

## Report on the on-site re-visitation of the Faculty of Teramo, Italy

Executed on 21-22 September 2010

By visitors: Pierre Lekeux (ECOVE)

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The Faculty was first visited in October 2007 with the following evaluation results given by ECOVE in November of the same year:

The major obstacles preventing full approval were two not related category 1 deficiencies; that is: ***Lack of a 24/24 emergency service and inadequate facilities for necropsy procedures***. At that time, a period of two years was agreed upon with the faculty for correction of the deficiencies, to be followed by a re-visitation. In 2009, a major earthquake (Aquila quake) struck the region; the faculty and its staff played a major role in the local disaster relief plan and most efforts to remedy the said deficiencies were halted or delayed. The construction of the new campus also was significantly hampered. ECOVE therefore granted an extension of one year for the re-visit. The present re-visit was therefore within the agreed period.

During the past 3 years, a new state-of-the-art animal teaching hospital has been built and is now structurally completed. We visited the site, where construction is finished and last arrangements as wiring and piping are in progress; the planned deadline of January-February 2011 (semester break) for the transfer of equipment and staff shall be upheld. The hospital shall be fully functional by the beginning of the new academic year on March 1<sup>st</sup> 2011. The new campus and hospital will house all facilities, sections and units to harbour and run small and large animal clinics. In specific, a state-of-the-art necropsy facility has been built featuring all instalments, equipment and procedures necessary for necropsy of carcasses of all types including large animals. A proper waste management, refrigeration and bio-safety measures are in place or foreseen when teaching activity starts.

This new and excellent facility, combined with an increasing caseload in necropsy over the past 3 years and the determination of the staff to put this unit to the best possible use, all is convincing evidence that this category 1 deficiency had been rectified. Nonetheless, the visiting team strongly recommends to vigilantly and actively assuring the appropriate necropsy case loads for teaching pathologic anatomy in the new facility.

The 24/24 7-day a week emergency service (ES) is fully operational since April of this year and is located on the old campus. The facilities there are still adequate for this activity and were already found to be so during the full on-site visit 3 years ago. The ES for small animals

consists of an admission area for clients, secured for off-hour use with a video system and an inter-phone directly connected to the speakerphone of the veterinarian on duty. There is also a dedicated telephone number for clients and referring veterinarians. There is one staff veterinarian together with students, assigned in compulsory rotations, present around the clock. For the night shifts, there are adequate sleeping and bathroom facilities on the premises. Illuminated signs are guiding clients to the service. ES clinicians are also responsible for treatment and the care of patients in the intensive care unit, which is located next door. All facilities available during the day can be used during the night; that is surgery suites, radiology, laboratories, etc. Remuneration for those on duty (except students) has been established with University funds. For surgical ES procedures, senior clinicians including 2 board certified professors are participating in the rotating on-call service list. The ES is also fully functioning for equine patients. For instance, during our stay, 2 colic patients were admitted and operated during night hours, with students actively participating.

The fully functional ES will be transferred to the new hospital during the upcoming semester break.

In summarising, we found the ES exceeding minimum standards required and, therefore, this category 1 deficiency has also been fully rectified.

Beyond rectifying the 2 category 1 deficiencies, the Faculty has corrected or is in the process of correcting most of the non-critical areas of insufficiencies which were addressed in the visiting report of 2007. The visitors nevertheless stress that the Faculty should be vigilant that clinical case loads, especially in food producing animals, should not only be maintained but progressively increased. This also applies for necropsy cases and other biologic material; in this context, we recommend strongly that the stressed relationship with the local "istituto zooprofilattico" be improved, allowing students to take advantage of the rich teaching material which this governmental laboratory processes routinely. Such collaboration between those two governmentally owned institutions is well established in other regions of Italy. Thus, the problem is local and should be corrected as soon as possible. The visitors also wish to emphasise that Ratio 1 (that is the number of total academic FTE divided by the total number of students) should be watched carefully and not be allowed to decrease; this especially in the light of high numbers of "off course" students and possible cuts of teaching staff. Last but not least we take the opportunity to recommend efforts for introducing a (nationwide) computerized case record system, to take future advantage of the vast patient data base of all Italian veterinary schools.

The new Teaching Hospital Building with all annexes and amenities for teaching and clinical research (necropsy service, laboratories, lecture and seminar rooms, offices, and animal housing) is, or will shortly be, one of the best veterinary facilities for clinical teaching in Italy. The Faculty as well as the University administration and in specific the rector should be commended for this enormous effort, and not in the least, for the fact of having financed such ambitious project without outside funding.

**Decision: ECOVE approved the faculty.**