Accreditation of veterinary medical education programs is conducted within the Education and Research Division of the American Veterinary Medical Association (AVMA). Accreditation activities take place in the Center for Veterinary Education Accreditation. The Council on Education (COE) accredits DVM or equivalent educational programs and the Committee on Veterinary Technician Education and Activities accredits veterinary technology programs.

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1. STAFF ROSTER

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Note: the words “College” and “School” may be used interchangeably.

The latest version of the Accreditation Policies and Procedures of the AVMA Council on Education (P&P) and a listing of programs the COE accredits or preaccredits with the year of the next scheduled review are available to the public at all times on the AVMA website (www.avma.org). A hard copy of the P&P manual can be obtained by making a request to the Education and Research Division. Among many other subjects, the P&P manual contains information on the Council and its operational procedures; standards used to grant, reaffirm, reinstate, restrict, deny, revoke, terminate or take any other accreditation or preaccreditation action; procedures for applying for preaccreditation or accreditation; the types of accreditation and preaccreditation the Council grants; and the procedures programs must follow in applying for accreditation or preaccreditation. The public may receive the names, professional qualifications and relevant employment and organizational affiliations of COE members and/or the COE administrative staff upon request to the Education and Research Division.

The AVMA Council on Education is recognized by the Council for Higher Education Accreditation (CHEA) as the accrediting body for schools and programs that offer the professional Doctor of Veterinary Medicine (DVM) degree, or its equivalent in the United States and Canada. The Council may also approve foreign veterinary colleges.
The Council on Education, American Veterinary Medical Association is also recognized by the United States Secretary of Education as authorized by United States law. The scope of this recognition may differ from the CHEA Recognition Statement. Please consult the U.S. Department of Education website at www.ed.gov/admins/finaid/accred/index.html for additional information.
## COUNCIL ON EDUCATION ROSTER

<table>
<thead>
<tr>
<th>Member/Representing</th>
<th>City/State</th>
<th>Term*</th>
<th>Position Appointed by</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Private, Non-Academic Veterinary Medicine – Kevin B. Donnelly (Director, pharmaceutical company)</td>
<td>Indianapolis, IN</td>
<td>2015-2021</td>
<td>AVMA COE Selection</td>
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<tr>
<td>Basic Science – Margie D. Lee (Professor and Head, Biomedical Sciences and Pathobiology, Virginia-Maryland CVM)</td>
<td>Blacksburg, VA</td>
<td>2015-2021</td>
<td>AAVMC</td>
</tr>
<tr>
<td>Public – Heeyoung Han (Associate Professor, Southern Illinois University School of Medicine)</td>
<td>Springfield, IL</td>
<td>2015-2021</td>
<td>Council on Education</td>
</tr>
<tr>
<td>Canadian Veterinary Medical Association – David Scammell (Private Clinical Practice -Dutch Hill Veterinary Clinic)</td>
<td>Winnipeg, MB</td>
<td>2018-2021</td>
<td>CVMA</td>
</tr>
<tr>
<td>Postgraduate Education – Catherine E. Dewey (Department Chair, University of Guelph, Ontario Veterinary College)</td>
<td>Guelph, ON</td>
<td>2016-2022</td>
<td>AAVMC</td>
</tr>
<tr>
<td>Association of American Veterinary Medical Colleges – Lorin Warnick (Dean, Cornell University CVM)</td>
<td>Ithaca, NY</td>
<td>2019-2022</td>
<td>AAVMC</td>
</tr>
<tr>
<td>Public – John Gittleman (Dean and Professor, Odum School of Ecology, University of Georgia)</td>
<td>Athens, GA</td>
<td>2017-2023</td>
<td>Council on Education</td>
</tr>
<tr>
<td>Basic Science – Fern Tablin (Professor, University of California-Davis SVM)</td>
<td>Philadelphia, PA</td>
<td>2017-2023</td>
<td>AAVMC</td>
</tr>
<tr>
<td>Veterinary Preventive Medicine – Luke C. Heider (Professor, University of Prince Edward Island CVM)</td>
<td>Charlottetown, PE</td>
<td>2017-2023</td>
<td>AAVMC</td>
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<tr>
<td>Private Clinical Practice – H. Jay Kerr (Private Clinical Practice)</td>
<td>San Ramon, CA</td>
<td>2017-2023</td>
<td>AVMA COE Selection</td>
</tr>
<tr>
<td>Member-at-Large – Philip Kieffer (Clinical Instructor-Large Animal Surgery)</td>
<td>Helsingborg, Sweden</td>
<td>2018-2024</td>
<td>AVMA COE Selection</td>
</tr>
<tr>
<td>Private Clinical Practice – Sarah Mercurio (Veterinarian at Feline Practice)</td>
<td>Rehoboth, MA</td>
<td>2018-2024</td>
<td>AVMA COE Selection</td>
</tr>
<tr>
<td>Private Food Animal Clinical Practice – Norman LaFaunce (Bovine Practice)</td>
<td>Modest, CA</td>
<td>2018-2024</td>
<td>AVMA COE Selection</td>
</tr>
<tr>
<td>Large Animal Clinical Science – Joie Watson (Associate Dean, University of California-Davis SVM)</td>
<td>Davis, CA</td>
<td>2019-2025</td>
<td>AAVMC</td>
</tr>
<tr>
<td>Veterinary Medical Research – M. Julia Felippe (Professor, Cornell University CVM)</td>
<td>Ithaca, NY</td>
<td>2019-2025</td>
<td>AAVMC</td>
</tr>
<tr>
<td>Private Equine Practice – Ann Dwyer (Equine Practitioner)</td>
<td>Scottsville, NY</td>
<td>2019-2025</td>
<td>AVMA COE Selection</td>
</tr>
<tr>
<td>Private Small Animal Clinical Practice – Bruce R. Coston (Small Animal Practitioner)</td>
<td>Moneta, VA</td>
<td>2020-2026</td>
<td>AVMA COE Selection</td>
</tr>
<tr>
<td>Small Animal Clinical Sciences – Amara H. Estrada (Prof. and Assoc. Chair for Instruction-SA Cardiology, University of Florida CVM)</td>
<td>Gainesville, FL</td>
<td>2020-2026</td>
<td>AAVMC</td>
</tr>
</tbody>
</table>

- Terms begin at the start of the AVMA Association year which begins at the end of the AVMA convention, typically July to July with the exception of the CVMA representative which is on a calendar year appointment.
### 3. COMMONLY USED ABBREVIATIONS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>AAALAC</td>
<td>Association for Assessment and Accreditation of Laboratory Animal Care</td>
</tr>
<tr>
<td>AAVMC</td>
<td>Association of American Veterinary Medical Colleges</td>
</tr>
<tr>
<td>ADA</td>
<td>Americans with Disabilities Act</td>
</tr>
<tr>
<td>AVMA</td>
<td>American Veterinary Medical Association</td>
</tr>
<tr>
<td>CCAC</td>
<td>Canadian Council on Animal Care</td>
</tr>
<tr>
<td>CEU</td>
<td>Continuing Education Units</td>
</tr>
<tr>
<td>CHEA</td>
<td>Council for Higher Education Accreditation</td>
</tr>
<tr>
<td>COE</td>
<td>Council on Education</td>
</tr>
<tr>
<td>CVMA</td>
<td>Canadian Veterinary Medical Association</td>
</tr>
<tr>
<td>DVM</td>
<td>Doctor of Veterinary Medicine</td>
</tr>
<tr>
<td>ECFVG</td>
<td>Educational Commission for Foreign Veterinary Graduates</td>
</tr>
<tr>
<td>FTE</td>
<td>Full-time Equivalent</td>
</tr>
<tr>
<td>HAB</td>
<td>Human-Animal Bond</td>
</tr>
<tr>
<td>ICVA</td>
<td>International Council for Veterinary Assessment <em>(formerly NBVME)</em></td>
</tr>
<tr>
<td>JAVMA</td>
<td><em>Journal of the American Veterinary Medical Association</em></td>
</tr>
<tr>
<td>P&amp;P</td>
<td><em>Accreditation Policies and Procedures of the AVMA Council on Education</em> manual</td>
</tr>
<tr>
<td>NAVLE</td>
<td>North American Veterinary Licensing Examination</td>
</tr>
<tr>
<td>RCVS</td>
<td>Royal College of Veterinary Surgeons</td>
</tr>
<tr>
<td>SRG</td>
<td>Statistical Research Group</td>
</tr>
<tr>
<td>US</td>
<td>United States</td>
</tr>
<tr>
<td>USDE</td>
<td>United States Department of Education</td>
</tr>
<tr>
<td>VMD</td>
<td>Veterinary Medical Doctor</td>
</tr>
<tr>
<td>VTH</td>
<td>Veterinary Teaching Hospital</td>
</tr>
</tbody>
</table>
4. THE AVMA AND ACCREDITATION

4.1. History
The AVMA was founded in 1863. In 1890 it established a Committee on Intelligence and Education and in 1906 the Committee took steps to initiate a college evaluation program. All of the colleges of veterinary medicine in the United States (US) and Canada were notified that during the next two years the AVMA would undertake a classification of the colleges considering curriculum, faculty, and physical equipment. It was planned that the colleges would be assigned an A, B, or C classification according to the quality identified by an evaluating committee.

After several years of struggling with the problem, the effort to classify the schools on a purely subjective basis was abandoned, and in 1921 the first detailed list of “Essentials of an Acceptable Veterinary School” was adopted by the AVMA. Since then the “essentials” statement has been revised many times, and a system of accreditation, rather than classification, has been used. In 1946 the entire structure of the AVMA was reorganized and the Council on Education (COE) was formed to replace the Committee on Intelligence and Education. Since that time the COE has conducted the AVMA accreditation program. In the year 2000, the term “essentials” was changed to “standards.”

4.2. Scope and Purpose
The AVMA, through the COE* is recognized by the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA) as the accrediting agency for colleges and schools of veterinary medicine in the US. Every five years, the COE seeks renewal of recognition from each agency. Through a process of applying standard requirements reviewed by the AVMA House of Delegates, veterinary practitioners, faculty and deans of colleges of veterinary medicine, veterinary students, and the public, the COE ensures that minimum standards in veterinary medical education are met by all AVMA-accredited colleges of veterinary medicine, and that students enrolled in those colleges receive an education which will prepare them for entry-level positions in the profession.

The accreditation procedure used by the AVMA is specific to the DVM or equivalent degree program, and is not used to accredit other programs, which may be a part of the educational program in a college. Accreditation is non-transferable. Therefore, all institutions or branches of a college offering educational programs leading to DVM or equivalent degree must be individually accredited. The COE’s realm of accreditation consists of all veterinary colleges in the US and Canada. US and Canadian colleges voluntarily seek accreditation through the AVMA COE. The COE is the only recognized accrediting agency for colleges of veterinary medicine in the two countries. Additionally, the AVMA COE provides accreditation for foreign colleges of veterinary medicine which voluntarily seek such classification, and meet or exceed all standard requirements. As the recognized accrediting body for veterinary medicine, the Council considers the interests of the veterinary profession and society at large in the review of programs.

It is the objective of the AVMA COE to ensure that each graduate of an accredited college of veterinary medicine will be firmly based in the fundamental principles, scientific knowledge, and physical and mental skills of veterinary medicine. Graduates should be able to apply these fundamentals to solving veterinary medical problems for different species and types of domestic animals.

The fundamentals with which each graduate leaves the college are expected to provide a basis for a variety of career activities including clinical patient care, research, and other non-clinical options relevant to animal and human health. These fundamentals should be the basis for a lifetime of learning and professional development.

* The terms “COE” and/or “Council” may be used when referring to the entire COE, the Executive Committee of the COE, a COE site visit team and/or any COE committee or subcommittee.
The Council attempts to conduct all activities in ways that best serve the interests of the veterinary profession, veterinary students, and society, without discrimination on the basis of age, race, gender, or creed. While recognizing the existence and appropriateness of diverse institutional missions and educational objectives, the Council subscribes to the proposition that local circumstances do not justify accreditation of a substandard program in veterinary education leading to a professional degree. Accreditation by the COE does not enable colleges to participate in Title IV student loan programs.

4.3. Charge of the Council on Education

a. Have autonomous authority to evaluate schools and colleges offering a professional degree in veterinary medicine, according to established standards; make accreditation decisions; and assign a classification of accreditation to each such school or college;

b. Meet the needs of society by promoting active programs in veterinary medical education by, among other things, encouraging and assisting schools and colleges of veterinary medicine to meet the requirements for accreditation;

c. Study and recommend methods of instruction, and promote the continual improvement of veterinary medical education in all its facets;

d. Recommend standards for accredited colleges offering a professional degree in veterinary medicine; such standards shall pertain to organization, finances, physical facilities and equipment, clinical resources, information resources, students, admissions, faculty, curriculum, research programs, and outcomes assessment;

e. Publish an annual list of veterinary medical colleges showing the current accreditation status of each;

f. Provide consultation to proposed, developing, and existing veterinary medical colleges;

g. Review and make recommendations to the AVMA Board of Directors concerning the activities of committees concerned with veterinary specialties, veterinary technicians, graduates of foreign colleges of veterinary medicine, and licensing examinations; and

h. Recommend curriculum changes to enhance the veterinarian’s ability to meet changing professional demands and societal needs.

4.4. Function

A major function of the AVMA COE is to ensure quality professional veterinary education by conducting periodic accreditation reviews to determine the degree to which a college or school of veterinary medicine meets the Standards of Accreditation and its own stated goals and objectives; and through the accreditation process, protect the interests of the general public as related to veterinary medicine. The Council recognizes only those programs which meet the accreditation standards developed and agreed upon by various communities of interest, including the public. Additionally, the Council interacts and communicates with the AVMA Board of Directors regarding veterinary specialty boards, veterinary technician programs, graduates of foreign veterinary colleges, and licensing examinations. The Council’s accreditation program ensures quality education for veterinarians and ultimately leads to quality veterinary care for animals.

The AVMA voluntarily seeks recognition from the USDE to ensure credibility. The USDE recognizes accrediting bodies such as the COE that follow USDE guidelines of operation. Through this process, the COE adopts policies and procedures which ensure compliance with the published guidelines of the USDE. The COE demonstrates that accreditation decisions are independent of, and not influenced by the AVMA or its recognized affiliate organizations. In general, USDE guidelines seek assurance that the COE has clearly documented Standards of Accreditation which address all areas of the program leading to the DVM or equivalent degree, that the Standards are applied evenly and fairly to all colleges seeking accreditation, and that students are provided with accurate information regarding the program and given reasonable assurance of successful completion. Proper documentation of accreditation outcomes is sent to the USDE in a timely manner. The AVMA, through the activities of the COE, has been recognized as an accrediting body for veterinary medicine by the USDE since 1952.
Non-governmental recognition of accreditation is voluntarily sought by the AVMA through CHEA. CHEA is a highly respected, non-profit organization which assists accrediting bodies like the COE, in assuring quality in the accrediting process. The Council identifies CHEA as the “gold standard” to assure that: 1) standards are reviewed; 2) college evaluation is conducted in a manner which measures the educational quality of the program; 3) fair and informed means are used in the application of the standards and in the conduct of the site visit; 4) that the public is provided with high quality professional veterinary practitioners; and 5) the quality of teaching, research, and service is continually improving in veterinary medical colleges. Through the guidance of CHEA, the Council judges the appropriateness of institutional and program purposes, and the educational outcomes indicating that the purposes are being met on an ongoing basis. The AVMA COE has been recognized by CHEA and its predecessors as an accrediting body for veterinary medicine since 1949.

Foreign colleges of veterinary medicine may seek AVMA accreditation status, but neither the USDE nor CHEA recognition is required for the activity.

5. FUNDAMENTAL PRINCIPLES OF ACCREDITATION

5.1. COE Mission Statement
The mission of the AVMA COE is to use clearly defined Standards of Accreditation and fairly and accurately evaluate DVM (or equivalent) veterinary medical education programs. The Standards are interpreted and applied by the Council to each school/college in relation to its mission. Through the accreditation process the Council is fully dedicated to protecting the rights of the students, assisting the schools/colleges to improve veterinary medical education, and assuring the public that accredited programs provide a quality education. In all its activities, the COE is committed to operate with collegiality, integrity, and confidentiality and will strive to continuously improve the accreditation process.

