**European Association
of Establishments for Veterinary Education**

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QUALITY ASSURANCE VISITATION REPORT

To the Faculty of Veterinary Medicine, Veterinary Academy, Lithuanian University of Health Sciences, Kaunas, Lithuania

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Contents of the QA Visitation Report

Introduction

This report is based on the SOP 2016 which on a full Visitation (FV) provides the template to cover the eleven Standards and the constituent Substandards. For this current Visitation to the Faculty of Veterinary Medicine at the Lithuanian University of Health Sciences, only the presence and quality of QA has been assessed. This assessment was nevertheless based on an analysis of QA in all eleven Standards.

The Faculty of Veterinary Medicine (FVM) (called the Establishment in this report) within the Veterinary Academy (VA) at the Lithuanian University of Health Sciences (LSMU) is situated in Kaunas, Lithuania. In 2010, the Parliament of the Republic of Lithuania reorganized the Kaunas University of Medicine and Lithuanian Veterinary Academy by merging them into Lithuanian University of Health Science.

During October 2012 there was an ESEVT Visitation to the FVM, which resulted in the detection of five Major Deficiencies. An ESEVT Re-visitation was then undertaken in late April 2015; this Re-visitation led to a decision by ECOVE that one of these five original Major Deficiencies was, however, still present. This single Major Deficiency is the subject of the accompanying Re-visitation report, while this current report covers the QA aspects of the eleven Standards within the SOP 2016.

Taking into account the recommendations of several separate Visitations to the FVM, a number of organisational, functional, structural and quality assurance changes have been made. These changes can be summarised as:

1. The organisational structure of the Faculty has been changed;
2. Objectives and outcomes of the programme of VM have been updated;
3. Curriculum has been improved by reinforcing interdisciplinary integration;
4. The ratio of theoretical to practical training has been changed in favour of practical training;
5. For achievement of Day One Competences, clinical training has been continuously adjusted and improved;
6. The Centre of Veterinary Medicine Simulation (VMSC) has been established and integrated in the Curriculum;
7. A new methodology for assessing the acquired Day One Competences has been implemented (updated Logbook);
8. Processes of monitoring and management of academic progression and professional fitness to practice have been implemented;
9. Programme is completed with the Qualification Exam (since 2016) (the Master Thesis since 2008);
10. Committee for Biosecurity and Biosafety of FVM has been established;
11. Biosecurity and biosafety measures improved through implementation of Biosecurity and Biosafety Standard Operating Procedures at the FVM;
12. New clinical facilities and equipment for biosafety and clinical practice have been introduced.

1. Objectives and Organisation

1.1. Findings

1.1.1. Brief description of the Strategic Plan

The Strategic Plan of the FVM is called "Strategic Development Guidelines". The last version has been written for the period 2017-2021. The draft of the Strategic Development Guidelines must follow the LSMU strategic guidelines and is written by a group of 9 members including:

- the Chancellor of VA
- Dean of FVM
- Head of council of FVM
- 4 members of academic staff
- 2 students.

In addition, staff, stakeholders and students have possibilities to provide their input.

Five Strategic directions are currently established regarding:

- internationally competitive graduates
- animal health technologies and innovations based on scientific knowledge
- internationally recognized and valued faculty
- healthy human and healthy animal
- consolidated, creative and socially responsible community of the faculty.

Each strategic direction is further divided into three to five specific tasks.

Five necessary conditions to reach the goals of strategic development are also defined. Those conditions involve:

- highly qualified employees,
- information technology systems meeting the needs,
- efficiency of decisions and process,
- economic sustainability,
- effective marketing and communication.

A SWOT analysis is available, and tasks and means are formulated to achieve the strategic goals.

1.1.2. Brief description of the Operating Plan

The plan provides qualitative and quantitative indicators and expected outcomes. A contact person is appointed for each task and is responsible for the calculation of the assessment criteria. According to the documents written by the responsible persons, the Dean submits an annual report to the Council of FVM for approval. This annual report is made public.

1.1.3. Brief description of the organisation of the Establishment

The LMSU is divided into 2 Academies:

- Medical Academy
- Veterinary Academy.

The Veterinary Academy itself is divided into:

- Faculty of Veterinary Medicine
- Faculty of Animal Sciences
- Research Institute of Animal Science.

The FVM has three departments: Anatomy and Physiology, Food Safety and Quality, Veterinary Pathobiology; two clinics: Small Animal and Large Animal; one Institute of Microbiology and Virology and two Centres: Centre of Veterinary Medicine Simulation and Centre of Animal Welfare.

Operating bodies are numerous and located at the National level (SKVC, LMT, MOSTA, SSF, SFVS), the University level (Council of LSMU, Senate), the Academy level, the Faculty level (Council of FVM).

The University have several important committees and commissions that consider QA as part of their remit:

- SQMIC (LSMU)
- SPC (VM)
- Admission Committee
- Doctoral and Residency Committees
- Committee for Recruitment and Assessment of Professors and Senior Researchers
- Arbitration Committee
- Committee for Biosecurity/Biosafety FVM, OSHS.

