation  
FSQ: Food Safety and Quality  
FTE: Full-Time Equivalent  
FVL: Veterinary Faculty of Lugo  
GTCS: Semester Coordination Working Group  
HVURC: University Veterinary Teaching Hospital  
IT: Information Technology  
LHC: Clinical Skills Laboratory  
PAU: University Entrance Exam  
PFID: Innovation Programme for Training and Teaching  
QA: Quality Assurance  
QCC: Quality Control Committee  
SER: Self Evaluation Report  
SOP: Standard Operating Procedure  
SPIU: Service of Participation and University Integration  
SUG: Galician University System  
TFG: Graduation Thesis  
USC: University of Santiago de Compostela  
VPH: Veterinary Public Health  
VTH: Veterinary Teaching Hospital

### **Standardised terminology**

**Accreditation:** status of an Establishment that is considered by ECOVE as compliant with the ESEVT Standards normally for a 7 years period starting at the date of the last (full) Visitation;

**Establishment:** the official and legal unit that organises the veterinary degree as a whole, either a university, faculty, school, department, institute;

Ambulatory clinic: clinical training done extra-murally and fully supervised by academic trained teachers;

**Establishment's Head:** the person who officially chairs the above described Establishment, i.e. Rector, Dean, Director, Head of Department, President, Principal, ..;

External Practical Training: clinical and practical training done extra-murally and fully supervised by non-academic staff (e.g. practitioners);

**Major Deficiency:** a deficiency that significantly affects the quality of education and the Establishment's compliance with the ESEVT Standards;

**Minor Deficiency:** a deficiency that does not significantly affect the quality of education or the Establishment's compliance with the ESEVT Standards;

## **FINAL REPORT AS ISSUED BY ECOVE ON 22 NOVEMBER 2018**

**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 Establishment is compliant with all ESEVT Standards; any chronological reference to ‘the Visitation’ means the first day of the full on-site visitation;

**Visitation Report:** a document prepared by the Visitation Team, corrected for factual errors and finally issued by ECOVE; it contains, for each ESEVT Standard, findings, comments, suggestions and identified deficiencies.

**Decision of ECOVE**

The Committee concluded that the following Major Deficiency was identified:

- Non-compliance with sub-standard 3.5, because of insufficient clinical training in common animal species, especially in equine and porcine, and in porcine food safety and quality.

The Faculty of Veterinary Medicine of the University of Santiago de Compostela is therefore classified as holding the status of: **CONDITIONAL ACCREDITATION**.