5.2. Integrity
To encourage ongoing confidence in the specialized accreditation process, both the college and the COE must be assured that functions assigned to each entity are clearly understood. The following are some of the areas where special efforts must be made to ensure integrity of the process:

a. The college must present accurate information to the Council for accreditation evaluation, and must allow access to all parts of the operation during the site visit.
b. The college must refrain from misleading advertisement of the program, and must correct any inaccuracies.
c. The college must make every effort to protect students. The protection must include, but is not limited to unbiased grading procedures, and access to educational opportunities, scholarships, and student services. The USDE requires that students be made aware of the appropriate tuition refund procedure upon withdrawal.
d. When a college releases information regarding its accreditation status, the information must be correct. Should misinformation be released, the college must correct the information in a timely manner (refer to Section 9.4).
e. The Council must conform to the AVMA Conflict of Interest Policy (refer to Section 5.4).
f. During the evaluation process, the Council must evaluate the college only on the Standards of Accreditation. Application of the standard requirements to all college programs must be unbiased.
g. The site visit and deliberation toward the assignment of accreditation status must be conducted with the highest ethical standards.
h. All materials, discussions, and decisions of the Council regarding accreditation must be confidential.
i. The Council must recognize college and program diversity when making accreditation decisions.
j. The Council must inform all appropriate federal, state, university, and college officials of matters related to accreditation in a timely manner.
5.3. Confidentiality

To ensure that all matters dealing with accreditation of colleges of veterinary medicine are conducted with integrity and objectivity, the COE has adopted a confidentiality policy. Those who participate in COE activities, including but not limited to elected COE members, non-COE site team members, and appropriate AVMA staff, must maintain the confidentiality of all non-public information relating to accreditation and veterinary education.

a. Communications with colleges, accrediting and state agencies, and the public. In order to provide colleges, accrediting and state agencies, and the public with the most accurate information possible, the COE has adopted specific policies and procedures governing all COE communications. Communications that are not consistent with the COE’s policies and procedures and that have not been approved and issued by the COE are strictly prohibited. All discussions, observations, and documents associated with site visits and accreditation decisions are confidential to the COE and should not be discussed with anyone other than elected COE members, appropriate AVMA and Association of American Veterinary Medical Colleges (AAVMC) staff, and non-COE site team members when necessary. Information regarding accreditation decisions cannot be shared with any individual or group other than: 1) the university and college through the official report of evaluation, 2) reports to accrediting and state agencies, and 3) the public through official announcements. Any inquiries made to COE members regarding the accreditation process or specific programs should be referred to the COE Chair and appropriate AVMA staff.

b. Communications with AVMA/AAVMC Staff, Officers, and Members. It is the policy of the COE to ensure that its accreditation decisions are independent and not subject to interference from any organization or individual. Appropriate AVMA/AAVMC staff and the designated AVMA COE observers may attend COE meetings and provide assistance to the COE as necessary, and shall maintain the confidentiality of all non-public information regarding accreditation decisions. The COE Chair and appropriate AVMA staff may share non-public information regarding accreditation decisions with appropriate AVMA officials when it is of a privileged legal nature. Should the need arise to consult with other AVMA-affiliated individuals, outside experts, or other consultants, the COE Chair and appropriate AVMA staff shall be consulted beforehand.

5.4. Avoidance of Conflict of Interest

To ensure that all matters dealing with accreditation of colleges of veterinary medicine are conducted in an unbiased manner, the COE has adopted a Conflict of Interest Policy (see Section 21.1, Appendix A). The policy extends and pertains to those COE members who have immediate family (parents, spouses, and siblings) in any of the potential conflict areas listed. Further, the policy extends to all AVMA support staff.

a. COE Members and Consultants

No member shall serve on a site visit team who:

- Is a graduate of any program in the institution being evaluated.
- Has collaborative research, teaching, or service interests with a key administrator or faculty member of the institution being evaluated. (Holding a patent interest, shared research grants, and contract teaching are examples of collaboration.)
- Is or has been employed by the institution being evaluated. (Members who have been interviewed for employment at an institution wherein some conflict arose should exclude themselves from consideration as a site visit team member.)
- Has served as a consultant on accreditation matters with the institution being evaluated.
- Is an employee or former (within the past five years) employee of the AVMA.
- Has reason to believe other conflicts of interest exist that have not been listed herein. (The member should communicate with the Chair of the Committee on Evaluation for clarification of any concerns.)
b. AVMA Staff
Although AVMA staff members do not participate directly in decisions regarding accreditation of colleges, they are in a position to influence the outcomes of the process. Conversely, staff provides continuity to the evaluation process. No AVMA staff member will serve on a site visit team who:

- Has graduated during the past five years from a college being evaluated.
- Has been employed during the past five years by a college being evaluated.
- Has close personal or familial relationships with key personnel in the college being evaluated.

c. Public Members
No public member shall be appointed to the COE who:

- An employee, member of the governing board, owner, or shareholder of, or consultant to, an institution or program that either is accredited or preaccredited by the COE or has applied for accreditation or preaccreditation;
- A member of any trade association or membership organization related to, affiliated with, or associated with the COE; or
- A spouse, parent, child, or sibling of any of the individuals listed above.

5.5. Quality Assurance
The COE is committed to sustained quality and continued improvement in veterinary medical education programs, but does not intervene on behalf of individuals or act as a court of appeal for individual matters of admission, appointment, promotion or dismissal of faculty, staff, or students. The COE will review complaints related to college compliance with the accreditation standards. Complaints and/or comments must be written, addressed to the COE, and signed with a personal signature for consideration/investigation. Contents of complaints/comments will be shared with the school/college, and the COE. The school/college will be given the opportunity to respond to the complaints/comments and that response will be used by the COE in resolving the complaint.

5.5.1. Third Party Comment/Complaints
The COE provides opportunity for interested parties to submit, in writing, comments concerning college qualifications for accreditation. The Council publishes a notice of its plans to conduct a comprehensive site visit seeking reasonable assurance or accreditation status in the *Journal of the American Veterinary Medical Association* (JAVMA). This notice indicates the deadline for receipt of third-party comment. Comment must address the Standards of Accreditation.

5.5.2. Complaints Directed at a College and its Accreditation Status
Students, faculty, constituent veterinary medical associations, veterinary state boards, and other interested parties may submit an appropriate signed complaint to the COE regarding an accredited veterinary or developing college which has made application for accreditation. The COE will take every responsible precaution to protect the identity of the complainant from being revealed to the college; however, the Council cannot guarantee confidentiality of the complainant.

An appropriate complaint is defined as one alleging: 1) an accredited or pending college program is not in compliance with the Standards of Accreditation and 2) the practice, condition, or situation of a continuing or pervasive nature, as opposed to an unfair or arbitrary act of an individual or an act isolated in nature. In accord with the role of COE, matters will be addressed in an investigative manner rather than as a mediator. Only written signed complaints will be considered by the COE. The COE strongly encourages all parties to attempt resolution of complaints before they are brought to the Council. If the complaint includes issues already being addressed by other entities, the Council will take no action on the complaint until such adjudication or litigation is concluded.
Any written complaint by a third party (individual such as faculty, staff, public, or organization) concerning the quality of ethical conduct of an accredited college of veterinary medicine will be received by staff, who will acknowledge receipt of the complaint within seven (7) working days. AVMA staff will make a preliminary investigation of the initial complaint and report to the COE Executive Committee within 30 days. As part of this review, the staff will determine whether the complaint is appropriate for review by the Council, that the complaint is related to items which have specific impact on the educational process and/or the Standards. The Council is not the appropriate body to review allegations of malpractice.

After review of the complaint and the report of the staff investigation, the Executive Committee will report its findings to the Council and the complainant within 30 days from receipt of the staff report. If, in the judgment of the Executive Committee, the complaint appears to be of sufficient substance to affect the accreditation status of the college, it will be investigated further by the Council. Upon completion of the investigation, the Council will take appropriate action to bring the accreditation status of the college into conformity with the established classifications. If an investigation of the complaint by the Council is deemed necessary, it should be completed within a period of not more than six (6) months after receiving the report from the Executive Committee.

If an adverse decision is made concerning the accreditation classification of a college, the college shall have the right of appeal (see Section 10.12, Appeals of Adverse Outcomes). In any case, the college complained against will be informed of the nature and source of the complaint and the resultant action, if any, contemplated by the Council before such action is taken. The complainant will be notified in writing of the results of the investigation and any action taken.

5.5.3. Complaints Directed at the COE and its Accreditation Activities
Interested parties may submit an appropriate, signed complaint to the COE regarding failure of the Council to follow policies and procedures, failure of the Council to use sound professional judgment in applying the Standards of Accreditation, or failure of the Council to consider all evidence in accreditation decisions. Complaints received addressing other COE activities will not be considered. The COE will determine whether the information submitted constitutes an appropriate complaint and will proceed according to policy.

i. The COE will acknowledge receipt of the information within seven (7) days and provide the complainant with the policy and procedures manual.
ii. Within 60 days, the COE will collect additional information internally, if necessary, and conduct an initial screening to determine whether the complaint has merit.
iii. Within 90 days of receipt of the complaint, the COE will inform the complainant of the results of the internal screening.
iv. If the complaint is determined to have merit, the appropriate COE committee will consider the complaint in closed session if the discussion will involve specific individuals or colleges; otherwise, the complaint will be discussed in open session. These actions will occur at the next scheduled COE meeting.
v. The COE will consider changes in policy and procedure if indicated, and initiate the change process in a timely manner.
vi. The COE will inform the complainant of any actions taken within 30 days of the COE meeting.

5.6. Programmatic Advertising and Student Recruitment
Accredited veterinary medical colleges, or individuals acting on their behalf, are expected to exhibit integrity and responsibility in programmatic advertising and student recruitment. Responsible self-regulation requires rigorous attention to the ethical principles (listed below) in all matters of conduct.

Any advertising pertaining to a college that is accredited by the COE must be clear and comprehensive, indicating the accrediting body by name and specifying the accreditation status of the college. Any
reference to a specific aspect of the college and the length of the program shall indicate that educational standards for the degree are being met.

The COE accredits colleges of veterinary medicine in the US and Canada, and also some foreign countries. If a college or university makes public disclosure of accreditation or preaccreditation status granted by the AVMA, all information related to the outcome of accreditation must be accurate in all respects, must disclose that the accreditation status affects only the college of veterinary medicine and no other entities of the university, and must provide the name, address, and telephone number of the COE at the AVMA.

Colleges shall adhere to the following principles of ethics:
   a. The primary emphasis on advertising veterinary professional education should be on the educational program.
   b. All statements and representations must be clear, factually accurate, and current.
   c. Catalogs and other official publications (printed or electronic) should be readily available and accurately depict:
      • Purpose and goals of the program
      • Admission requirements and procedures
      • Degree requirements
      • Faculty, with degrees held and the conferring institution
      • Tuition, fees and other program costs, along with the procedure for refund and withdrawal
      • Financial aid programs
   d. College catalogs and other official publications (printed or electronic) describing career opportunities should provide clear and accurate information about:
      • National and state requirements for eligibility for licensure
      • Any unique requirements for career paths, or for employment and advancement opportunity in the profession.
   e. When a college discloses its accreditation or preaccreditation status to the public, the COE must verify the accuracy of the information. The public disclosure of the accreditation status by the college must be sent to the COE and it must include:
      • A statement that the college grants the DVM or equivalent degree,
      • A statement that the college is accredited by the COE, and the address, e-mail, and telephone number of the COE. If incorrect or misleading information is included in the public disclosure of the accreditation status of the college, the COE will provide the accurate accreditation status to the public, make corrections in reports of site visit reviews or reports of evaluation, or the COE’s accrediting or preaccreditation actions with respect to the college, as necessary. The college will be notified that the COE intends to correct the incorrect or misleading information disclosed by the college. Public disclosure of COE corrections will be made in the *JAVMA*, the AVMA website, or other avenues. Should a college release additional information, the COE must be notified. The Council may maintain or lower the accreditation status assigned until it is satisfied that the public is no longer being misled.

6. **ACCREDITATION EVALUATION**

6.1. **General Policies**
Colleges of veterinary medicine are evaluated by the Council on the basis of compliance with the standards as each relates to the mission of the college. The Council bases its decision on compliance with the findings related to the particular standard, and not on impressions of the overall college program. Information on which standards are evaluated includes the college self-study report and the findings of a site visit team. It is recognized that assessment of compliance with a standard may change between the submission of the self-study, the site visit, and when the full Council makes its final determination. There
must be a specific time frame in which the facts and data are considered and an accreditation decision is made. Failure to function within these parameters prohibits effective accreditation decisions. Procedures exist to provide a timely reevaluation by the Council at the request of a college that believes identified deficiencies have been corrected.

The COE, through the activities of AVMA support staff and the COE Chair, provides technical assistance to colleges seeking a letter of reasonable assurance, accreditation, or renewal of accreditation. This support is in the form of telephone conversations or written or electronic communications between the colleges and the Council Chair or AVMA staff. Information regarding the self-study document is provided based upon the inquiry. The Chair of the COE or AVMA staff responds to written inquiries. In conjunction with either the spring or summer meetings of the AAVMC, a session may be offered for the deans of veterinary colleges. The meeting focuses on changes to the standards and/or self-study procedure and is conducted by the AAVMC liaison and/or AVMA staff.

The Council and/or AVMA staff offers consultation to any US or Canadian college concerning accreditation or reasonable assurance evaluation. The Council responds to public requests for accreditation information by providing the Accreditation Policies and Procedures of the AVMA Council on Education manual. The identity of the Council’s principal administrative staff is published in this manual.

6.1.1. Procedures for Accreditation Evaluation
The AVMA will evaluate and assign a classification of accreditation to any college of veterinary medicine at the request of the dean of the college and the chief executive officer of the parent institution. The accreditation procedure consists of the following:

a. Receipt of written request for accreditation.
b. Receipt and review of appropriate reports submitted by the college.
c. A comprehensive site visit to the college.
d. Preparation of a report of evaluation by the site visit team.
e. Review of the evaluation report by the full Council on Education.
f. Assignment by the full Council of a classification of accreditation.
g. Interim reports including any changes to the application of Standards – annually for accredited schools, and every six months for those provisionally accredited, granted Reasonable Assurance, on probationary accreditation, or accredited with minor deficiencies.
h. Reevaluation (self-study and comprehensive site visit) at intervals of no more than seven years or after any major change. Focused site visits may be required at Council discretion.
i. Upon written notification, a college may postpone or cancel a scheduled accreditation site visit or may withdraw from the accreditation process at any time.

In addition, the Council will publish a list of all accredited colleges after every Council meeting, including the classification of each and the date of last evaluation. A college may withdraw its request for initial accreditation at any time prior to the final action by the Council.

Procedures for reaffirming, changing, revoking, or reinstating accreditation status are identical with steps ‘b’ through ‘i’ above. Accreditation will be withheld only for cause, after review, or when a college does not permit reevaluation after notice.

6.2. Reasonable Assurance
If a proposed US or Canadian veterinary college seeking a Letter of Reasonable Assurance desires consultation and advice on planning, the college may request a consultative site visit. A fee will be charged for a consultative and initial comprehensive site visit. The consultative site team is composed of COE site visitors and AVMA staff who provide an unofficial appraisal of the program as related to planned
compliance with the Standards. The proposed college must submit a detailed self-study report of evaluation noting the plan eight (8) weeks in advance of the site visit, and after the visit, the COE will provide an unofficial written report of evaluation noting the readiness for a complete site visit. All expenses for the consultative site visit are paid by the proposed college.

Upon request, the Council will consider evaluation of an existing, proposed, or newly established college. The Council and/or AVMA staff offers reasonable consultation to any college concerning accreditation including Reasonable Assurance and Provisional Accreditation. Procedures for Reasonable Assurance evaluations are identical to steps ‘a-f’ and ‘i’ of the “Procedure for Accreditation Evaluation” (Section 6.1.1). Reasonable Assurance does not confer accreditation of any kind on a developing college.

Upon request, Reasonable Assurance evaluations and site visits for proposed programs are conducted essentially the same as evaluations for established accredited programs. The self-study report, the site visit, and the report of evaluation address the standard requirements based on plans and existing resources such as budget, facilities, faculty, and administration. A Reasonable Assurance evaluation is based on planned action and preliminary arrangements so long as the Council deems the implementation of such planned actions to be reasonable, pragmatic, and feasible within an appropriate time frame.

A veterinary college is considered eligible to apply for a Letter of Reasonable Assurance if the parent institution:

a. Is accredited by a regional or national institutional accrediting body recognized by the USDE (in Canada the institution must be recognized by the appropriate federal or provincial body),

b. Is legally authorized to confer a professional degree, and

c. Employs a veterinarian as dean or chief executive officer of the college of veterinary medicine.

A formal letter of application from the dean and/or chief administrative institutional officer must be submitted to the AVMA Council on Education to begin the process of obtaining a Letter of Reasonable Assurance. Once a college is granted Reasonable Assurance, a liaison committee shall be appointed by the COE chair. The committee will be composed of up to four COE members. This committee is charged with creating and maintaining a direct line of communication between the COE and the college. Members of the liaison committee will not participate in accreditation actions regarding the college.