These latter committees are involved in the preparation of procedures and processes. There is no specific committee devoted to QA in general.

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

Students are involved in study quality improvement through representatives in Council of LSMU, Senate, Rectorate, Council of FVM and SPC (Study Program Committee). For the Strategic Plan, one undergraduate student of VM and one resident student of VM is involved in the working group and the Plan has to be approved by the Council of the FVM, in which 3 students are involved.

One member of the Council of the FVM is elected from the candidates outside the Faculty Staff.

1.2. Comments

The FVM strategic plan is well constructed, clear and provides qualitative and quantitative indicators. Following-up of indicators is performed using the annual report of the Dean to the FVM Council. A thorough analysis is performed. Some indicators are missing, and the report doesn't exactly use the same frame as the strategic plan, but the work is exhaustive and useful. It's a clear summary and analysis of the situation.

The FVM strategic plan must follow the LSMU strategic guidelines. This could lead to potential difficulties when specific needs of FVM (imposed for example by external evaluations) are not fully in line with LSMU objectives. This points out the question of the relative independency of FVM toward LSMU for the decisions regarding specific veterinary topics.

It is clear that integration of FVM inside LSMU provides many advantages regarding facilities and administrative duties. However, the relative complexity of the global organisation (multiple operating bodies) may act as a brake in reactivity and adaptability.

Regarding the organisational and management chart of FVM, it is not always clear where disciplines take place in each department. The division into Departments, Clinics, Institute, Centres is not totally clear from an external point of view. This impression is reinforced by the attachment of Laboratories to the Departments, which gives a focus on specific research topics but not on teaching. On the other hand, Clinics seem to be separated from departments.

1.3. Suggestions for improvement

More students, internal and external stakeholders should be included at the very beginning of the writing of the Strategic Plan in order to provide suggestions and not only comment on it before validation by the FVM Council.

It would be useful to setup a specific QA Group with the responsibility to follow up on the indicators of the Strategic Plan. This group could help the Dean for the compilation of data (indicators) and subsequent writing of the annual report.

Work on the FVM management chart should be undertaken in order to give a clearer view on disciplines and teaching (and not only research). Relationships between Departments, Clinics, Institute, Centres should be clarified and simplified.

2. Finances
2.1. Findings

Financial resources allocation is within the competence of LSMU Economic and Planning Service (EPS). The EPS calculates and provides to units the planned assignments for salaries, purchases and services taking into consideration the planned volume of research and teaching. There is no possibility of arbitrage at this stage, as all faculties receive the income that the Unit earned.

The distribution of the allocated budget within the Faculty is then considered whilst taking into account the FVM Strategic goals. For this purpose, draft plans of the required equipment and services are submitted to the Dean each year. This process involves a discussion with the heads of the Faculty units (departments, clinics, institutes and centres).

The Dean provides the budget to FVM Council for discussion and approval. At this stage, 11 members of the academic staff and researchers, three students and one external stakeholder are involved in the decision-making.

The University pursues optimisation of expenditures and build-up of investments for development of scientific and teaching infrastructures. FVM is not free to operate these financial resources. Requests provided by the Dean are submitted to University administration for consideration.

Following the two previous Visitations by ESEVT, it was accepted by the wider University that there was an urgent need for building and equipping a new small animal hospital at the FVM. A site near one of the city rivers has been acquired for this purpose. In order to finance this project a sum of approximately 9 million Euros will be required. Four million Euros have now been allocated, which will be provided from a combination of funds obtained by selling pharmaceutical products (cosmetics) and income derived from overseas medical students. While this is a really welcome support by the University, additional income will be needed from more central government funds. A common situation faced by other European veterinary schools is that whilst medical education is subsidised by the extensive health/hospital facilities within the Health Ministries, there is no comparable subsidy for veterinary related clinical facilities. This situation faced by other European veterinary schools is due to the high cost of delivering unsubsidised veterinary clinical education, resulting in the need to seek additional financial support from alternative government or private sources.

2.2. Comments

The description of how and by who expenditures, investments and revenues are decided, is clear.

2.3. Suggestions for improvement

From a QA point of view:
- a process could be planned in order to assess and revise the rules for financial resources allocation
- a SWOT analysis could be performed for this specific Standard.

3. Curriculum

3.1. Findings

The programme of Veterinary Medicine (VM) was recently extended from 5.5 years to 6 years. This extra-time has been used to extend the Clinical Practice with 15 supplementary ECTS. The outcomes of this programme were revised and based on professional competences and skills. Internal and external stakeholders were involved in this process.

At the national level, the Centre for Quality Assessment in Higher Education (SKVC) assesses and accredits the study programmes of higher schools in the Republic of Lithuania.

At the University level, the Study Quality Monitoring and Improvement Commission (SQMIC) coordinates the monitoring of study quality at LSMU.