The college must submit a self-study document as outlined in the Accreditation Policies and Procedures of the AVMA Council on Education manual (most recent edition) that addresses each standard. Through its self-study, the college must address business and educational plans. Programs must address each standard by carefully describing how compliance with that standard will be ensured. The self-study document and information gained on site are the basis for the Reasonable Assurance evaluation by the Council, and a decision to grant Reasonable Assurance is made by the full Council. The college is evaluated by the site team as though it were a comprehensive site visit for an accredited school.

A college that fails to be granted Reasonable Assurance following an evaluation by the COE may not apply for reconsideration for 12 months after the date of the Council’s decision.

A college granted Reasonable Assurance must offer admission to and matriculate its first class of students within three years. A college that delays offering admission to and matriculating its first class beyond three years must submit a new formal letter of application to the AVMA COE.

Colleges granted letters of Reasonable Assurance or Provisional accreditation will submit interim reports to the Council every six months. A focused site visit can be conducted at any point at the Council’s discretion.
6.3. Provisional Accreditation
If a college granted Reasonable Assurance is making adequate progress in complying with the Standards, Provisional Accreditation may be granted to that college on the date that letters of acceptance (admission) are mailed to members of the initial class. Following the granting of Provisional Accreditation status and during the first semester of the second year of the initial class matriculation, a comprehensive site visit will be conducted to determine whether the program is making progress in complying with the Standards. The Report of Evaluation from that site visit will clearly describe and identify compliance and/or non-compliance with each Standard at the time of the site visit. If the Council determines that deficiencies are severe and compliance with the Standards is unlikely, the college may be placed on Terminal Accreditation. If the Council determines that the program is making reasonable progress in complying with the Standards, Provisional Accreditation may be continued.

A focused site visit may be conducted at any time during the developmental period (i.e., period of granting Reasonable Assurance to granting Accredited status). A comprehensive site visit is conducted during the second half of the final year of the first class that matriculated. If the Council determines that the college is in compliance with each Standard, Accredited status will be granted. If the Council determines the college does not comply with the Standards, the college will be placed on Terminal Accreditation. Programs placed on Terminal Accreditation are required to follow the procedures outlined for Terminal Accreditation status to protect the interests of enrolled students.

When Reasonable Assurance or Provisional Accreditation is granted, interim reports are required at six-month intervals to monitor the program’s progress in complying with the Standards. In particular, changes in business or educational plans must be addressed in detail.

Provisional Accreditation status may remain in effect no more than five years if the program complies with the necessary requirements. Reasonable Assurance or Provisional Accreditation status may be withdrawn at any time during the developmental period if the Council determines the college is unlikely to comply with a Standard(s). In the latter case (withdrawal of Provisional Accreditation status), the college may be placed on Terminal Accreditation.

The Council has no mechanism for providing assistance to developing colleges outside the US or Canada; the Reasonable Assurance process and Provisional Accreditation status are limited to US and Canadian veterinary colleges.

Decisions on granting Reasonable Assurance, Provisional Accreditation, or Accredited status for site visits that occurred less than 90 days prior to the next scheduled COE meeting will usually be deferred to the following meeting. The Council meets twice annually.

If the Council notes deficiencies that may result in an adverse accreditation action, the Council will defer the accreditation action and will provide the college an opportunity to respond in writing pursuant to Policy 10.6 of this manual. If the Council takes an adverse accreditation action after the college has had the opportunity to respond under Policy 10.6, then the college will be reminded of the appeal process.

6.4. Foreign Veterinary Colleges
The expressed desire of foreign veterinary colleges for input and evaluation of their programs by the AVMA COE is in recognition of the high standards of veterinary medical education in the US and Canada. It is further recognized that the AVMA COE plays a significant role in setting the standards for international veterinary education. Should a foreign college decide to challenge in a court of law an adverse accreditation decision made by the COE, the filing must be done in a US court of competent jurisdiction seated in Illinois.
Foreign veterinary colleges are defined as colleges of veterinary medicine located outside the US and Canada. The COE believes that accrediting foreign veterinary colleges supports and encourages the achievement of high standards of veterinary medical education worldwide thus improving animal and human health. It is the objective of the AVMA COE to ensure that each graduate of an accredited college of veterinary medicine is firmly based in the fundamental principles, scientific knowledge, and physical and mental skills of veterinary medicine.

To initiate the process for a foreign college to be accredited, a written request must be received by the AVMA COE from the dean of the college and the president/provost of the university. The Council and AVMA staff respond to all inquiries regarding accreditation, and provide the Accreditation Policies and Procedures of the AVMA Council on Education to foreign colleges requesting such information.

Accreditation is voluntary; the AVMA COE does not solicit applications. AVMA COE accredited US and Canadian, and AVMA COE accredited foreign colleges will be given site visit scheduling priority over nonaccredited foreign institutions seeking accreditation. Guidelines for site visits to foreign colleges are contained in the COE P&P manual, which is revised annually. The COE consults with existing accreditation and licensing agencies in countries holding-seeking international accreditation.

**6.4.1. General Information**

The Council reserves the right to deny a request for a site visit to a college in a country where conditions exist that might place the safety of site team members at risk. The judgment of the Council will prevail in such decisions.

The cumulative number of all site visits (US, Canadian, and foreign) in a 12-month period shall not exceed 12 so all requests may not be met in a given year. If a foreign college is denied initial accreditation, the institution will not be re-evaluated for a period of at least two years. Assurance must be provided to the Council that deficiencies have been corrected before a succeeding site visit is scheduled.

Enrollment demographics will not be considered in the accreditation process, or in decisions related to accreditation. Although cultural diversity is recognized, the Standards of Accreditation are applied in the same manner for all institutions in the accreditation process.

Language is not considered a barrier to accreditation; however, all matters and information related to the accreditation process must be in English. Accredited foreign colleges that do not conduct all instruction in English are considered to produce graduates whose English language skills are unknown to the COE. State boards of veterinary medicine in the US and Canada (provinces) will be notified of this fact as appropriate.

Initial or continued accreditation of a foreign veterinary college will be contingent upon:

i. The licensing body of that foreign country recognizing that graduates of US and Canadian AVMA COE accredited veterinary colleges have met the same educational standards as graduates of the AVMA COE accredited foreign veterinary college.

ii. The foreign country conferring licenses to graduates of AVMA accredited US and Canadian veterinary colleges that are identical to those given to graduates of that country’s AVMA COE accredited veterinary college, by a licensing process no more difficult than that required of graduates of that country’s AVMA COE accredited veterinary college.

**6.4.2. Educational Improvement**

There are a number of methods through which the AVMA and its COE can assist in the improvement of education and/or accreditation of foreign veterinary colleges including:
i. The provision of copies of the standards used for accrediting US and Canadian programs to serve as guidelines for standards.

ii. A consultative site visit* to evaluate a college’s preparedness for accreditation. If a college seeks AVMA COE accreditation, a consultative site visit and appraisal of the program must be conducted. The site visit is conducted at a time to avoid conflict with previously scheduled site visits.

iii. A comprehensive site visit for accreditation and recognition of the program. The site visit and evaluation is conducted using the same processes as employed for US and Canadian colleges. The evaluation is conducted only at the convenience of the Council and its members.

iv. COE accreditation of a foreign veterinary college confirms that the program complies with the AVMA COE Standards of Accreditation. Accreditation is not an endorsement that replaces or overrides international rules and regulations or state, provincial, and national licensing and practice act guidelines.

The participation of the COE in these accreditation activities helps to ensure AVMA’s role in international veterinary education.

6.4.3. Procedures

Foreign veterinary colleges may seek accreditation status from the AVMA COE through the procedures established by the COE. Accreditation may be of value to foreign colleges for purposes of recognition of program quality and/or as a means to assist graduates who choose to practice veterinary medicine in the US. Throughout the process of seeking AVMA COE accreditation status, the Accreditation Policies and Procedures of the AVMA Council on Education manual will serve as the basis for all procedures and decisions. Standard requirements described in the manual will be applied to all programs seeking accreditation. The council will acknowledge social, cultural, and educational diversity in a fair and equitable manner; but veterinary medical education program quality as measured by the standards is non-negotiable.

Site visits are initiated by the college seeking or renewing accreditation. In cases where conditions at an accredited college have changed dramatically, jeopardizing the institution’s ability to meet the standards as noted in an annual report, or when third party comments are received from faculty, students, staff, or the public, the Council may conduct a focused or comprehensive site visit to determine whether the conditions or reports have validity which might negatively impact the accreditation status of the college. The AVMA COE has no process to assist developing foreign colleges. Accreditation may be sought only by established foreign colleges†.

6.4.4. Site Visits

Four types of site visits may be conducted by the COE:

Consultative – If an established foreign veterinary medical college desires consultation and advice on its readiness for attaining accreditation status, the college must request a consultative site visit. The consultative site visit team is composed of COE site team visitors and AVMA staff who provide an unofficial appraisal of the program as related to compliance with the standards. A foreign college seeking accreditation status must provide the COE with five copies of a video (DVD format) detailing the physical facilities and educational programs of the college. The video is limited to 30 minutes duration and shall be provided to the COE at the time the self-study is submitted. The college must submit a detailed self-study report 12 weeks in advance of the site visit (if self-study does not arrive at least 12 weeks prior to the first day of the scheduled site visit, the site visit may be cancelled or

* See Section 6.4.4. for definitions of site visits

† An established foreign veterinary medical college is defined as an institution able to provide five years of data on graduating classes.
rescheduled to a later date). After the visit, the COE will provide an unofficial written report of evaluation noting the readiness for a comprehensive site visit.

As a college is seeking initial accreditation and a consultative site visit has been scheduled, two COE reviewers will be assigned to conduct a pre-review of the self-study. The COE reviewers, consultative site team, and chair of the COE Evaluation Committee, in consultation with COE staff, will review the self-study and determine if the college appears to meet all or most of the standards. In the event it is believed that the college falls short of meeting one or more standards, a consultative site visit will not be conducted and the college will be notified of the perceived deficiencies.

A site team composed of three experienced COE site visitors appointed by the Chair of the Evaluation Committee (Canadian COE site visitors may be considered when selecting a site visit team) and one AVMA staff member will conduct the consultative site visit. In addition, the team will be accompanied by one or two current COE member(s) (non-voting observers). The consultation generally takes three to four days. Appropriate college personnel and the site team chair will prepare an agenda that ensures evaluation of all areas of the program.

The report from the consultative site visit is the responsibility of the team chair and consists of the following sections:

- Section I – an introductory paragraph providing the name and location of the college, the identity of the chief academic officer of the college and of the parent institution, and a brief history of the college.
- Section II – the eleven Standards of Accreditation and a short description of perceived deficiencies.
- Section III – program strengths in numerical order, without priority.
- Section IV – an appraisal of the preparedness of the college for a comprehensive site visit.
- Section V – other comments that may assist the college in improving its self-study, designing the agenda for the site visit, or other matters.

The report is based upon the evaluations of the site team and is not approved by the COE. Questions related to the report should be directed to the COE reviewers assigned to conduct a pre-review of the self-study and the post-site visit report, who will report the findings from the consultative site visit team as information only, to the Council during the next regularly scheduled meeting.

No further action is taken by the COE following a consultative site visit unless identified deficiencies are corrected, the Council determines that a comprehensive site visit is warranted, and a formal request is received from the college. If a comprehensive site visit is conducted, the procedure followed is identical to that for evaluation of US and Canadian colleges. COE site visitors may not serve on both the consultative and comprehensive site visit teams for foreign veterinary colleges.

Consultation with an Accredited College – An accredited foreign college may request consultation from the COE by inviting a consultative site team to visit the college. A request should focus on a specific item(s) wherein the college wishes advice. The advice provided is not an official recommendation from the COE.

Comprehensive – After receipt of the COE’s consultative report and the submission of a detailed response to all points raised by the consultative site team, an established foreign veterinary medical college seeking accreditation may request a comprehensive site visit. The application for a comprehensive site visit by the COE must occur within three years of the consultative site visit. If the COE does not receive such application within the three-year period, the college must wait two years before reapplying. The process is the same as for a US or Canadian college. Comprehensive site visits
are required at least once every seven years to retain accreditation status. The college must provide a complete self-study report, and after the site visit is conducted, the college is apprised of its status.

When requested by a school, at the discretion of the COE and in collaboration with international accreditors of veterinary school, will conduct joint site visits to foreign veterinary colleges.

The COE will cooperate with the international accreditors in setting the time for the visit and establishing a schedule. Each accrediting agency will independently make a decision on the accreditation status of the college. The COE will use its scoring rubric and Standards of Accreditation to assess the school’s compliance with the Standards. Any addendums to the Report of Evaluation to account for the variance of standards between accreditors that do not specifically address the COE’s Standards of Accreditation will be removed from the final COE report.

COE site visitors serving on a joint site visit team must be experienced in accrediting schools and are required to have participated in at least one site visit prior to the joint site visit.

The COE site visit team will be decided by the COE (see Foreign site visits, Section 11.3 and 18.1).

Focused – A focused site visit can be requested by an AVMA COE accredited foreign veterinary college, or be initiated by the COE based upon the contents of the college annual report or third party (faculty, student, or public) comment. The focused site visit is usually conducted by one or two COE site visitors, one of whom served on the original comprehensive site visit team. The college is requested to provide information regarding the concerns prompting the site visit; the COE will assign an accreditation status based upon evaluation of compliance with the standards.

Visits to foreign veterinary colleges may require slight alterations in several areas of standard operating procedure, but not in interpreting the standards.

Selecting Site Team Members
The site team selection process for US colleges is used (see Section 11.3), with the following exception:

The geographically closest, appropriate veterinary licensing body or association (state, district, regional, national, or other) is asked to appoint two members in good standing to the COE site visit team. The representatives appointed must have no conflict of interest with the college, and must verify this fact by signing the AVMA Conflict of Interest Statement for Site Team Members. The individuals selected must speak fluent English.

Accredited Graduates
Students enrolled in and completing the professional program in an AVMA COE accredited foreign veterinary college will be considered graduates of an accredited college if they graduate after the date of the site visit resulting in accreditation status. Persons receiving a diploma, certification, qualification, or other designated degree prior to the date of the site visit resulting in AVMA COE accreditation will not be considered graduates of an AVMA COE accredited college.

Students enrolled in accredited schools/colleges/faculties of veterinary medicine may or may not be permitted to transfer to another AVMA COE accredited program. Transfers are at the discretion of each institution. Many of the foreign accredited programs follow the European system of education (five years post-secondary education [high school]) that results in a Bachelor’s degree in veterinary science (medicine). US/Canadian systems require several years of “preveterinary” education (many enrolled students already have a Bachelor’s or higher degree upon admission) where humanities, sciences, languages, mathematics, and animal sciences are taught. The degree awarded by US/Canadian schools/colleges is the DVM (or equivalent). Further, the curriculum of each
US/Canadian school/college varies widely, from traditional didactic delivery to all problem-based learning. These modes of delivery also will affect the ability for student transfer. The Council encourages transferability, but leaves the matter to each institution.

Communications
Each AVMA COE accredited foreign veterinary college is required to provide an annual report to the AVMA COE. This report is used to assess its progress and to identify major changes in the college or its support units regarding the standards.

All correspondence and conversation with the AVMA, including the self-study document, must be in English. If any portion of the veterinary educational program is conducted in a language other than English, the AVMA COE may employ a translator of its choosing. The cost of the translation will be charged to the college.

In summary, all matters pertaining to accreditation of foreign veterinary colleges are presented in the Accreditation Policies and Procedures of the AVMA Council on Education manual. This document is adhered to as the COE assesses the progress of the college in meeting the standards.

6.4.5. Fees for Foreign Veterinary Colleges
All costs for site visits are paid by the college seeking accreditation or continuation of such status. Fees are charged for consultative and initial comprehensive site visits. The cost associated with the time commitment of site team members is not assessed.

An annual administrative fee is charged to recover direct and indirect costs associated with the accreditation of foreign veterinary schools including charges for personnel, office space, communication, materials and supplies, and legal and business office support. Sixty days before arrangements are made for any visit or consideration of the annual report to evaluate the accreditation status of the college, the annual fee must be current, and the college requesting the visit must confirm in writing its commitment to pay all associated costs for the site visit team.

Failure to pay any fee indicates a desire to discontinue the accreditation process. If payment is not received within 60 days of the time indicated, the process will be discontinued and accreditation status withdrawn.

The administrative fees are reviewed annually and subject to change based upon the rate of US inflation and/or other factors.
7. REQUIREMENTS OF AN ACCREDITED COLLEGE OF VETERINARY MEDICINE

The following definitions will be used in applying the Standards:

- **Must**: Indicates a mandatory requirement
- **Should**: Indicates the recommended and highly desirable manner in which to attain the Standard

The Standards of Accreditation

7.1. Standard 1, Organization

The college must develop and follow its mission statement.

An accredited college of veterinary medicine must be a part of an institution of higher learning accredited by an organization recognized for that purpose by its country’s government. A college may be accredited only when it is a major academic administrative division of the parent institution and is afforded the same recognition, status, and autonomy as other professional colleges in that institution.

The chief executive officer/Dean must be a veterinarian. This individual must have overall budgetary and supervisory authority necessary to assure compliance with accreditation standards. The officer(s) responsible for the professional, ethical, and academic affairs of the veterinary medical teaching hospital(s) or equivalent must also be (a) veterinarian(s).

There must be sufficient administrative staff to adequately manage the affairs of the college as appropriate to the enrollment and operation.

The college must create an academic environment that does not discriminate and seeks to enhance diversity, consistent with applicable law. Diversity may include, but is not limited to, race, religion, ethnicity, age, gender, gender identity, sexual orientation, cultural and socioeconomic background, national origin, and disability.

7.2. Standard 2, Finances

Finances must be adequate to sustain the educational programs and mission of the college.

Colleges with non DVM undergraduate degree programs must clearly report finances (expenditures and revenues) specific to those programs separately from finances (expenditures and revenues) dedicated to all other educational programs.

Clinical services, field services, and teaching hospitals must function as instructional resources. Instructional integrity of these resources must take priority over financial self-sufficiency of clinical services operations.

7.3. Standard 3, Physical Facilities and Equipment

All aspects of the physical facilities must provide an appropriate learning environment. Safety of personnel and animals must be a high priority. Classrooms, teaching laboratories, teaching hospitals, which may include but are not limited to ambulatory/field services vehicles, seminar rooms, and other teaching spaces shall be clean, maintained in good repair, and adequate in number, size, and equipment for the instructional purposes intended and the number of students enrolled.

Offices, workspaces, laboratories, toilets, and locker rooms must be sufficient for the needs of the students, faculty, and staff.
An accredited college must maintain an on-campus veterinary teaching hospital(s), or have formal affiliation with one or more off-campus veterinary hospitals or other training sites used for teaching. Appropriate diagnostic and therapeutic service components must be present to meet the expectations of the practice type. These include, but are not limited to, pharmacy, diagnostic imaging, diagnostic support services, isolation facilities, intensive/critical care, ambulatory/field service vehicles, and necropsy facilities in the teaching hospital(s) and/or facilities that provide core clinical training. Operational policies and procedures must be posted in appropriate places. Standards related to providing an adequate teaching environment and safety of personnel and animals shall apply to all teaching hospitals and core training sites.

Facilities for the housing of animals used for teaching and research shall be sufficient in number, properly constructed, and maintained in a manner consistent with accepted animal welfare standards. Adequate teaching, laboratory, research, and clinical equipment must be available for examination, diagnosis, and treatment of all animals used by the college.

7.4. Standard 4, Clinical Resources
Normal and diseased animals of various domestic and exotic species must be available for instructional purposes, either as clinical patients or provided by the institution. While precise numbers are not specified, in-hospital patients and outpatients including field service/ambulatory and herd health/production medicine programs are required to provide the necessary quantity and quality of clinical instruction. The program must be able to demonstrate, using its assessment of clinical competency outcomes data, that the clinical resources are sufficient to achieve the stated educational goals and mission.

It is essential that a diverse and sufficient number of surgical and medical patients be available during an on-campus clinical activity for the students’ clinical educational experience. Experience can include exposure to clinical education at off-campus sites, provided the college reviews and regularly monitors these clinical experiences and educational outcomes. Further, such clinical experiences should occur in a setting that provides access to subject matter experts, reference resources, modern and complete clinical laboratories, advanced diagnostic instrumentation and ready confirmation (including necropsy). Such examples could include a contractual arrangement with nearby practitioners who serve as adjunct faculty members and off-campus field practice centers. The teaching hospital(s) shall provide nursing care and instruction in nursing procedures. A supervised field service and/or ambulatory program must be maintained in which students are offered multiple opportunities to obtain clinical experience under field conditions. Under all situations students must be active participants in the workup of the patient, including physical diagnosis and diagnostic problem oriented decision making.

Medical records must be comprehensive and maintained in an effective retrieval system to efficiently support the teaching, research, and service programs of the college. Students should be trained in the use of an electronic medical record system.

7.5. Standard 5, Information Resources
Timely access to information resources and information professionals must be available to students and faculty at core training sites. The college must have access to up-to-date human, digital, and physical resources for retrieval of relevant veterinary and supporting literature and for development of instructional materials, and provide appropriate training and technical support for students and faculty. The program must be able to demonstrate, using its outcomes assessment data, that students are competent in retrieving, evaluating, and applying information through the use of electronic and other appropriate information technologies.
7.6. Standard 6, Students
The number of professional degree students, DVM or equivalent, must be consistent with the resources and the mission of the college. The program must be able to demonstrate, using its outcomes assessment data, that the resources are sufficient to achieve the stated educational goals for all enrolled students.

Colleges should establish post-DVM programs such as internships, residencies and advanced degrees (e.g., MS, PhD), that must complement and strengthen the professional program and not adversely affect the veterinary student experience.

Student support services must be available within the college or university. These must include, but are not limited to, appropriate services to support student wellness and to assist with meeting the academic and personal challenges of the DVM program; support for students with learning or other disabilities; and support of extra-curricular activities relevant to veterinary medicine and professional growth.

The college or parent institution must provide information and access to counselling services regarding financial aid, debt management, and career advising. Career advising must include selection of clinical experiences.

The college must promote an inclusive institutional climate that fosters diversity within the student body, consistent with applicable law.

In relationship to enrollment, the colleges must provide accurate information for all advertisements regarding the educational program by providing clear and current information for prospective students. Further, printed catalog or electronic information must state the purpose and goals of the program, provide admission requirements and procedures, state degree requirements, present faculty descriptions, provide an accurate academic calendar, clearly state information on educational cost and debt risk, for the college. The college must provide information on procedures for withdrawal including the refund of student’s tuition and fees allowable. Information available to prospective students must include relevant requirements for professional licensure.

Each accredited college must provide a mechanism for students, anonymously if they wish, to offer suggestions, comments, and complaints regarding compliance of the college with the Standards of Accreditation. These materials shall be made available to the Council annually.

7.7. Standard 7, Admission
The college must have a well-defined and officially stated admissions policy and a process that ensures a fair and consistent assessment of applicants. The policy must provide for an admissions committee, a majority of whom must be full-time faculty members. The committee must make recommendations regarding the students to be admitted to the professional curriculum upon consideration of applications of candidates who meet the academic and other requirements as defined in the college’s formal admission policy.

The college must demonstrate its commitment to diversity and inclusion through its recruitment and admission processes, as consistent with applicable law. The college’s admissions policies must be non-discriminatory, as consistent with applicable law.

Subjects for admission must include those courses prerequisite to the professional program in veterinary medicine, as well as courses that contribute to a broad general education. The goal of preveterinary education shall be to provide a broad base upon which professional education may be built, leading to lifelong learning with continued professional and personal development.

Factors other than academic achievement must be considered for admission criteria.
7.8. Standard 8, Faculty
Faculty numbers and qualifications must be sufficient to deliver the educational program and fulfill the mission of the college. Participation in scholarly activities is an important criterion in evaluating the faculty and the college. The college must provide evidence that it utilizes a well-defined and comprehensive program for the evaluation of professional growth, development, and scholarly activities of the faculty.

Academic positions must offer the security and benefits necessary to maintain stability, continuity, and competence of the faculty. The college must cultivate a diverse faculty though its hiring policies and retention practices, consistent with applicable law. The college must demonstrate its ongoing efforts to achieve parity in advancement opportunities and compensation. Part-time faculty, residents, and graduate students may supplement the teaching efforts of the full-time permanent faculty if appropriately integrated into the instructional program.

7.9. Standard 9, Curriculum
The curriculum shall extend over a period equivalent to a minimum of four academic years, including a minimum of one academic year of hands-on clinical education. The curriculum and educational process should initiate and promote lifelong learning in each professional degree candidate.

The curriculum in veterinary medicine is the purview of the faculty of each college, but must be managed centrally based upon the mission and resources of the college. There must be sufficient flexibility in curriculum planning and management to facilitate timely revisions in response to emerging issues, and advancements in knowledge and technology. The curriculum must be guided by a college curriculum committee. The curriculum as a whole must be reviewed at least every seven (7) years. The majority of the members of the curriculum committee must be full-time faculty. Curriculum evaluations should include the gathering of sufficient qualitative and quantitative information to ensure the curriculum content provides current concepts and principles as well as instructional quality and effectiveness.

The curriculum must provide:

a. an understanding of the central biological principles and mechanisms that underlie animal health and disease from the molecular and cellular level to organismal and population manifestations.

b. scientific, discipline-based instruction in an orderly and concise manner so that students gain an understanding of normal function, homeostasis, pathophysiology, mechanisms of health/disease, and the natural history and manifestations of important animal diseases, both domestic and foreign.

c. instruction in both the theory and practice of medicine and surgery applicable to a broad range of species. The instruction must include principles and hands-on experiences in physical and laboratory diagnostic methods and interpretation (including diagnostic imaging, diagnostic pathology, and necropsy), disease prevention, biosecurity, therapeutic intervention (including surgery and dentistry), and patient management and care (including intensive care, emergency medicine and isolation procedures) involving clinical diseases of individual animals and populations. Instruction should emphasize problem solving that results in making and applying medical judgments.

d. instruction in the principles of epidemiology, zoonoses, food safety, the interrelationship of animals and the environment, and the contribution of the veterinarian to the overall public and professional healthcare teams.
e. opportunities for students to learn how to acquire information from clients (e.g. history) and about patients (e.g. medical records), to obtain, store and retrieve such information, and to communicate effectively with clients and colleagues.

f. opportunities throughout the curriculum for students to gain an understanding of professional ethical, legal, economic, and regulatory principles related to the delivery of veterinary medical services, personal and business finance and management skills; and gain an understanding of the breadth of veterinary medicine, career opportunities and other information about the profession.

g. Opportunities throughout the curriculum for students to gain and integrate an understanding of the important influences of diversity and inclusion in veterinary medicine, including the impact of implicit bias related to an individual’s personal circumstance on the delivery of veterinary medical services.

h. knowledge, skills, values, attitudes, aptitudes and behaviors necessary to address responsibly the health and well-being of animals in the context of ever-changing societal expectations.

i. fair and equitable assessment of student progress. The grading system for the college must be relevant and applied to all students in a fair and uniform manner.

7.10. Standard 10, Research Programs
The college must maintain substantial research activities of high quality that integrate with and strengthen the professional program. The college must demonstrate continuing scholarly productivity and must provide opportunities for any interested students in the professional veterinary program to be exposed to or participate in on-going high-quality research. All students must receive training in the principles and application of research methods and in the appraisal and integration of research into veterinary medicine and animal health.

7.11. Standard 11, Outcomes Assessment
Outcomes of the veterinary medical degree program must be measured, analyzed, and considered to improve the program. New graduates must have the basic scientific knowledge, skills, and values to provide entry-level health care, independently, at the time of graduation. Student achievement must be included in outcome assessment. Processes must be in place to remediate students who do not demonstrate competence in one or more of the nine competencies.

The college should have in place a system to gather outcomes data on recent graduates to ensure that the competencies and learning objectives in the program result in relevant entry level competencies.

The college must have processes in place whereby students are observed and assessed formatively and summatively, with timely documentation to assure accuracy of the assessment for having attained the following competencies:

1. comprehensive patient diagnosis (problem solving skills), appropriate use of diagnostic testing, and record management
2. comprehensive treatment planning including patient referral when indicated
3. anesthesia and pain management, patient welfare
4. basic surgery skills and case management
5. basic medicine skills and case management
6. emergency and intensive care case management
7. understanding of health promotion, and biosecurity, prevention and control of disease including zoonoses and principles of food safety
8. ethical and professional conduct; communication skills including those that demonstrate an understanding and sensitivity to how clients’ diversity and individual circumstance can impact health care
9. critical analysis of new information and research findings relevant to veterinary medicine.

The Council on Education expects that 80% or more of each college’s graduating senior students sitting for the NAVLE will have passed at the time of graduation.*

*Colleges that do not meet this criterion will be subjected to the following analysis. The Council will calculate a 95% exact binomial confidence interval for the NAVLE scores for colleges whose NAVLE pass rate falls below 80%. Colleges with an upper limit of an exact 95% binomial confidence interval less than 85% for two successive years in which scores are available will be placed on Probationary Accreditation. Colleges with an upper limit of an exact 95% binomial confidence level less than 85% for four successive years in which scores are available will, for cause, be placed on Terminal Accreditation. If no program graduates take the NAVLE, the Council will use other student educational outcomes in assessing compliance with the standard including those listed in 12.11.1.

8. **OFF-CAMPUS AND DISTRIBUTIVE SITES**

8.1. **Off-campus Clinical Education Sites for Colleges with Teaching Hospitals**

a. An off-campus site where a specific educational objective is offered.

b. The site is externally located from the main campus and is (usually) not administratively associated with the degree granting institution.

c. Professional staff providing education might not be employees of the degree granting institution but may be receiving remuneration as a contractor, fee-for-service provider, etc. for time/effort devoted to the educational program.

d. The off-campus site must be reviewed to ensure that the educational program is being delivered appropriately.

e. There must be a written description of the educational objectives expected to be achieved at the site and a mechanism for assessing the success of the educational process, i.e. proof that educational objectives are being met.

f. These guidelines do not apply to off-campus educational experiences that are attended sporadically by individual students to augment their on-campus education.

8.2. **COE Guidelines for Implementation of a Distributive Veterinary Clinical Education Model**

a. The clinical sites selected by a college to serve in a distributive clinical educational model should receive appropriate financial remuneration per student from the college in order to help ensure that students receive on-site supervised clinical instruction, with formal written contract of expectations.

b. The college must prepare and distribute appropriate materials for clinical site educators that detail objectives of the program, expectations of the site coordinators, clinical site educator training materials, instructions concerning the format the college wants used to evaluate student performance and provide feedback to students on progress/deficiencies associated with site experience.

c. Additionally, the college must provide to the students, and clinical site educators alike, the expectations of the college for student safety and security while the student is on site.
d. Distributed clinical sites must be selected on the basis of specific criteria and identified for instruction in precise disciplines (defined by the college) such as, but not limited to: Food Animal/Equine/Small Animal Medicine; Food Animal/Equine/Small Animal Surgery or Food Animal or Equine or Small Animal Medicine and Surgery; Dermatology, Imaging (radiology, etc.), Neurology, Cardiology, Critical Care Emergency Medicine, etc.

e. For distributed clinical sites the college must take steps to ensure that the educational objectives and anticipated outcomes are thoroughly promulgated and understood by students and clinical site coordinators alike.

f. The college must designate to the COE what clinical sites are considered as primary instructional sites as defined by Standard 9 (c) and these will be considered by COE as core instructional sites. These sites must be in compliance with AVMA-COE Standards.

g. The college must document/assess that students and educators clearly understand how evaluation and grading practices will be conducted at each clinical site including clinical competencies.

h. Veterinarians must be licensed and technicians should be certified, licensed, or registered as appropriate to that jurisdiction.

i. The college must document that students are fully informed concerning their ability to report any and all safety, physical, and emotional concerns to the college.

j. The college must put in place a system to regularly monitor/supervise the instructional activities at each clinical site and report this system with any subsequent changes and outcomes to the COE.

k. Each clinical site educator must abide by a process devised by the college to provide a written evaluation of the performance of each student.

l. Students must provide the college with an evaluation of each site (after the respective rotation) including an evaluation of teaching at the site and the student’s opportunity to perform hands-on procedures at the site. The college must summarize this information for the COE.

m. The COE may inspect clinical sites at any time students are present; these inspections, including travel and per diem costs, will be at the expense of the college.

n. The college must put in place a system to measure and document clinical competencies outcomes at clinical sites as specified by the COE (see Section 12.11.2) to assess clinical sites.

9. REQUIRED REPORTS FROM COLLEGES

9.1. Reports of Substantive Change∗
The COE must be notified and the COE must grant approval prior to implementation of any of the substantive changes in the program listed below. Approval of substantive changes is at the discretion of the COE based upon the information received and continued compliance with the standards. A site visit may be required to verify the reported substantive changes.

- Any change in the established mission or objective of the college.
- Any change in the organizational structure, legal status, form of control, or ownership of the college.

∗ Adapted and modified from USDE regulations
• The addition of courses or programs that represent a significant departure, in either content or method of delivery, from those that were offered when the COE last evaluated the institution.
• A change in the clock hours (student contact hours) to credit hours ratio.
• A substantial change in the number of clock hours (student contact hours) or credit hours awarded for successful completion of the program.
• The establishment of an additional location geographically apart from the main campus at which the institution offers at least 25 percent of the entire professional program.
• The establishment of an additional location geographically apart from the main campus at which the institution offers an educational experience in which 25 percent or more of any class is enrolled.
• An anticipated entering class size change of 10 percent or more students from the last approved request or the most recent accreditation site visit.
• A cumulative total enrollment change of 15% or more over 5 years.