Continuous improvement follows the principle of the Deming Wheel. Veterinary Medicine Study Programme Committee (SPC) assesses subjects and modules of the study Programme in order to ensure quality of the study. This committee is the main regulatory body for QA in teaching inside the FVM. The SPC is in charge of following up on each task and indicators of the strategic plan regarding study affairs.

The Study plan is one of the key documents and is prepared by the SPC each year.

It covers:
- evaluating the relevance of the content of the programme and of teaching methods
- initiating, preparing and updating relevant documentation
- carrying out surveys of students and graduates
- taking into consideration external recommendations.

Outcomes of the implementation of the plan are submitted to the Dean and SQMIC after each semester and uploaded onto the Website of LSMU.

Subject descriptions are uploaded on the Study Information System database by the coordinating teacher. SPC ensures that all subject descriptions will form a cohesive framework.

Feedback from the students is undertaken via a system of survey questionnaires utilising the scheme below:

SPC organised Surveys of students of VM for 2017/2018 study year

No	Target students	Type of survey	Time of survey	Form of survey
1	1 year students	Evaluation of satisfaction and expectation about the studies	2017 December	A link of electronical online questionnaire version is sent via e-mail for senior students of each group, they share the information for the group mates. Information about the deadline of survey is also given.
2	1-5 year students	A survey about autumn semester subjects	2018 January	
3		A survey about spring semester subjects	2018 May	
4	6 year students	A survey of graduates about the whole study programme	2018 February	Paper version of questionnaires are shared for students after Master thesis defence procedure and the answers are collected immediately

Other types of surveys are also performed by SPC on request.

Answers are analysed in a SPC meeting. Questions and comments are delivered to target teachers via e-mail and written answers are obtained. All corrections and comments by teachers on students' questions are gathered by SPC and delivered to students.

Further actions for improvement of the curriculum (decreasing curriculum overload, increasing students-oriented learning methods, change management…) are conducted by the Dean and a second vice-dean, in order to achieve the intended goal of continuous curriculum improvement.

QA process is extended to Extra-mural clinical practice with the establishment of a list of practical training sites selected by the FVM and following the criteria recommended by the faculty. Clinical Students at their practising places are visited by the Faculty staff at least once per year and extra-mural supervisors benefit from a special educational training by the University which, although voluntary, has a high attendance rate.

3.2. Comments
The way the curriculum is decided, implemented and revised is clearly described.
The FVM:
- has processes for the design and approval of the programme;
- takes into consideration external review and feedback from the students for the continuous improvement of their programme.

The FVM favourably benefits of a support from the University to implement the QA process in the Faculty.

The way that the FVM is conducting a major revision of the curriculum is in line with the principle of QA.

Special attention should be paid to intra-mural clinical rotations in this new curriculum because the QA Team expressed some concerns about the students' exposure to all the clinical cases seen in the hospitals. SPC must address this issue before the next Visitation and in accordance with the organisation of the new small animal hospital, because it will be a potential Major Deficiency within the new ESEVT SOP. Students must, under all situations, be active participants in the clinical workup of patients, including problem-oriented diagnostic approach together with diagnostic decision-making.

After analysis, the surveys are sent to the relevant teachers (via e-mail) who are asked to give written opinions/comments/answers to send back to the SPC. The SPC then communicates this information to students (each course separately) during meetings with the students; and the results are also uploaded onto the website of LSMU.

3.3. Suggestions for improvement
A SWOT analysis should be performed for this specific Standard.

The SPC should take advantage of suggestions from the students, internal and external stakeholders to establish the new curriculum. This will publicise the process to the community and help acceptance of the changes.

It is clear that the "Plan, Do and Check" parts of the Dering Wheel are present but the last step "Act" (and communicate) should be more greatly emphasised. In particular, the efficiency of the student surveys should be measured by the concrete actions that are implemented in each domain following each survey.

Analysis of the surveys seems to be in the sole hands of the SPC representing a considerable amount of work. The QA team suggests that the coordinating teachers (responsible of one subject) should have more responsibility for the actual analysis process.

4. Facilities and equipment
4.1. Findings
4.1.1. Brief description of the process and the implication of staff, students and stakeholders in the development, implementation, assessment and revision of facilities, equipment location and organisation of the facilities used for the veterinary curriculum
Since the last Visitation, the Centre of Veterinary Medicine Simulation (VMSC) has been established and new clinical facilities and equipment for biosafety and clinical practice have been introduced.

A new project for Small Animal Clinic facilities and equipment is planned and 4 million Euros has already been allocated towards the final cost but the development of this Clinic (at a walking distance of 20 min from the VA) is predicated on the University attracting external funding resources.

Construction of "Stray Pets Centre" has been started.

Equipment and facility needs are formulated by the head of structural units of FVM, communicated to the Dean and discussed within the FVM Council. After coordination with the VA Chancellor, such needs are communicated to the LSMU Development Department.

The Rector makes decisions related to the management, use and disposition of LSMU resources and properties. LSMU Council on advice of Senate makes strategic decisions about the development of facilities and infrastructure.

QA is implemented with a series of indices that are monitored when considering the progress of facilities improvement.

The Key Performance Indicators KPI's used to monitor the initiation of projects dedicated for infrastructure and facilities improvement include:
- number of prepared projects, feasibility studies
- number of investment projects
- number of technical projects for construction.

The KPI's used for the monitoring how the projects dedicated for this improvement are progressing include:
- the creation and renovation of premises for academics activities – measured in sq.m.
- the acquired number of equipment sets for study/research and IT needs during the year
- the value of invested funds during the year.

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

A Biosecurity SOP is available, and a committee is responsible for its implementation and actualisation.

Every Faculty unit has a person responsible for coordination of biosecurity requirements within the unit.

The Biosecurity Committee implements audits in units once a year.

4.2. Comments

The process for planning the upgrade of FVM facilities and equipment are clear. The number of administrative formalities from the "user" to the decision-maker is however quite large.

As acknowledged in the SER, the biosecurity "culture" needs to "spread out" within the FVM.

4.3 Suggestions for improvement

Report on the audits implemented through on site checking fulfilment of Biosecurity SOP requirements during Visitations of the units of the Veterinary Faculty should be made public.

Periodical revisions of the Biosecurity SOP should be planned and anticipated.

All support staff and students should be informed of the SOP. Every action involving the students in this process should be encouraged. This could be done for example by a poster campaign and/or the involvement of students in the scientific popularisation of the Biosecurity SOP.

5. Animal resources and teaching material of animal origin

5.1. Findings

In order to ensure that there is no deficiency of animals, material of animal origin and clinical cases for study, the SPC supervises potential issues. Heads and representatives of Animal Clinics and the Centre of Pathology are all members of the SPC.

Every FVM unit has a person in charge of filling out a logbook for recording the use of animals

and material of animal origin for teaching.

All procedures with live animals are conducted following the SFVS Director's Order to ensure biosecurity and animal welfare.

Assurance of the necessary number of patients for clinical VM studies is one of the tasks followed in the strategic plan. Heads of Small and Large Animal Clinics of FVM are in charge of implementation of these strategic tasks.

In this context the Visitation Team noticed that in the small animal clinics, some animals were seen in consultation (internal medicine, surgery) without undergraduate students. Also, in the large animal clinic, a large group of students (12) was seen attending the same surgery on a horse.

QA implementation in this domain is also driven by students' survey for information about their satisfaction with the clinical studies.

The computer-based clinical patient registration software implemented in 2014 is not (or only very partially) used by the staff and students.

5.2. Comments
Although the number of clinical cases seems relevant in the indicators, the QA Team was surprised by the absence of undergraduate students following every clinical case seen in the small animal hospital.

5.3. Suggestions for improvement
Rotations in the Small Animal Clinics should be reviewed in order to take advantage of all the clinical cases. Taking into consideration the potential risk for future accreditations, it is recommended to pay attention to this area until the changes in progress are fully implemented.

In the Large Animal Clinics, the size of the student groups should be kept sufficiently small in order that less than 5 students are involved on the same clinical case at the same time; otherwise each student cannot benefit from hands-on practice.

The implementation of an up-to-date electronic monitoring system for clinical cases should be done for small and large animals. This includes HIS (Hospital Information Systems) and PACS (Picture Archive and Communication System). This system should be used to ease the calculation of the caseload and to register the names of the students involved in each clinical case in order to have a clear view on the number of clinical cases and species viewed by each student in the hospitals.

It is essential that all common domestic animals are available for the students' clinical educational experience and hands-on training. This includes pigs.

6. Learning
6.1 Findings
- Digital platforms
The University manages learning resources through specific centralised structures. The e-studies Department plans and implements development of e-learning and electronic studies administration, while the Information Technology Centre analyses functioning, development and needs of the University IT system.

Information related with the study process is available through the LSMU study information system. By accessing the system, the teachers provide subject descriptions and students can

check their credit book as well as submit requests or recommendations on the study organisation and quality. In addition, all teaching materials are available for students on the First-Class system. A portion of the academic staff use the Moodle learning managed system to provide subjects information and assess students' achievements.

The existing electronic patient record system of the Large and Small Animal Clinic is not regularly used. Reportedly, the system is not fully responsive to the needs of the clinicians.

A compulsory subject on the use of information technologies is included in the first year curriculum. Training courses on the use of digital platforms and e-learning resources for academic and support staff are organized.

The Study Programme Committee, including students and social partners, checks the availability of teaching materials on the website and carries out students' surveys on the quality of materials as well as on functioning of the IT system. The Committee analyses the surveys' results and give feedbacks to the Information Technologies Centre.

- Library
Students and staff can access both to the LSMU Library and Information Centre and to the Veterinary Academy library settled in the campus.