Failure to notify the COE of a substantive change and receive approval prior to the implementation is likely to result in a focused site visit to ensure continued compliance with the standards.

9.2. Interim Reports
The Council requires an annual interim report from each college in Accredited status except when a site visit has been conducted less than six months previously, or when a site visit is planned to occur in the first six months of the ensuing year. Colleges that are Accredited with Minor Deficiencies, Probationary Accreditation, or Terminal Accreditation status are required to submit interim reports every six months. The interim report should describe any recent or anticipated changes and the ways in which previous Council recommendations have been met. When an accredited college contemplates fundamental changes in administration, organization, association with the parent institution, curriculum, faculty, increased enrollment, instructional program, or stated objectives, the Council should be given an opportunity to review the proposed change prior to adoption. Student suggestions, comments, and complaints regarding the college’s compliance to the Standards of Accreditation must accompany the interim report.

Individual members of the Council are assigned a specific report(s) for an in-depth review and are required to prepare a draft written summary of the findings (see Section 21.2, Appendix B). The assigned individual leads Council discussion of the report and his/her summary (included in the COE meeting agenda), and makes a recommendation on the accreditation status of the college. When all issues arising from the annual report have been discussed, the Council votes (a majority is required) on extending the current accreditation status or taking an adverse action to lower the status. If the Council votes to extend the accreditation status, without comment, staff will notify the college in writing. Comments, however, are included in the transmission letter when appropriate. If the Council notes deficiencies that may result in an adverse accreditation action, the Council will defer the accreditation action and will provide the college with an opportunity to respond in writing pursuant to Policy 10.6 of this manual. If the Council lowers the accreditation status after the college has had the opportunity to respond under Policy 10.6, then the college will be reminded of the appeal process.

Please note that the COE understands that some data are not collected annually, but summaries of those results should be reported when they become available. Evidence for the requested delineators should be collected no less than two to three times during the seven-year accreditation cycle.

9.3. Self-Study Reports
The Council evaluates each college of veterinary medicine in terms of the degree with which it meets its own stated objectives and the established criteria for accreditation. To maintain accreditation, veterinary colleges must provide an extensive self-evaluation and arrange for a site visit at intervals of not more than seven years. More frequent site visits are scheduled for colleges with Probationary Accreditation. The Council reserves the
right to schedule site visits on a more frequent basis, if information of concern is provided in an annual report, or in response to complaints, or for a developing college still under a reasonable assurance designation.

The Council expects that every college of veterinary medicine engage in ongoing evaluation of all elements of the educational programs as they relate to the Standards. The self-evaluation report is a summary of the current state of regular self-evaluation.

Administrators, faculty, students and alumni of the college are best qualified to identify the strengths and weaknesses of the college, and should be consulted in preparation of the self-study. Committees composed of the above groups should be established by the administration for the purpose of composing the self-study. Department input should be included in the self-study, but not as a separate section of the document. As an outside group, the Council gains its best perception of a college through the eyes of those most intimately involved.

The Self-Study Report is the single most important document of the accreditation process and serves as the principal element of evidence that the program and resources of the college comply with the Standards of Accreditation. Each site team member is provided a copy of the self-study, and it is made available to all interested Council members. The accreditation site visit serves to clarify and verify that the self-study is a true reflection of the conditions of the college.

The Council is seeking evidence-based documentation indicating that the college complies with each Standard. The Council broadly evaluates student outcomes that address technical knowledge and skills, and life skills (for example, problem solving, communication, business and personal finance, etc.). Thus the system of self-evaluation used by each college must include these outcomes.

Specific compliance with each standard is judged by the Council based upon the adequacy/quality of the professional education program as documents in the self-study and site visit. Programs that do not have, or have unacceptable program elements addressed by the standards will be cited for lack of compliance with that specific standard.

9.4. Reporting to the Community
The COE provides written notice of its accrediting decisions to the USDE*, appropriate state licensing or authorizing agency*, appropriate accrediting agencies**, and the public*** according to the following requirements of the USDE:

(A) Within 30 days:
   (1) A decision to award initial accreditation or preaccreditation to a veterinary school
   (2) A decision to renew or provide initial accreditation or preaccreditation to a veterinary school

(B) At the same time the school is notified, but no later than 30 days after the decision:***
   (1) A final decision to place a school on probationary accreditation
   (2) A final decision to deny, withdraw, suspend, revoke, or terminate the accreditation or preaccreditation
      of a veterinary school***

* The USDE and appropriate state licensing or authorizing agency will be notified by letters sent electronically or by mail.

** Accrediting agencies are notified by posting written notice on appropriate listserve for regional and programmatic accreditors.
*** Please note: All public notification is provided in the public area of the AVMA website and will include the date of the COE meeting the decision was made. This is done within 24 hours of notification of the program for (B) (1) and (2).

**** Not later than 60 days after any final decision to deny, withdraw, suspend, revoke, or terminate the accreditation or preaccreditation of a veterinary school, the COE will notify the USDE, state and other authorizing agencies, and public with a brief statement summarizing the reasons for the agency’s decision and the official comments that the affected school may wish to make with regard to that decision, or evidence that the affected school has been offered the opportunity to provide official comment.

The COE will provide written notice to the USDE, appropriate state licensing or authorizing agency, appropriate accrediting agencies, and upon request, the public if:
(1) A school decides to withdraw voluntarily from accreditation or preaccreditation, within 30 days of receiving notification from the school that it is withdrawing voluntarily from accreditation or preaccreditation; or
(2) Lets its accreditation or preaccreditation lapse, within 30 days of the date on which accreditation or preaccreditation lapses.

Information related to currently accredited veterinary medical colleges and schools, the accreditation status, and the date of the next accreditation or preaccreditation site visit is published annually in the AVMA House of Delegates Report and on the AVMA website (at www.avma.org) in the public access area. The COE does not provide the AVMA with non-public information regarding accreditation decisions, except to the extent such information constitutes privileged legal information.

When the accreditation decision is finalized, each college of veterinary medicine must notify the public of its performance in educating veterinarians by posting on its website 1) the accreditor (AVMA COE), accreditation status of the college, and the date of the next site visit; 2) an explanation of the reasons for non-compliance if probationary accreditation has been assigned and the college must provide an evaluation of the impact of non-compliance on the enrolled students; 3) the NAVLE pass rate for the college compared to the pass rate required by the COE standard for Outcomes Assessment (currently 80%); and 4) any other outcomes information that the college feels would educate the public regarding the quality of education at the specific institution. Information released to the public must be readily accessible. The information released to the public must be sent to the COE for verification in the annual report of each college.

10. ACCREDITATION CLASSIFICATIONS

The final evaluation of each college by the Council is determined by review of its total educational program, considering each college’s stated objectives and the “Standards of an Accredited College of Veterinary Medicine.” A college may appeal any Council on Education decision that results in lowered accreditation status by following the “Appeals of Adverse Accreditation Decisions” procedures (Section 10.12). Each of the classifications defined below (Provisional Accreditation, Accredited, Accredited with Minor Deficiencies, Probationary Accreditation, and Terminal Accreditation) provides an accredited status to the college (see Section 21.3, Appendix C). Accreditation decisions of the Council are not reviewed by any other AVMA entity.

The Report of Evaluation identifies major and minor deficiencies in compliance with each Standard. With respect to the “standard requirements,” each college evaluated by the Council may be issued a Letter of Reasonable Assurance (if new) or assigned an accreditation status (10.2-10.5) according to the following guidelines.

10.1. Reasonable Assurance – Reasonable Assurance is the classification granted to a US or Canadian institution seeking initial accreditation. Reasonable Assurance is not a preaccreditation action by the Council and does not confer accreditation of any kind on a developing college. A letter may be granted to an educational institution indicating that there is reasonable assurance of future accreditation of a developing college of veterinary medicine in the US or Canada, if such a college is established according
to detailed plans presented to the Council, and if these plans demonstrate intent and a realistic plan to comply with the Standards of Accreditation. Reasonable Assurance may lead to Provisional Accreditation. Reasonable Assurance may be renewed annually by the Council for a maximum of three years based on progress documented in writing twice a year (July and January). If a developing institution granted Reasonable Assurance fails to continue to demonstrate that its plan to develop its program will comply with the Standards, or if the program significantly changes its plan without notifying the Council, the Council may withdraw the classification of Reasonable Assurance.

10.2. Provisional Accreditation – A US or Canadian college granted Reasonable Assurance which is still in effect, will be granted Provisional Accreditation status on the date the initial class is admitted. The college must provide evidence to assure future compliance with each Standard. The semiannual reports must provide that evidence, and the Council may request additional information and documentation. Additional evidence is collected and evaluated through site visits. Provisional Accreditation status may be granted for no more than five years. If a developing program has been assigned Provisional Accreditation but does not provide continuing evidence that its program will comply with the Standards and its plan, or if it has been on Provisional Accreditation status for five years, it may be placed on Terminal Accreditation and be required to follow the procedures outlined for that accreditation, thereby protecting the interests of enrolled students.

10.3. Accredited – An accreditation status granted to a college that has no deficiencies in any of the Standards. Accreditation is granted for a period of up to seven years.

10.4. Accredited with Minor Deficiencies - An accreditation status granted to a college that has one or more minor deficiencies in one or more of the Standards of Accreditation. Minor deficiencies have minimal or no effect on student learning or safety. Minor deficiencies are readily corrected in one year and MUST be corrected in one year to avoid a change in accreditation status. The college is required to submit a plan to the COE within 30 days of the status notification. The plan must outline steps to correct the deficiencies and provide a time table for completion. Progress reports to the COE are required every six months, one being the Annual Interim Report. If at the end of one year, the college provides evidence that the deficiencies have been corrected; the college may be granted Accredited status for the remainder of the accreditation cycle, as determined by the COE. If minor deficiencies are not corrected within one year, the college will be placed on Probationary Accreditation for one additional year. Progress reports are required every six months.

10.5. Probationary Accreditation* – An accreditation status granted to a college that has one or more major deficiencies in one or more Standards. Major deficiencies have more than minimal impact on student learning or safety. These deficiencies MUST be corrected in two years. This is not an adverse decision. The college is required to submit a plan to the COE within 30 days of the status notification. The plan outlines steps to correct deficiencies and provides a time table for completion. Progress reports to the COE are required every six months, one being the Annual Interim Report.

If at the end of the two-year period, deficiencies have been corrected and there is evidence to support full compliance, the college may be granted Accredited status for the remainder of the accreditation cycle, as determined by the COE. A college that fails to correct minor deficiencies during one additional year on Probationary status or major deficiencies within two years will be placed on Terminal Accreditation unless an Extension for Good Cause is granted for up to one year or pending an appeal. (see Section 21.4, Appendix D). Progress reports are required every six months.

* In a Report of Evaluation, directives pertaining to deficiencies under a specific Standard are clearly identified. Recommendations are suggestions made to improve the educational quality of the program when deficiencies have not been identified and are listed separately.
10.5.1. Procedures for Colleges with the Classification of Probationary Accreditation
During the period of Probationary accreditation, the Council may appoint a team to visit the college to report on the progress toward accredited status. When time is necessary to correct deficiencies (construction or major renovation of physical facilities), and if the college has presented evidence that it is making acceptable progress toward accredited status at the end of two years, Probationary accreditation may be extended for good cause.

A Letter of Intent to Place on Terminal Accreditation is an official letter from the COE warning the college that the accreditation status may move to Terminal Accreditation if the correction of deficiencies is not completed in the time specified. The letter is sent to the college in the 18th month of Probationary Accreditation. This is not an accreditation status.

At the end of an assigned period of Probationary accreditation, or earlier at the invitation of the college, the Council will conduct a comprehensive site visit, a focused site visit, or determine that no site visit is necessary to determine the compliance of the college with the standard in question. On the basis of this evaluation the Council must:

- Award Accredited status
- Continue Probationary Accreditation for good cause, or
- Assign Terminal Accreditation following written due process, or
- Withdraw accreditation (for accredited foreign colleges)

10.6. Terminal Accreditation – An accreditation status assigned to a college that is unable to correct deficiencies within the specified time period. This is an adverse accreditation decision. Due process will be initiated prior to a final decision. The college may respond in writing within 30 days of notification of the adverse action.

In addition to the circumstances noted above which may result in a program being placed on Terminal Accreditation or if a program voluntarily closes, the Council may revoke accreditation, when evidence indicates that the number or severity of deficiencies in the program with regards to complying with each of the accreditation Standards cannot be corrected before the admission of the next first-year class. “Procedures for Colleges with the Classification of Terminal Accreditation” must be followed to protect the interests of enrolled students.

10.6.1. Procedures for Colleges with the Classification of Terminal Accreditation
This classification of terminal accreditation is intended to protect enrolled students from the disadvantage of graduating from a non-accredited college and may continue no longer than necessary to protect the educational interests of such students. The dean of the college and the president of the university are notified immediately in writing of the classification status and the reasons therefore. Not later than 30 days after the date of receipt of the final report, the college may respond in writing to the specific deficiencies. If written due process fails, the college may initiate appeal proceedings as described in the Accreditation Policies and Procedures of the AVMA Council on Education manual (Section 10.12). During the first six months after the assignment of terminal accreditation, the college will submit a detailed plan describing how it will ensure that the educational interests of currently enrolled students will be met. In January of each year that the college holds terminal accreditation status, the college will provide a detailed report to the Council on Education describing how the plan is being followed and how it has been altered with respect to students who entered when the program held accredited, accredited with minor deficiencies, or probationary accreditation status.

To maintain terminal accreditation status, the college must: immediately cease enrollment of additional students; commit adequate resources to complete the education of currently enrolled students; and ensure that deficiencies cited do not worsen. During a period of terminal accreditation, representatives
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from the COE will visit the college annually and report on whether the college is meeting the conditions for terminal accreditation as stated above. The COE visit report and information furnished in writing by the college will be considered by the Council to determine if terminal accreditation should continue. Following a period of terminal accreditation, the classification of accreditation withheld will be assigned.

### 10.7. Accreditation Outcomes

The full Council utilizes the self-study, site visit findings, and the Report of Evaluation to determine the appropriateness of granting Reasonable Assurance, Provisional Accreditation, Accredited, Accredited with Minor Deficiencies, Probationary Accreditation, or Terminal Accreditation status. Decisions on accreditation or reasonable assurance evaluations for site visits that occurred less than 90 days prior to the next scheduled COE meeting will usually be deferred to the following meeting. The COE meets twice annually.

The self-study and supporting documentation furnished by the college, the draft report of evaluation, the dean’s response to the report, and any other appropriate information from other sources to determine whether the college complies with the Standards are made available to the Council prior to the COE meeting. Council members read and review draft reports of evaluation (provided in the COE meeting agenda distributed online prior to the meeting) for each college being considered for accreditation and come to the meetings prepared to discuss the findings of the site team and/or seek additional information necessary to evaluate that college.

A Council member who has a conflict of interest with or observed the site visit of the college under consideration absents himself/herself from the room during discussion and voting that leads to accreditation actions. A copy of the self-study for each college under consideration is provided at the meeting. Two COE members are assigned as primary and secondary reviewers to conduct a pre-site visit review of the self-study and post site visit review of the report of evaluation. The COE reviewers evaluate the self-study to identify and communicate concerns regarding compliance with each standard to the site team chair three weeks prior to the site visit. The reviewers also discuss the report of evaluation with the site team chair following the site visit to clarify any areas of concern. The COE reviewers may request clarifying information from the site team chair or ask COE staff to gather additional evidence from the college, as needed to facilitate review by the full Council. The primary COE reviewer presents an accurate summary of the draft report of evaluation, leads discussion, and provides the directives and recommendation of the site team for each Standard. Each Standard is presented and discussed separately, followed by a recommendation from the COE reviewer regarding the college’s compliance with that standard. COE members then vote on that recommendation. After compliance with all Standards has been approved/disapproved, an individual voting in the majority regarding a specific standard may propose a motion for reconsideration of that Standard based on substantive reason(s). The Council may reconsider that Standard with additional discussion and confirm its decision or, with supporting evidence, reverse its decision. When Standard 11, Outcomes Assessment, is considered, the Council votes to approve or disapprove the college’s performance in advancing student achievement.

At the conclusion of review of all the standards and upon recommendation of the COE reviewer, the accreditation status and the assigned length of time for that status is determined by a vote of the Council, unless the Council notes deficiencies which may result in an adverse action. If major or minor deficiencies with a Standard(s) are noted, the Council proposes a remedy for each deficiency under the Directives section for the affected Standard(s). Notation is made in the Recommendation section of the final report of evaluation when specific deficiencies are not identified, but the Council wishes to provide suggestions for improvement of the educational program.