Opening hours of the library are 8.00 a.m. to 8.00 p.m. on workdays, and 10.00 am to 6.00 pm on Saturdays. The staff includes three graduates in library science. There is a reading room with 60 places and a computer zone with 24 places. All students and staff have free access to educational and research literature and databases including 17 thousand books, 13 thousand titles of e-books and 706 titles of e-journals. Via the library, students can access 3D programmes for the study of anatomy using virtual models. Auxiliary equipment for students with special needs is available.

Annually, academic staff update the list of needs for educational purposes taking into account study programme and students' recommendations; the Complementation and Storage Subdivision provides the list of requests to the library that procures the necessary editions. Information about new databases and material are periodically communicated to the community.

Every year a students' survey on quality, accessibility and satisfaction with the service is carried out.

The Study Programme Committee controls the compliance of materials with the needs of the study programme, collects students' opinions and suggestions and submits reports to the Dean and Council.

- Centre of Veterinary Medicine Simulation
The Veterinary Medicine Simulation Centre, established in 2018, includes 31 stations, 16 of which are hands-on training stations using veterinary models. The learning objectives and the procedures are specified, and video tutorials are available. The Centre is open from 10.00 a.m. to 6.00 p.m. and students can book online visitation time for self-learning activities. Six students can practice at the same time with the attendance of an assistant. Some laboratories take place in the Centre under the supervision of academic staff.

6.2. Comments

The Library is a comfortable environment, and satisfaction with the service from both staff and students is high. The process for requesting new books is linked to the number of students and to students' needs. There are multiple copies of each educational text.

The use of Moodle educational platform has been implemented but not universally.

The Centre for Simulation is a new initiative, with several stations and procedures for the acquirement of clinical skills. The students mention it as an area of strength, and it is widely utilised for self- learning.

6.3. Suggestions for improvement

The transition from the old "First Class" system to the new Moodle system should be accelerated in order to have only one system currently in use.

The number of electronic educational tools and their use should be further implemented.

7. Student admission, progression and welfare

7.1. Findings

In Lithuania, admission to University is regulated by the Ministry of Education and Science and organised via the Association of Lithuanian Higher Education Institution for General Admissions. Information about relevant regulations and procedures are available on the University website.

Annually, the University Council, on Dean's advice, approves the number of prospective students and Ministry approves the number of state supported students.

The main selection criterion for the admission is the competitive examination score, achieved within the Secondary schools; this is calculated from assessment grades of biology, Lithuanian language, chemistry or mathematics state maturity examinations, plus one freely chosen subject. The Ministry annually sets the minimum admission score, but Universities are free to increase this score. In 2018, on the Dean's advice, the minimum score for applicants to Veterinary Medicine Programme was higher than for other study programmes.

According to their admission score, the top students from the applicant list are then enrolled.

The Establishment's website provides all information about the study programme (study plan, admission rules, tuition fees) as well as all documentation required by the quality system.

Students mentors help newly enrolled students to integrate themselves into the university community. During the introduction to Studies, the Dean and Vice-Dean welcome the incoming students and inform them about the general rules of study and processes for students support.

The Dean's Office offers continuous counselling on study organisation and process and provides administrative services.

The Dean's Office is in charge of controlling the dropout and attrition rates. The reasons for dropout and number of students is monitored and analysed in the Dean's report at the end of each semester. As the recent monitoring results revealed that the greatest number of withdrawals occurs in the first year of studies, the function of tutoring was recently resumed. Each group of first year students has a tutor who meets their students once a month.

Students' academic progression is monitored by evaluating the level of study achievements at the end of each year. The applied rules are described in the Regulation of the studies. Three level of achievements are distinguished: excellent, typical and threshold. The student who has achieved the excellent or typical level, and does not have any academic failure is provided with state support. The monitoring system allows for the identification of students who are not performing adequately and who need support. The Establishment has detailed procedures for support and help toward students needing to improve their study results. The mechanisms include offering extra classes for such students and improvement of their teaching-learning strategies.

Students can offer suggestions, comments and complaints using an anonymous electronic system.

A specific Committee is responsible for students with special needs. The service communicates information about financial and other kind of support, evaluates the special needs of students and gives advice to academic staff on the issue of application of achievements' evaluation methods.

Grants and scholarships as well as access to dormitories are regulated by University procedures. Students can get professional psychological assistance and can receive medical treatment free of charge.

7.2. Comments

The Regulation of study successfully details the procedures for students' enrolment, rights and duties, progression, appeals and punishment. The rules are rigorously applied (for example in the 2017/2018 autumn semester 12 students have been expelled for violations of academic honesty).
The progression of students is efficiently monitored and the rate and causes of dropout are fully analysed in the Dean's annual report of Faculty.
The FVM adopts many formal mechanisms for collecting students' suggestions, comments and complaints; in addition, students can easily interact with teachers who are willing to discuss most problems that students could incur.
The relationship between teachers and students is friendly leading to excellent levels of collaboration.
Students' satisfaction with the sport facilities and dormitories is high. However, there are some complains about the lack of a canteen with hot dishes for the students inside the FMV.

7.3. Suggestions for improvement

From a QA point of view, complaints about the canteen should be further analysed, using a survey, and corrective actions should be accordingly undertaken.

8. Student assessment

8.1. Findings

Student assessment rules and policies for appeals against academic and progression decisions are specified in the "Regulation of the Studies of LSMU".

Studies are divided in semesters and examination sessions. Each semester is organised via timetables, including teaching plans, lecture timetable, and students' assessment timetables.

The assessment methods and strategy, including forms, terms and criteria, are designed for each subject by the teacher responsible for that particular subject and are approved by the Study

Programme Committee. Expected learning outcomes, assessment forms and structure are available for students in the LSMU student information system and in the First-Class system.

Each subject has both intermediate cumulative assessments and a final verification. A 10-point evaluation scale is applied with a positive score from 5 to 10. The cumulative grades constitute no less than 50% on the total score of the assessment. Students who fail to pass the final evaluation have the right to retake the assessment twice. The final grade is recorded on the electronic register within 5 days and each individual student can only see his/her own grades. Students who have acquired 60 credits access to the next year.

Each student can ask for feedback about his/her work assessment and, if he/she does not agree with assessment outcomes, has the right to appeal to the Dean's Office. The appeal commission is composed by one third student representatives, one third members of the academic staff and one third representatives of administration.

A variety of formats is used to assess learning outcomes depending on the educational activities involved and on the competence to be evaluated. Theoretical knowledge and understanding are assessed using tests, case analysis, term paper projects, colloquium and a final assessment. Acquired pre-clinical practical skills are assessed using a defence of practical works, analysis of clinical cases and a final practical test. To ensure the achievement of the minimum level of competencies for clinical practical skills, every student fulfils a personal logbook. The procedures of assessment of clinical rotation, clinical practices, Master thesis and Qualification exam are determined by specially designed documents prepared by the Study Programme Committee and approved by the Faculty Council.

The Dean's report on outcomes assessment, including an analysis of the evolution of mean grades for each subject during the last years, is discussed at the FMV Council and at the Rectorate at the end of each semester; and on an annual basis results are made public through meetings with academic staff, students and representatives of administration. If a level of inadequate results are detected, the Dean will organize meetings with the teachers of the relevant subjects to ascertain the reasons, and, finally, to discuss how to improve the results. The causes of students' failure are analysed, and recommendations are provided.

8.2. Comments
The FVM is running a Quality Assurance process designed to enhance the quality of students' assessment.
Work is still needed, however, to enhance the overall quality of the assessment of Day One skills, as although the undergraduates certainly reach and often exceed the minimum level of competences for clinical practical skills, a greater emphasis could be made for soft and transversal skills, both intra-murally and extra-murally.

8.3. Suggestions for improvement
In order to encourage students to take an active role in creating the learning process, the FVM should take advantage of the Moodle platform to increase the number of formative assessments using online electronic tests.

The quality assurance process should be used to implement evolution, clarification and ergonomics of the current version of the logbook in order to develop the most efficient and user-friendly tool.

The FVM should continue to take advantages of the collaboration with the Medical Academy to implement OSCE, Mini Clinical Evaluation Exercise (Mini-CEX), Direct Observation of

Procedural Skills (DOPS), Entrustable Professional Activity (EPA), etc. in order to evaluate Day One Competences.

Policy for assessments of students with special needs (disabilities, dyslexia, etc.) should be updated.

9. Academic and support staff
9.1. Findings
An analysis of qualitative and quantitative need for human resources is carried out by the Dean on an annual basis and is approved by the Council.

Recruitment of both academic and support staff is planned and implemented in accordance with European and National Regulations.

Academic staff selection and recruitment is "framed" by procedures that define the qualification requirements for the different levels of teaching staff and scientists, rules for the organisation and implementation of competitions, and assessment/interview procedures. The academic promotion process is aimed at recognising merit in research, teaching and scholarship, administration, management and leadership in the University and external community. The methods of assessment are fair, transparent and equitable.
New positions are made publicly available on the University website and in University weekly newspaper. The selection of candidates is discussed in the relevant Committee, which then informs the Senate about their conclusions. The Senate evaluates candidates and informs Rector about the overall conclusions.

Contractual teachers can supplement the teaching team for a period of no more than 2 years, and they must meet the qualification requirements set for that particular position.

All academic staff are required to contribute to both teaching and research activities.

Assessment of academic staff is undertaken every 5 years. Improvement of educational competence is one of the criteria and every academic teacher is expected to complete at least 30 hours of educational training courses. Qualification assessment and analysis of educational competence also takes into account the results of students' surveys. Other critical indicators are scientific activity and the number of scientific publications. In addition, every veterinary surgeon is expected to develop their professional competences through at least 32 qualification extension hours every two years.