When the Council notes deficiencies which may result in an adverse accreditation action, it will defer the accreditation decision, give written notice to the college of each deficiency and recommendation, and provide the college with an opportunity to respond in writing. The college’s response must only include documentation, data, or other information relevant to the deficiencies identified by the Council that may
result in an adverse accreditation action. The college must notify the Council of its intent to respond within fifteen (15) days after receipt of the draft report of evaluation and file its response with the Council within thirty (30) days after receipt of the draft report of evaluation. An adverse accreditation action is defined as withholding initial or renewed accreditation, denial of a reasonable assurance status, or assignment of terminal accreditation.

If the Council notes deficiencies regarding Standard 2, Finances, that may result in an adverse accreditation action, the college may submit new financial information only if the following conditions are met:

1. The financial information was unavailable to the college until after the Council made the adverse findings regarding the college’s finances; and
2. The financial information is significant and bears materially on the financial deficiencies identified by the Council, i.e., the information is of such a nature that if found to be credible it could result in the finding that Standard 2, Finances, is now met; and
3. The only remaining deficiency cited by the Council on the college’s failure to meet Standard 2, Finances.

An affected college may seek the review of new financial information as described in this section only once per accreditation cycle and any determination by the Council made with respect to that review does not provide a basis for an appeal.

The Council will consider the written response and documentation sent by the college within 30 days of receipt. The Council reserves the right to conduct a focused site visit, as needed to validate information submitted for reconsideration. Should a Letter of Reasonable Assurance be denied, or another adverse accreditation action taken for a specific college, the college is notified in writing of the reasons for the action and reminded of the appeal process. Within 30 days after action of the Council, staff prepares a letter for the dean of the college and the president of the parent institution that accompanies the report of evaluation conveying the accreditation status, length of time a given status is assigned, and any special instructions. A formal statement of classification or reasonable assurance decision, signed by the Chair of the Council, accompanies the letter and the report.

After the opportunities to respond in writing or appeal have passed or the processes completed, the action of the Council is considered final and a final report of evaluation is prepared, including directives and recommendations and a classification of accreditation or reasonable assurance. Copies of the final report are sent to the dean of the college, the chief executive officer of the institution, the Royal College of Veterinary Surgeons (RCVS), and the Canadian Veterinary Medical Association (CVMA). The officials of the college and the institution are authorized to disseminate all or part of the content of the report at their discretion. An institution must publicly disclose its accreditation accurately; including the specific academic program covered by that status, and specify that the AVMA COE, the accrediting agency, is located at 1931 North Meacham Road, Suite 100, Schaumburg, IL 60173 (phone 847-925-8070). Any incorrect or misleading information regarding preaccreditation or accreditation released by the institution will be corrected by the COE. These corrections include, but are not limited to 1) the accreditation or preaccreditation status, 2) content of reports of on-site visits, and 3) the accreditation or preaccreditation action by the COE with respect to the program. The content of the report is not available from AVMA, CVMA, RCVS, Council members, or the site visit team. Except under the conditions cited above, the self-study, all correspondence, directives, recommendations, and related information and documentation of the site visit and the evaluation are confidential to the Council and will not be publicly disclosed.

The AVMA publishes the final accreditation or reasonable assurance classification of the college and the dates of the last and next evaluation of the college. All requests for details of the report are referred to the dean or the university president.

10.8. Reviews and Return Visits
The Council reviews annual/interim reports from colleges in the same manner as the comprehensive site visit report. Based on the annual/interim report, the Council determines any subsequent action it shall take. The Council may request a report of additional progress and/or an appearance by an institutional representative before the Council. Focused site visits are conducted at an institution when it is necessary for the Council to review information about the program than can be obtained or documented only on site, or when items have not been adequately addressed in the annual report and the COE deems a site visit necessary to ensure educational outcomes. A special site visit may be focused, limited to specific standards, or comprehensive.

A focused site visit is conducted during the interim between complete evaluation and site visits in response to:

1. Questions or inconsistencies noted in the annual report.
2. Noted deficiencies in one or more standards identified at the time of the most recent complete site visit wherein the college informs the Council that such deficiencies have been addressed, and verification is necessary for continued accreditation.
3. Confirmed information (evidence) received from third party (public, student, faculty, or others) concerning noncompliance with a standard requirement.

The focused site visit team shall:

1. Consist of three COE site visitors with at least one who served on the site visit team that made the accreditation recommendation, and one Canadian representative. The team will be appointed by the COE Chair with the concurrence of the Chair of the Committee on Evaluation. Support staff from the AVMA Education and Research Division may accompany the team.
2. Establish a date for the visit which is agreeable to all parties.
3. Address only those standards found deficient or noncompliant during the original visit.
4. Prepare a report addressing how the deficiencies in the standard have been corrected, and make a recommendation to the COE at its next scheduled meeting regarding the accreditation status of the college.

Based upon the outcomes of the focused site visit, the COE could recommend:

1. No change in status.
2. Extension of accreditation for the full time allowed.
3. A change in the accreditation status.
4. A comprehensive site visit.

10.9. Adverse Outcomes
The Council is aware of the consequences of loss of accreditation or denial of reasonable assurance status, and considers these matters seriously. However, there are situations wherein the college that is noncompliant could harm students enrolled in the program and/or the public. Each situation which could result in adverse action by the Council will be considered individually.

10.10. Withholding Accreditation
The COE will not renew accreditation or award provisional or initial accreditation for any college where the institution offering the program is subject to:

1. A pending or final action brought by a State agency to suspend, revoke, withdraw, or terminate the institution’s legal authority to provide postsecondary education in the State;
2. A decision by a recognized agency to deny accreditation or preaccreditation;
3. A pending or final action brought by a recognized accrediting agency to suspend, revoke, withdraw, or terminate the institution’s accreditation or preaccreditation

The COE will consider granting accreditation (renewal or initial) or preaccreditation where the institution offering the program is subject to probation or an equivalent status imposed by a recognized agency. Within 30 days, the Council will provide the USDE with a thorough and reasonable explanation, consistent with COE standards, why the action of the other body does not preclude the awarding accreditation or preaccreditation, if accreditation or preaccreditation is awarded. The decision to award accreditation or preaccreditation will be
based on a thorough review of the evidence. The standards will be applied consistently as described for all accreditation decisions to determine compliance. However, special attention will be paid to the reasons for institutional probation and the potential impact on compliance with each standard, including sustainability.

10.11. Reevaluation
A college may request a reevaluation at any time for reasons of reclassification. The request should justify the reasons for requesting a different classification. A current self-evaluation, or an updated report of a self-evaluation less than two years old, must be submitted approximately eight (8) weeks before the date of a site visit. The report should indicate the changes that have occurred since the previous evaluation with particular reference to the recommendations previously made. When there appears to be reasonable probability that the classification can be changed, the Council will make every effort to implement a new evaluation, but in no case less than one year after a previous evaluation (the meeting at which the Council made the relevant decision).

The Council is receptive to a request by any college to be evaluated for reaccreditation at less than the maximum established interval for any reason, such as the coordination of self-evaluation reports and site visits required by other agencies. Such requests are honored according to the ability of the Council in consideration of its prior commitments to other colleges.

10.12. Appeals of Adverse Outcomes
The action of the Council on Education is final with respect to the accreditation or reasonable assurance classification assigned to a college of veterinary medicine, except that any adverse decision may be appealed by the affected college. An adverse decision on accreditation or reasonable assurance is defined as withholding initial or renewed accreditation; or denial of a reasonable assurance; or assignment of terminal accreditation. When an adverse accreditation or reasonable assurance decision is made by the Council, the college is informed in writing of the decision and the reasons for such decision, and reminded of the right to appeal.

In the event of an adverse decision by the COE, the affected college may appeal the decision on the grounds that that Council: 1) has ruled erroneously by disregarding established AVMA criteria for accreditation, 2) failed to follow its stated procedures, or 3) failed to consider all the evidence and documentation presented. No other grounds for appeal will be allowed. When a college appeals an adverse decision, the following procedures will apply:

Not later than 30 calendar days after receipt of notification (registered mail, return receipt requested) of an adverse decision, the college shall notify the AVMA Board of Directors in writing, through the Executive Vice President, that it intends to appeal the decision. Not later than 60 calendar days after the date of notification of the adverse decision, the college shall submit documentation (one original and 15 copies) supporting its appeal and a $10,000 deposit to be applied to the expenses of the hearing. Expenses shall be paid by the appellant college, and any balance remaining from the deposit shall be returned to the college, or the college will be invoiced for additional expenses.

The Board of Directors shall appoint a hearing panel comprised of seven persons, none of whom shall be current members of the Council on Education or AVMA staff. The hearing panel will include veterinary educators and practitioners, and one public member who has completed service on the Council within the last seven years (one accreditation cycle). Hearing panel members will be credentialed using the same procedures used to credential COE members. As a refresher, panel members will receive the same training provided new Council members, and specific training to review all changes made in the COE policies and procedures since their service on the Council to ensure panel members have the requisite knowledge and understanding to make decisions consistent with the policies and requirements of the Council on Education. The Board of Directors shall designate the chair of the panel. Hearing panel members are required to sign a Conflict of Interest Statement.
A hearing shall be held at or near the AVMA office in Schaumburg, not more than 120 calendar days following receipt by AVMA of the documentation supporting the college’s appeal. The Executive Vice President will schedule and organize the hearing and notify the hearing panel, the college, and the members of the Council on Education by mail not less than 10 or more than 40 calendar days prior to the date of the hearing. The notification will include the date, time and place for the hearing, as well as a list of the members of the hearing panel.

At any hearing, an officer or other representative of the appellant college and a member of the Council on Education shall have the right to present witnesses and to submit documents and other written materials pertinent to the case. The appellant college and the Council may be represented by legal counsel who may make the presentation on behalf of the appellant college and the Council, respectively. The appellant college shall be responsible for all fees and expenses related to its legal counsel. The hearing panel may also have legal counsel present to advise it with respect to procedural matters. Following presentations by the appellant college and the Council, the hearing panel will allow opportunity for response and rebuttal by the appellant college. Before permitting testimony relating to the character or general reputation of anyone, the panel shall satisfy itself that the testimony has a direct bearing on the case at issue.

The hearing shall be restricted to a review of documents and testimony relevant to the standard(s) on which the adverse accreditation or reasonable assurance decision was based, or a review of the process and procedure used to arrive at a recommendation as appropriate, depending on the basis of the appeal. Documentation may include extracts from the college or school self-study, with appendices or attachments, and from the report of evaluation of the site visit team. All documentation and testimony shall be relevant to conditions existing at the college or school during the dates on which the site visit was made or on which the adverse decision was based.

The hearing panel may either affirm, amend, or reverse an adverse decision, or remand the adverse decision to the Council for further consideration. If the hearing panel reverses or amends the Council’s decision, the hearing panel will remand the matter to the Council with specific instructions to implement the hearing panel’s decision. If the hearing panel remands an adverse action for further consideration by the Council, the hearing panel shall identify specific issues that the Council must address. In all cases where a decision is implemented by or remanded to the Council, the Council shall act in a manner consistent with the hearing panel’s decision and instructions. The conclusion of the panel shall be produced in the form of a written report and become a permanent record of the Council on Education. The chief executive officers of the college and the university will be provided with copies of the hearing panel report. The panel report will be confidential to the Council. All questions will be referred to the college which may respond as deemed appropriate.

An appeal is not a de novo hearing, but a challenge of the Council’s decision based on the evidence before the Council at the time of its decision. The Council’s decision should not be reversed by the appeal panel without sufficient evidence that the Council’s decision was plainly wrong or without evidence to support it. Accordingly, the appeal panel should not substitute its judgment for that of the Council merely because it would have reached a different decision had it heard the matter originally.

The accreditation status of the petitioning college shall remain unchanged during the review; there shall be no public notice of the adverse decision until the review is complete and a final decision rendered. The fact the college has filed an appeal will, however, be a matter of public record.

At the discretion of the hearing panel or upon advance request in writing by either the petitioning college or the Council, a transcript of the proceedings may be made. The transcript will be shared by all parties.

The report of the hearing panel will be considered at the next regular meeting of the Council on Education. The Council must act in a manner consistent with the hearing panel’s decision and instructions. All deliberations of the Council and the factors considered prior to the final decision shall be confidential.
to the Council. The appealing college will be notified in writing of the final accreditation status assigned by the COE.

If the decision by the COE is upheld, the appellant will be responsible for all expenses associated with the appeal. If the decision by the COE is reversed in its entirety, the appellant will be responsible for all expenses associated with transportation, food, and lodging for the college representatives; legal fees associated with college representation; and any other expenses incurred by the college in making the appeal. All other costs associated with the hearing including, but not limited to, panel and COE transportation, lodging, and food; legal counsel for the panel and/or the COE; conference telephone calls; mailings; meeting facilities; and a transcript of the proceedings will be shared equally by the college and the AVMA.

10.13. Reconsideration of Accreditation Classification
The Council may reconsider and alter the classification of a college when in the Council’s judgment:

1. Conditions affecting compliance with one or more standards have deteriorated sufficiently so that the college fails to meet one or more of the standard requirements.
2. A previously identified deficiency has worsened and causes the college to fail to meet one or more of the standard requirements.
3. A college or its parent university fails to respond in a timely and satisfactory way to the reasonable requests of the Council for information, or fails to cooperate in the evaluation process.

10.14. Loss of Legal Authority to Provide Postsecondary Education
If the COE learns that a school it accredits or preaccredits, or an institution that offers a program it accredits or preaccredits, is the subject of an adverse action by another recognized accrediting agency or has been placed on probation or an equivalent status by another recognized agency, the COE will promptly review the accreditation or preaccreditation of the school to determine if it should also take adverse action or place the program on probation or show cause.

The COE will share information about the accreditation or preaccreditation status of a program and any adverse actions it has taken against an accredited or preaccredited program upon request with other appropriate recognized accrediting agencies and recognized State approval agencies. This includes Probationary Accreditation.

10.15. Loss of Institutional Accreditation
The Council will revoke the accreditation of a college which has lost its institutional accreditation. The Council will notify the Secretary of Education within 30 days of the action to revoke accreditation. Further, the Council will notify the appropriate postsecondary institutional accrediting body and the public no later than 24 hours following the withdrawal of accreditation or after any appeal has been resolved. The Council will not consider evaluating a college that has lost its institutional accreditation.

10.16. Decisions of Other Accrediting Agencies
The COE monitors programs throughout the accreditation cycle via annual reports, third party comment, and focused site visits. The Council will respond to any program not meeting the standards, even if the parent institution or program is involved in litigation. Conditions could exist within an institution where compliance with a Standard of Accreditation or reasonable assurance may change to noncompliance, due to action of another agency. If any of the following conditions are confirmed, the Council will notify the institution in writing, within 30 days of confirmation, that accreditation will not be renewed based upon an unfavorable outcome wherein:

1. An institution is subject to an interim action by a recognized institutional accrediting agency which could lead to suspension, revocation, or termination of accreditation or reasonable assurance.
2. An institution is subject to an interim action by a recognized state agency which could lead to suspension, revocation, or termination of accreditation or reasonable assurance.
3. An institution has been notified of a threatened loss of accreditation and due process procedure is not complete.
4. An institution has been notified of a threatened suspension, revocation, or termination by the state of the institution’s legal authority to provide postsecondary education and the due process procedure is not complete.

10.17. Policies on Reporting to USDE
An updated listing of accredited colleges of veterinary medicine, noting those institutions wherein an adverse action has been taken or those that have voluntarily withdrawn from the accreditation process, will be submitted to the Secretary of the Department of Education within 30 days of the decision. Additionally, a listing of colleges and the accreditation status of each is submitted annually. The COE will notify the Department of Education within 30 days regarding the following:
- A list of the accreditation and reasonable assurance decisions made.
- A decision by the COE to award provisional accreditation or reasonable assurance to a newly formed college.
- A final decision by the COE to deny, withdraw, suspend, or terminate the accreditation or provisional accreditation of a college; or to take other adverse action against a college.*
- A decision by the COE to place a college on probationary accreditation. Within 24 hours of notification of the program, the COE will notify the public of its decision via the AVMA web site.
- A decision by an accredited college to withdraw voluntarily from accreditation or provisional accreditation.
- A decision by an accredited college to let its accreditation or provisional accreditation lapse.

If the Secretary requests additional information on a preaccredited or accredited program, the COE will respond in a timely manner. The COE will forward a copy of its annual data noting major accrediting activities during the previous year, if so requested by the USDE. The COE does not currently prepare an annual report of its accreditation activities. However, if such a report is developed at a future date, the document will be forwarded to the USDE on an annual basis. If the COE believes a college or school is failing to meet its Title IV, Higher Education Authority responsibilities or is engaged in fraud or abuse, the name of that institution will be provided to the USDE.

The Secretary will be provided with information regarding any proposed change that will alter the COE’s scope of recognition or compliance. Within 60 days of a final decision regarding accreditation or reasonable assurance status, the COE will make available to the Department of Education, appropriate state postsecondary education review entities; and to the public upon request, a brief statement summarizing the reasons for the final decision to deny, withdraw, suspend, or terminate accreditation or provisional accreditation of a college, and the comments the college may wish to make with regard to the decision.

* When an adverse action is taken by the Council, the USDE, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies will be notified at the same time as the program but no later than 30 days following the action.
11. THE SITE VISIT

11.1. Objective of Site Visit
The objective of a site visit is to verify and supplement information presented in the self-study report. Site visits are made only with the concurrence of the administration of the college and its parent institution. When it appears in the best interest of the college, the university concerned, the AVMA, or another accrediting agency, every effort is made to coordinate and cooperate with other accrediting agencies in request for information and conduct of visits.

At least nine months before the end of the period for which a college is accredited, the dean is alerted to the requirements for preliminary reports, and arrangements for a site visit are made. A copy of the current statement of policies and procedures of the COE is sent to the dean.

11.2. Cost
The costs for evaluation of US and Canadian colleges of veterinary medicine are shared by those colleges and the AVMA, except for requests for reasonable assurance status from proposed new colleges, colleges with provisional accreditation status, and when a site visit is made at the request of a college for consulting on program development not directly related to an accreditation decision. In these circumstances, the college pays all costs. Beginning July 1, 2015, each accredited US and Canadian college pays 50% of the direct and indirect costs of accreditation annually and all costs associated with accreditation site visits. The annual fee is based on the actual cost of the accreditation process the previous year. The college must be current on its annual payments 60 days prior to the regularly scheduled site visit. Failure to pay the fees in a timely manner may result in withholding accreditation. Site visit team members are reimbursed for their expenses, but no honorariums are paid.

The accreditation procedure available to colleges of veterinary medicine outside the US and Canada requires that all indirect and indirect costs including site visits must be paid by the college (see Section 6.4.5).

11.3. Site Visit Team
Site visit teams are selected to represent educators, practitioners, and others (including public members) in the proportion necessary to evaluate a college and its programs.

- US – Accreditation site teams are composed of at least five trained site visitors, at least four of whom shall be trained site visitors selected by the COE (one of whom will serve as chair) and one trained site visitor selected by the CVMA. In addition, the team will be accompanied by one or two current COE member(s) (non-voting observers), and one AVMA staff member (non-voting).
- Canada – Accreditation site teams are composed of at least five trained site visitors, at least two of whom shall be trained site visitors (one of whom will serve as chair) selected by the COE and three trained site visitors selected by the CVMA. In addition, the team will be accompanied by one or two current COE member(s) (non-voting observers), and one AVMA staff member (non-voting).
- Foreign – Accreditation site teams are composed of six trained site visitors; three trained site visitors (one of whom shall serve as chair) selected by the COE, one trained site visitor selected by the CVMA, and two members from the country wherein the college is located, with the exception of joint site visits where the make-up of the team shall be decided by the accrediting bodies. In addition, the team will be accompanied by one or two current COE member(s) (non-voting observers), and one AVMA staff member (non-voting).
- Advisory/Consultative site team – These site teams are composed of at least three trained site visitors and one AVMA staff member (non-voting). In addition, the team will be accompanied by one or two current COE member(s) (non-voting observers).

COE site visitors will be veterinarians or former COE public members who have undergone training to conduct site visits. Such training shall include an initial two- and one-half-day training session at AVMA headquarters.
and an annual refresher training on-line. Training must be updated annually to continue to serve as a site visitor. Current COE members may not serve as COE site visitors.

Site visitors will serve six-year, staggered terms. A call for applications and nominations will be distributed broadly. The COE will review the credentials of the applicants and nominees and select site visitors. A pool of no less than 30 will be maintained.

Observers may not vote at the site visit. Current COE members serving as observers may not vote on the accreditation status of the institution visited.

Site visitors are identified and assigned to each team by the chair of the Evaluation Committee. These individuals participate as volunteers and are not eligible for honorariums, but may be reimbursed, when necessary, for transportation, food, lodging, and incidental expenses. *Public members may be included on site visits, but because of their limited number, are not included in every visit. However, public members shall fulfill all the duties of a team member and have the right to vote.*

An effort will be made to balance the areas of expertise on the site visit teams. Each site visit team includes a representative of the CVMA appointed by that organization. No member is assigned to a site visit team until they have completed training and orientation.

An AVMA staff member will accompany each site team and assist in coordinating activities. Staff will consider how each of the standard requirements is being met by the college and note any points not covered in the self-evaluation report. If major deficiencies are found in the material presented, staff is requested to ask the college for supplemental material.

### 11.4. The Self-study

No later than eight weeks before the site visit, the college must provide the self-study as a hard copy (one only) and in electronic format to the AVMA office. The electronic copy should be sent either by e-mail or made available using an online drop box. Sufficient electronic and hard copies must also be prepared and shipped by the college to each site team member. Failure to file a suitable report by the deadline, and in the format specified, may result in postponement of the site visit. One college catalog must be made available on site.

The following outlines should be used as a guide in the development of the report of self-evaluation:

<table>
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<tr>
<th>OBJECTIVES</th>
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<tbody>
<tr>
<td>1. State the major goals and objectives of the college, and comment on how they are being met.</td>
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<tr>
<td>2. Describe methods and/or tools used to measure outcomes of the total program of instruction, research, and service.</td>
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<tr>
<td>3. List the major strengths and weaknesses of the college.</td>
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<tr>
<td>4. Recommendations.</td>
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Guidance and the elements necessary for the self-study are provided. Under each of the standards, provide the required information in the most concise manner for your college. Where appropriate, the information/data presented must be analyzed and/or summarized for brevity and clarity. The information provided under each standard is evaluated by the Council in relation to that standard and to the mission of the college in order to determine compliance. Should the college deem that background information would be helpful for the Council to understand a given issue or condition, the information should be included in a summary format in appropriate appendices.
All materials related to student recruitment into the professional veterinary medical program shall be made available to the site visit team during the visit. These materials shall include brochures, pamphlets, posters, displays, videos, publications, and other materials used to advertise the program to prospective students. These materials should be placed in an area that is easily accessible to the site visit team. A summary of the number, geographic area, and potential student interest associated with recruitment visits conducted by the college during the past five years shall be made available.

11.4.1. Format of the Self-study
The body of the self-study should not be more than 50 total pages of text (one sided) and supporting documentation not more than another 50 pages. In preparing the self-study, analyze the data that are appropriate and present the results in an easily understandable form (for example, graphs, charts, etc.) that clearly describes trends. Please do not include educational philosophies or long explanations, but include brief explanations that may assist the site team and Council in understanding how the program is complying with a Standard. When printing the self-study, use a font size that is easily readable. Please have the hard copies of the self-study bound using a plastic or wire spiral binding product (please do not use a loose-leaf notebook format). Addendums should be those required and those the college feels assist in understanding how the college complies with a Standard. Additional materials may be placed in the meeting room for the site team, but the Council does not require these materials and they should be kept to a minimum.

The college report should be primarily in narrative form with appropriate tables and diagrams attached as appendices. Minority opinions at any level should be included under appropriate heading. The appropriate administrative officer should provide an executive summary of the self-study addressing strengths and weaknesses of program elements as covered by the standards.

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<tr>
<th>REPORTS AT ALL LEVELS SHOULD BE ORGANIZED UNDER THE FOLLOWING HEADINGS:</th>
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<tbody>
<tr>
<td>Objectives</td>
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<tr>
<td>Standard 1, Organization</td>
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<tr>
<td>Standard 2, Finances</td>
</tr>
<tr>
<td>Standard 3, Physical Facilities and Equipment</td>
</tr>
<tr>
<td>Standard 4, Clinical Resources</td>
</tr>
<tr>
<td>Standard 5, Information Resources</td>
</tr>
</tbody>
</table>
12. ELEMENTS OF THE SELF STUDY

12.1. ORGANIZATION

Standard 1, Organization

The college must develop and follow its mission statement.

An accredited college of veterinary medicine must be a part of an institution of higher learning accredited by an organization recognized for that purpose by its country’s government. A college may be accredited only when it is a major academic administrative division of the parent institution and is afforded the same recognition, status, and autonomy as other professional colleges in that institution.

The chief executive officer/dean must be a veterinarian. This individual must have overall budgetary and supervisory authority necessary to assure compliance with accreditation standards. The officer(s) responsible for the professional, ethical, and academic affairs of the veterinary medical teaching hospital(s) or equivalent must also be veterinarians.

There must be sufficient administrative staff to adequately manage the affairs of the college as appropriate to the enrollment and operation.

The college must create an academic environment that does not discriminate and seeks to enhance diversity, consistent with applicable law. Diversity may include, but is not limited to, race, religion, ethnicity, age, gender, gender identity, sexual orientation, cultural and socioeconomic background, national origin, and disability.

12.1.1. Provide a college mission statement for the undergraduate, DVM, or equivalent program. The college mission statement must address:
- the overall teaching, research, and service commitment,
- the commitment to undergraduate education,
- the commitment to provide instruction and clinical opportunities for students in a wide variety of domestic species, including food animal, equine, and companion animal, and
- the commitment to excellence in program delivery.

12.1.2. Identify the body that accredits the university and the current status of accreditation.

12.1.3. Provide a flow chart indicating the position of the college of veterinary medicine in the university structure and show lines of authority and responsibility, and give the names and titles of principal university administrative officers related to the college.

12.1.4. Provide a flow chart of the organizational design of the college listing names, titles (deans, associate/assistant deans, directors, department heads, etc.), academic credentials, and assignments of the college administrators.

12.1.5. Describe the role of faculty, staff, and students in the governance of the college and list the major committees of the college, and their appointment authority.

12.1.6. If the college plans to change its current organization, provide a summary of those plans.

12.1.7. Provide documentation of policies and activities that demonstrate that diversity is an important part of the academic culture, as consistent with applicable law.
12.2. FINANCES

**Standard 2, Finances**

Finances must be adequate to sustain the educational programs and mission of the college.

Colleges with non DVM undergraduate degree programs must clearly report finances (expenditures and revenues) specific to those programs separately from finances (expenditures and revenues) dedicated to all other educational programs.

Clinical services, field services and teaching hospitals must function as instructional resources. Instructional integrity of these resources must take priority over financial self-sufficiency of clinical services operations.

**12.2.1.** Complete Tables A, B, and C for the past five years and analyze the trends for each category.
**12.2.2.** Comment on the strengths and weaknesses in revenues over the past five years.
**12.2.3.** Provide a comprehensive trend analysis of revenue sources that have supported the professional teaching program over the past five years (graphs or other visual presentations would be helpful).
**12.2.4.** Describe how revenues over the past five years have impacted the college’s ability to provide a contemporary professional teaching program and ancillary support services.
**12.2.5.** Compare the percentage of hospital income to total hospital operational costs.
**12.2.6.** Describe anticipated trends in future revenues and expenditures.

### EXPENDITURES FOR IMMEDIATE PAST FIVE FISCAL YEARS

**TABLE A**

<table>
<thead>
<tr>
<th>Expenditure</th>
<th>Fiscal year</th>
<th>% change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instruction, academic support, and student services¹,²</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research expenditures³</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outreach/continuing education²</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teaching hospital²</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diagnostic lab and other clinical lab</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Facilities operations and maintenance, utilities, and other expenditure for infrastructure³</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital expenditures (renovations and new construction)⁴</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student aid (extramurally sponsored grants to students selected by the institution)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student aid (university-sponsored aid to students, inclusion of gifts and endowment income)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other expenditures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total expenditures⁵</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
EXPENDITURE TABLE FOOTNOTES

E1, E2, E3, E4\footnote{These should include salary, wages and fringe benefits for faculty and staff engaged in each category of activity (instruction, research, and outreach/continuing education and teaching hospital services).}  

E1\footnote{For distributed models of clinical education, this should include fees paid to clinical hosts.}  

E6\footnote{If colleges are assessed fees for infrastructure support provided by the university, they should be recorded here. These could include expenditures for facilities operations and maintenance (O&M), utilities, and central university administration.}  

E7\footnote{Capital expenditures include the acquisition and maintenance of fixed assets, such as land, buildings, and equipment. If capital expenditures are paid from college resources, they should be entered here.}  

E10\footnote{This should be the sum of expenditure rows 1-9.}  

COLLEGE REVENUE FOR IMMEDIATE PAST 5 FISCAL YEARS

<table>
<thead>
<tr>
<th>Revenue</th>
<th>Fiscal year</th>
<th>% change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government appropriation to college \footnote{1}</td>
<td></td>
<td></td>
</tr>
<tr>
<td>University appropriation to college (If veterinary student tuition is returned in this appropriation, subtract it and include it in line 3). \footnote{2}</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Revenue derived from students (tuition and other fees) that is available for college use. (Do not include any amount kept by or remanded to the university for central university use). \footnote{3}</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuition and fee revenue paid by other entities on the students’ behalf (e.g. educational contracts &amp; fees for clinical instruction) \footnote{4}</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teaching hospital revenue \footnote{5}</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diagnostic lab and other clinical lab revenue \footnote{6}</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Extramural grants and contracts \footnote{7}</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overhead (indirect costs or F&amp;A returned to the college, department, or faculty member)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current year gifts and endowment income \footnote{8}</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other revenue (CE registration, certificate program enrollment,</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### REVENUE TABLE FOOTNOTES

**R1** Includes all appropriated public funds (state, province, region, country, etc.). Include salaries and fringe for positions supported directly by the government, if any.

**R2** If tuition is returned to the college from the university, calculate student-derived revenue as the product of enrollment and tuition & fee rate (line R3) and subtract this amount from the university appropriation. Enter the remaining appropriation here.

**R3** Line 3 includes all revenue derived from students (tuition and related fees) paid directly to the college or as a part of the university allocation to the college. If this number is not known, calculate student-derived revenue as the product of enrollment and tuition & fee rate. Enter that number here.

**R4** Line 4 should include any revenue derived from contracts for providing veterinary student instruction (regional contracts, independent state-to-college contracts, contracts between colleges for clinical education, etc.).

**R5** Revenue generated by hospital services. Government and university support for the teaching hospital should be reported in rows 1 and 2, respectively.

**R6** Revenue generated by clinical laboratories. This should not include revenue reported for the teaching hospital in line 3. Government and university support for clinical laboratories should be reported in rows 1 and 2, respectively.

**R7** Total direct extramural awards. Also include awards that flow through university foundations. This should include grants for scholarly work related to research, instruction, and outreach, but should **not** include contracts to provide instruction (e.g., clinical year instruction for students from other institutions or contracts through which other states pay for instruction of residents of that state).

**R9** Exclude planned gifts. Also exclude research funded through foundations already reported in line 7.

**R11** This should be the sum of revenue rows 1-10.

---

### ENDOWMENT

<table>
<thead>
<tr>
<th>Endowment</th>
<th>Fiscal year</th>
<th>% change</th>
</tr>
</thead>
<tbody>
<tr>
<td>true endowment market value</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Standard 3, Physical Facilities and Equipment**

All aspects of the physical facilities must provide an appropriate learning environment. Safety of personnel and animals must be a high priority. Classrooms, teaching laboratories, teaching hospitals, which may include but are not limited to ambulatory/field service vehicles, seminar rooms, and other teaching spaces shall be clean, maintained in good repair, and adequate in number, size, and equipment for the instructional purposes intended and the number of students enrolled.

Administrative and faculty offices and research laboratories must be sufficient for the needs of the faculty and staff.

An accredited college must maintain an on-campus veterinary teaching hospital(s), or have formal affiliation with one or more off-campus veterinary hospitals or other training sites used for teaching. Appropriate diagnostic and therapeutic service components must be present to meet the expectations of the practice type. These include, but are not limited to, pharmacy, diagnostic imaging, diagnostic support services, isolation facilities, intensive/critical care, ambulatory/field service vehicles, and necropsy facilities in the teaching hospital(s) and/or facilities that provide core clinical training. Operational policies and procedures must be posted in appropriate places. Standards related to providing an adequate teaching environment and safety of personnel and animals shall apply to all teaching hospitals and core training sites.

Facilities for the housing of animals used for teaching and research shall be sufficient in number, properly constructed, and maintained in a manner consistent with accepted animal welfare standards. Adequate teaching, laboratory, research, and clinical equipment must be available for examination, diagnosis, and treatment of all animals used by the college.

12.3.1. Provide a brief description of the major functions of, or activities that take place in the facilities used by the college in fulfilling its mission.

12.3.2. Provide an area map that indicates the principal facilities of the college. Describe distance and travel time to off-campus facilities.