Members of the support staff are "instructed" on a regular basis with specialised theoretical training courses on topics of work security, biosecurity, development of communications skills, ethics, etc.

Extra payments are conferred to academic staff for an excellent achievement in the occupied position and for participating in administrative activities. Academic staff is also stimulated by granting an honorary rank, public nominations and appreciation "letters" delivered during Faculty celebratory events.

9.2. Comments
The FVM values the merit in teaching of the academic staff and is active in promoting the acquisition of educational competences for the academic staff as well as for the practicing official veterinarians involved in extramural practical training.

9.3. Suggestions for improvement
The FVM should establish procedures for the recruitment of the support staff.

10. Research programmes, continuing and postgraduate education
10.1. Findings
Research priorities are discussed at a Faculty unit level, and then, using a bottom–up approach, submitted for approval to Senate. The research is regarded as complementing the quality of studies and as a means of attracting the most promising students to the research field.

Scientific activities are monitored and evaluated through both internal and external systems. Annually, the Dean's report analyses the scientific activity by means of indicators including the number of publications, indices per researcher, number of scientific projects etc. Every five years an external evaluation is carried out by international experts applying three criteria:

- assessing the quality of research;
- the economic and social impact of the research;
- the potential of the research activities.

Starting in 2019 results will affect the Establishment's budget.

Responding to a students' need, evidence-based medicine was integrated in the study process. The University set up an Evidence–based Medicine Centre that organises theoretical and practical teaching. Evidence-based medicine lectures are included into the curriculum, and training courses are provided to residents and PhD students.

Students are involved in research activities through compulsory activities, as the second year subject Biomathematics and statistics, and elective activities, as the fourth year subject Methodology and Scientific Research. For all students it is mandatory to individually undertake a supervised research work in order to prepare the Master thesis. The procedures of preparation, defence and evaluation of Master thesis are listed in a specific document. Optional training is offered to improve skills of analysing scientific literature and to write scientific papers.

There is a Students' Scientific Society that encourage students to participate in research and investigations, prepare publication, participate in national and international student conferences. The activity is not compulsory but, for encouraging membership, students receive extra scores entering postgraduate degree programmes.

The number of positions for PhD programmes is set by the Ministry. PhD students are admitted through open competition using explicit selection criteria. Every year student's progresses are assessed by Doctorate Committee and most active and productive PhD students are awarded "premiums". Annually, the efficacy and the weak points of the PhD programme are analysed and an internal assessment of quality is in place using anonymous questionnaires. The results are published on the University website.

The Establishment provides 16 postgraduate veterinary residency programmes, recognised only at the national level. Development of new programmes and annual planning of places is made taking into account country's demand for specialists, opportunities of employment, demand of State Food and Veterinary Service and other enterprises and associations. Residency study programmes are monitored, revised and renewed by a relevant commission taking into consideration the assessment results and recommendations of social partners and residents.

Veterinary medicine continuing education programmes are developed by order of State Food and Veterinary Service Director, or by an initiative of Establishment units or by recommendation of the State Food and Veterinary Service. The programmes are discussed and approved by the Council, and harmonised with State Food and Veterinary Service and Associations of Veterinary Surgeons. Assessment is made through anonymous surveys of listeners. The results are analysed by the organising unit and, taking into account the recommendations, the quality of programme is improved, or the programme is renewed.

10.2. Comments
The FVM offers a wide proposal of programmes for post graduation studies.
The PhD programmes is monitored and reviewed applying the Quality Assessment process.
External stakeholders are actively involved in suggesting the topics for continuing education programmes.

10.3. Suggestions for improvement
Attendance to European residency programmes should be encouraged.

11. Outcome Assessment and Quality
11.1. Findings
The strategic development guidelines and their implementation plan, in line with that of the University, are designed by the Dean's Working Group, including two students, and are discussed with the units and student community before the final approval by the Council. The Dean is responsible for the implementation of the Plan; using provided indicators, an annual report is prepared on the results achieved and then submitted to the Council for approval.

The quality assurance system supports the study process with three principles:

- involvement of students and social partners in the decision making process;
- evidence-based decisions using the data obtained;
- feedback from and to the community on analysis of quality assurance and continuous improvement results. The responsibility for coordination of the quality assurance is delegated to the Dean and to the Study Programme Committee.

Specific quality management procedures are provided for regulating educational and scientific activities. The Regulation of studies covers all phases of the student life cycle. It is published on the website.

Various commissions and committees participate in governing the processes, but the Study Programme Committee is the key body for the quality assurance system. It is responsible for development, management, assessment and improvement of the study programme and includes representatives from the academic staff, students and social partners from State Food and Veterinary service of Lithuania.

Students are involved in many ways in the implementation of the quality assurance strategy. They participate with a voting right through representatives to Council and in most of the committees and commissions. The Establishment collects feedback from students in both formal and informal ways and uses them for planning improvement of the process. Satisfaction surveys are a key element of quality assurance and are used for several purposes, including teaching and assessment evaluations.

Stakeholders participate in Council, Study Programme Committee and practical training organisation activities. Moreover, they take part in Qualification exam and Master thesis defence juries. The Establishment collects and analyses their opinion using specific surveys.

The Establishment undergoes external quality assurance in line with the ESG 2015. Evaluation and accreditation are also undertaken by the national quality assurance agency (SKVC).

All documents relevant to the quality assurance are publicly available on the website.

11.2 Comments
During the on-site Visitation, examples of documents related to each procedure have been checked. The FMV has clear written procedures for QA to guide the different processes and to make them consistent, reliable, and fair.
The Dean's annual report provides a good tool to monitor the outcomes; however, the scheduling of actions in the quality loop should be implemented.
The FMV keep good relationships with internal and external stakeholders that are actively involved in the QA processes.

11.3. Suggestions for improvement
A SWOT analysis should be applied for each ESEVT Standard.
For this purpose, the set-up of a specific QA Group (as suggested for Standard 1) would be useful for a continuous follow-up.

2. ESEVT Indicators
Not applicable.

3. ESEVT Rubrics for Standard 11 (summary of the decision on the compliance of the Establishment for the ESEVT Standard 11, i.e. (total or substantial) compliance (C), partial compliance (PC) (Minor Deficiency) or non-compliance (NC) (Major Deficiency))

Standard 11: Outcome Assessment and Quality Assurance	C	PC	NC
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		

C: (total or substantial) compliance; PC: partial compliance (Minor Deficiency); NC: non-compliance (Major Deficiency)

Executive Summary

Two higher education schools with a common historical heritage – Kaunas University of Medicine (KMU) and Lithuanian Veterinary Academy (LVA) actively participated in the planning of the transformation of the higher education and research institutions' network in Kaunas. As a result, in 2010, the Parliament of the Republic of Lithuania reorganized KMU and LVA by merging them into the Lithuanian University of Health Sciences (LSMU). LSMU is now the largest institution of higher education and research of health specialist's education in Lithuania. LSMU follows the principles of the unity of studies, science, human and animal health, academic freedom and autonomy of the University.

The Faculty of Veterinary Medicine (FVM) has more than 80 years of teaching Veterinary Medicine and is the only Establishment in Lithuania graduating veterinarians as well as graduates in Food Safety.

In October 2012, there was an ESEVT Visitation to the FVM, which resulted in the detection of five Major Deficiencies. An ESEVT Re-visitation was then undertaken in late April 2015, which resulted in a single Major Deficiency still being recognised by ECOVE. Neither of these two Visitations, which utilised the SOP 2012, covered quality assurance (QA).

The QA SER, based on the SOP 2016 Standards, consists of 64 pages and was complemented by 21 Annexes. It provided a comprehensive coverage of all the Standards. Detailed replies to the pre-Visitation questions of the QA Team were provided before the start of the Visitation. Nevertheless, several aspects needed to be clarified on site.

The overall atmosphere during the Visitation was very friendly and constructive, and the whole visit was conducted in an open and professional way. Due to the unique type of the Visitation in the transition period the schedule for QA assessment was very tight but relevant. Answers provided by the Establishment prior to the Visitation were also informative. The documentation shown to the Team both on paper and electronically on site was extensive, and although in Lithuanian help from the Establishment was provided for translating the requested aspects.

Areas worthy of praise (i.e. Commendations):
- Clear recognition of the benefits of an ESEVT Visitation;
- Highly motivated and committed staff at all levels;
- Unusual but excellent close collaboration within the two Academies;
- Student involvement in QA, both officially and on their own initiative;
- A well-constructed and clear Strategic plan, providing qualitative and quantitative indicators;
- Many formal mechanisms in place for collecting students' suggestions, comments and complaints;
- Students can easily interact with teachers.

Areas of concern (i.e. Minor Deficiencies):
- It is recommended that the SWOT analysis is used more widely (at least on each ESEVT Standard);
- Students, internal and external stakeholders should continue to be included at the very beginning of the writing of the Strategic Plan in order to provide suggestions (and not only to revise it);

- Periodical revisions of the Biosecurity SOP should be planned and anticipated;
- The quality assurance process should be used to monitor and review rotations in the Small Animal Clinics in order to take advantage of all the clinical cases;
- The FVM should take advantage of the Moodle platform to increase the number of formative assessments using online electronic tests;
- The quality assurance process should be used to implement evolution, clarification and ergonomics of the current version of the logbook in order to develop the most efficient and user-friendly tool;
- Policy for assessment of students with special needs (disabilities, dyslexia, etc.) should be updated.

Items of non-compliance (i.e. Major Deficiencies) concerning Quality Assurance:
None.

Decision of ECOVE

The Committee concluded that no Major Deficiencies were identified.

The Faculty of Veterinary Medicine, Veterinary Academy, Lithuanian University of Health Sciences is therefore classified as holding the status of: **ACCREDITATION.**