12.3.3. Describe the college’s safety plan and facilities management plan including mechanisms documenting compliance.

12.3.4. Describe how safety and facilities plans are managed and reviewed at all off-campus core training sites.

12.3.5. Describe the adequacy (pertains to all facilities used by the college whether on-campus or off-campus).

12.3.6. For safety and educational purposes, protocols must be posted in the isolation facilities and the facilities must be used for instruction in isolation procedures (biocontainment).

12.3.7. Describe current plans for improvement.
12.4. Clinical Resources

Standard 4, Clinical Resources

Normal and diseased animals of various domestic and exotic species must be available for instructional purposes, either as clinical patients or provided by the institution. While precise numbers are not specified, in-hospital patients and outpatients including field service/ambulatory and herd health/production medicine programs are required to provide the necessary quantity and quality of clinical instruction. The program must be able to demonstrate, using its assessment of clinical competency outcomes data, that the clinical resources are sufficient to achieve the stated educational goals and mission.

It is essential that a diverse and sufficient number of surgical and medical patients be available during an on-campus clinical activity for students’ clinical educational experience. Experience can include exposure to clinical education at off-campus sites, provided the college reviews and regularly monitors these clinical experiences and educational outcomes. Further, such clinical experiences should occur in a setting that provides access to subject matter experts, reference resources, modern and complete clinical laboratories, advanced diagnostic instrumentation and ready confirmation (including necropsy). Such examples could include a contractual arrangement with nearby practitioners who serve as adjunct faculty members and off-campus field practice centers. The teaching hospital(s) shall provide nursing care and instruction in nursing procedures. A supervised field service and/or ambulatory program must be maintained in which students are offered multiple opportunities to obtain clinical experience under field conditions. Under all situations students must be active participants in the workup of the patient, including physical diagnosis and diagnostic problem oriented decision making.

Medical records must be comprehensive and maintained in an effective retrieval system to efficiently support the teaching, research, and service programs of the college. Students should be trained in the use of an electronic medical records system.

12.4.1. Complete Tables A, B, C, D, E, F, and G, if applicable, for the past five years and analyze trends for each species (category). Include only those patients, farm call, and animals examined that have direct student involvement.

12.4.2. Describe and analyze the adequacy of normal and clinically diseased animals (hospitalized, out-patient, field service/ambulatory and production medicine) used by students in the course of their learning experience.

12.4.3. Describe unique clinical educational resources or programs that enhance the educational mission.

12.4.4. If off-campus clinical instruction sites are used regularly by multiple students, complete Table H and describe the planning, supervision, and monitoring of students; and contracting arrangements for non-institutional based faculty (Table I).

12.4.5. Describe the involvement and responsibilities of professional students in the healthcare management of patients (and clients) in clinical programs of the college.

12.4.6. Describe how subject-matter experts and clinical resources are integrated into clinical instruction.

12.4.7. Describe the adequacy of the medical records system used for the hospital(s), including field service and/or ambulatory and population medicine. Records must be comprehensive and maintained in an effective retrieval system to efficiently support the teaching, research, and service programs of the college.

12.4.8. Describe how the college has responded to increasing/decreasing clinical resources.

12.4.9. Describe the means used to maximize the teaching value of each case across the curriculum.
### Teaching Hospital

**Table A Clinical Resources – on-campus facilities**

<table>
<thead>
<tr>
<th>Species</th>
<th>Previous Fiscal Year</th>
<th>1 Fiscal Year Prior</th>
<th>2 Fiscal years Prior</th>
<th>3 Fiscal Years Prior</th>
<th>4 Fiscal Years Prior</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Visits</td>
<td>Hosp</td>
<td>Visits</td>
<td>Hosp</td>
<td>Visits</td>
</tr>
<tr>
<td>canine</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>feline</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>bovine</td>
<td></td>
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<tr>
<td>small ruminant</td>
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<tr>
<td>equine</td>
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<tr>
<td>porcine</td>
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<tr>
<td>caged birds</td>
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<tr>
<td>caged mammals</td>
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<tr>
<td>wildlife</td>
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<tr>
<td>zoo animal</td>
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<tr>
<td>other</td>
<td></td>
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</tr>
</tbody>
</table>

**Patient visits** — total number of times the patient visits the hospital (if Buffy visits the hospital 3 times this year, this would count as 3 visits)

**Hospitalized** — number of patients that were hospitalized

---

**Table B Clinical Resources – college owned and operated off-campus facilities**

<table>
<thead>
<tr>
<th>Species</th>
<th>Previous Fiscal Year</th>
<th>1 Fiscal Year Prior</th>
<th>2 Fiscal years Prior</th>
<th>3 Fiscal Years Prior</th>
<th>4 Fiscal Years Prior</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Visits</td>
<td>Hosp</td>
<td>Visits</td>
<td>Hosp</td>
<td>Visits</td>
</tr>
<tr>
<td>canine</td>
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<tr>
<td>feline</td>
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<tr>
<td>bovine</td>
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<tr>
<td>small ruminant</td>
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<td>equine</td>
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<td>porcine</td>
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<td>caged birds</td>
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<td>caged mammals</td>
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<td>wildlife</td>
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<td>zoo animal</td>
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<tr>
<td>other</td>
<td></td>
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</tbody>
</table>

**Patient visits** — total number of times the patient visits the hospital (if Buffy visits the hospital 3 times this year, this would count as 3 visits)

**Hospitalized** — number of patients that were hospitalized
### Table C Clinical Resources – cases seen by students during required rotations at privately owned and operated facilities

<table>
<thead>
<tr>
<th>Species</th>
<th>Previous Fiscal Year</th>
<th>1 Fiscal Year Prior</th>
<th>2 Fiscal years Prior</th>
<th>3 Fiscal Years Prior</th>
<th>4 Fiscal Years Prior</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Visits</td>
<td>Hosp</td>
<td>Visits</td>
<td>Hosp</td>
<td>Visits</td>
</tr>
<tr>
<td>canine</td>
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<td></td>
</tr>
<tr>
<td>feline</td>
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<tr>
<td>bovine</td>
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<tr>
<td>small ruminant</td>
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<td>equine</td>
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<td>porcine</td>
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<td>caged birds</td>
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<td>caged mammals</td>
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<td>wildlife</td>
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<tr>
<td>zoo animal</td>
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<tr>
<td>other</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Patient visits** — total number of times the patient visits the hospital (if Buffy visits the hospital 3 times this year, this would count as 3 visits)

**Hospitalized** — number of patients that were hospitalized

### Ambulatory/Field Service Program

**Table D Clinical Resources – college owned and operated ambulatory services**

<table>
<thead>
<tr>
<th>Species</th>
<th>Previous Fiscal Year</th>
<th>1 Fiscal Year Prior</th>
<th>2 Fiscal years Prior</th>
<th>3 Fiscal Years Prior</th>
<th>4 Fiscal Years Prior</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No. Farm Calls</td>
<td>No. Animals Treated</td>
<td>No. Farm Calls</td>
<td>No. Animals Treated</td>
<td>No. Farm Calls</td>
</tr>
<tr>
<td>Bovine</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caprine</td>
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<td>Equine</td>
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<td>Ovine</td>
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<tr>
<td>Porcine</td>
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<tr>
<td>Other</td>
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</tr>
</tbody>
</table>

**Number of Farm (site) Calls** — total number of calls/visits made to farms/operations

**Number of Animals Examined/Treated** — number of individual animals examined/treated

Include only those patients, farm calls, and animals examined that have direct student involvement.
Table E Clinical Resources – Cases seen by students during required rotations at private practice ambulatory services

<table>
<thead>
<tr>
<th>Species</th>
<th>Previous Fiscal Year</th>
<th>1 Fiscal Year Prior</th>
<th>2 Fiscal Years Prior</th>
<th>3 Fiscal Years Prior</th>
<th>4 Fiscal Years Prior</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No. Farm Calls</td>
<td>No. Animals Treated</td>
<td>No. Farm Calls</td>
<td>No. Animals Treated</td>
<td>No. Farm Calls</td>
</tr>
<tr>
<td>Bovine</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Caprine</td>
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<tr>
<td>Equine</td>
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<td>Ovine</td>
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<td>Porcine</td>
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<tr>
<td>Other</td>
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</tr>
</tbody>
</table>

Number of Farm (site) Calls — total number of calls/visits made to farms/operations
Number of Animals Examined/Treated — number of individual animals examined/treated
Include only those patients, farm calls, and animals examined that have direct student involvement.

Herd/Flock Health Program

Table F

<table>
<thead>
<tr>
<th>Describe your clinical resources for production medicine training by production group below</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dairy</td>
</tr>
<tr>
<td>Beef Feedlots</td>
</tr>
<tr>
<td>Cow-Calf</td>
</tr>
<tr>
<td>Small Ruminants</td>
</tr>
<tr>
<td>Swine</td>
</tr>
<tr>
<td>Poultry</td>
</tr>
<tr>
<td>Fish</td>
</tr>
<tr>
<td>Equine</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

Necropsy

Table G Necropsy Table – Number of Necropsies involving Students

<table>
<thead>
<tr>
<th>Species</th>
<th>Previous Fiscal Year</th>
<th>1 Fiscal Year Prior</th>
<th>2 Fiscal Years Prior</th>
<th>3 Fiscal Years Prior</th>
<th>4 Fiscal Years Prior</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canine</td>
<td></td>
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<tr>
<td>Feline</td>
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<tr>
<td>Bovine</td>
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<tr>
<td>Caprine</td>
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<tr>
<td>Equine</td>
<td></td>
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<tr>
<td>Ovine</td>
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<tr>
<td>Porcine</td>
<td></td>
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</tr>
<tr>
<td>Poultry</td>
<td></td>
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<tr>
<td>Other Birds</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Non-Avian Exotics</td>
<td></td>
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</tr>
</tbody>
</table>
**Off-campus Sites.** If your program regularly uses off-campus sites for clinical education of students (excluding educational experiences that are attended sporadically by individual students), please provide the following information for each site. If certain services are not provided, please indicate where the students learn the required clinical skills. If your school/college does not use remote facilities, please do not complete the chart or respond to the requested information.

### Off-Campus Facilities

Table H Clinical Resources – off-campus facilities

<table>
<thead>
<tr>
<th>HOSPITAL, CLINIC, SHELTER</th>
<th>REQUIRED ROTATION FULFILLED</th>
<th>ROTATION DURATION (WEEKS)</th>
<th>AVG NO. STUDENTS PER YR.</th>
<th>SURGERY Y/N</th>
<th>NECROPSY Y/N</th>
<th>CLIN PATH (Y/ON SITE, Y/OFF SITE, N)</th>
<th>RADIOLOGY Y/N</th>
<th>ICU Y/N</th>
<th>ISOLATION Y/N</th>
<th>MOST RECENT ANNUAL CASELOAD BY SPECIES FOR THE FACILITY</th>
<th>NEW OR REINTRODUCED SITE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
<td>CANINE</td>
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<td>FELINE</td>
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<td>EQUINE</td>
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<td>BOVINE</td>
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<td>SM RUM</td>
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<td></td>
<td></td>
<td>OTHER</td>
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</tr>
</tbody>
</table>

55
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Please provide a brief description of training and evaluation of faculty, levels of case management by the students, and assessment tools for measuring student progress for the remote site(s). Describe student access to content experts.

Table I

<table>
<thead>
<tr>
<th>Off-campus site: Number &amp; educational experience</th>
<th>Duration of rotation</th>
<th>Number of students per year</th>
<th>Faculty mentor approved (check)</th>
<th>Off-site Evaluator</th>
<th>Written educational objective(s) (check)</th>
<th>Educational outcomes assessed &amp; student evaluations reviewed (check)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>Yes</td>
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</tbody>
</table>
12.5. Information Resources

Standard 5, Information Resources

Timely access to information resources and information professionals must be available to students and faculty at core training sites. The college must have access to up-to-date human, digital, and physical resources for retrieval of relevant veterinary and supporting literature and for development of instructional materials, and provide appropriate training and technical support for students and faculty. The program must be able to demonstrate, using its outcomes assessment data, that students are competent in retrieving, evaluating, and applying information through the use of electronic and other appropriate information technologies.

12.5.1. Describe and comment on the adequacy of information retrieval and learning resources.
12.5.2. Briefly describe the availability of learning and information technology resources support for faculty and students, including personnel and their qualifications.
12.5.3. Describe the reliability and methods of access, as well as security considerations, to library information resources for faculty and students when they are on and off campus.
12.5.4. Describe the resources (training, support) provided and available to students for improving their skills in accessing and evaluating information from sources in any media relevant to veterinary medicine.
12.5.5. Describe assessment of students’ skills in retrieving, evaluating, and applying information pertinent to veterinary medical science including clinical case management as preparation for lifelong learning.
12.5.6. Describe current plans for improvement.
12.6. Students

Standard 6, Students

The number of professional degree students, DVM or equivalent, must be consistent with the resources and the mission of the college. The program must be able to demonstrate, using its outcomes assessment data, that the resources are sufficient to achieve the stated educational goals for all enrolled students.

Colleges should establish post-DVM programs such as internships, residencies and advanced degrees (e.g., MS, PhD), that must complement and strengthen the professional program and not adversely affect the veterinary student experience.

Student support services must be available within the college or university. These must include, but are not limited to, appropriate services to support student wellness and to assist with meeting the academic and personal challenges of the DVM program; support for students with learning or other disabilities; and support of extra-curricular activities relevant to veterinary medicine and professional growth.

The college or parent institution must provide information and access to counseling services regarding financial aid, debt management, and career advising. Career advising must include selection of clinical experiences.

The college must promote an inclusive institutional climate that fosters diversity within the student body, consistent with applicable law.

In relationship to enrollment, the colleges must provide accurate information for all advertisements regarding the educational program by providing clear and current information for prospective students. Further, printed catalog or electronic information must state the purpose and goals of the program, provide admission requirements and procedures, state degree requirements, present faculty descriptions, provide an accurate academic calendar, clearly state information on educational cost and debt risk, for the college. The college must provide information on procedures for withdrawal including the refund of student’s tuition and fees allowable. Information available to prospective students must include relevant requirements for professional licensure.

Each accredited college must provide a mechanism for students, anonymously if they wish, to offer suggestions, comments, and complaints regarding compliance of the college with the Standards of Accreditation. These materials shall be made available to the Council annually.

12.6.2. Provide a listing of student services. These services must include, but are not limited to, registration, testing, mentoring (advising), counseling, tutoring, peer assistance, financial aid counseling programs, and clubs and organizations. Demonstrate that students are informed of and have ready access to academic counseling, personal wellness, financial aid, debt management, and career planning services.
12.6.3. Provide a list of tuition-related information available for prospective students. This information, as consistent with applicable law, must include estimated total educational cost, cost of living considerations, and a description of financial aid programs. Make collected data on salaries, employment rates, and educational debt available to the public, as consistent with applicable law.
12.6.4. Describe how conflicts of interest regarding academic assessment of students are avoided with individuals who provide student counseling.

12.6.5. Provide a summary of college activities in support of placement of graduates.

12.6.6. Provide academic catalogue(s) (or an electronic address for this resource) and freshman/upper-class orientation materials.

12.6.7. Describe the system used on an ongoing basis to collect student suggestions, comments, and complaints related to the standards for accreditation.

12.6.8. For student services that the college does not provide directly, describe how students have reasonable access to such services from the parent institution or from other sources that are relevant to the specific needs of students, and describe current plans for improvement in resources for students.

Complete the following table describing enrollment for each of the last five years:

A. Veterinary Medical Program

<table>
<thead>
<tr>
<th>Class</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Year 4</th>
<th>Year 5</th>
<th>Year 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>First-year</td>
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<tr>
<td>Second-year</td>
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<tr>
<td>Third-year</td>
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<tr>
<td>Fourth-year</td>
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<tr>
<td># Graduated</td>
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<tr>
<td>Students from other institutions enrolled for the entire clinical year only*</td>
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</tr>
</tbody>
</table>

*represents student or students admitted for only the clinical year from other accredited and non-accredited schools

B. Interns, Residents, and Graduate Students (enter each person in only one category) per year for last five years

<table>
<thead>
<tr>
<th>Department</th>
<th># Interns</th>
<th># Residents</th>
<th># Resident-MS</th>
<th># Resident-PhD</th>
<th>MS</th>
<th>PhD</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

C. DVM Students per year for last five years

<table>
<thead>
<tr>
<th>Academic Year</th>
<th>DVM</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
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<tr>
<td></td>
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</tbody>
</table>

* Min = students from historically underrepresented racial and ethnic groups to include: African-American/Black, Asian, Alaskan Native, American Indian, Hispanic, Native Hawaiian, and Pacific Islander, Multi-ethnic/racial. Foreign nationals should not be included in the minority category.
D. Other educational programs

Complete the following table describing enrollment for each of the last five years:

<table>
<thead>
<tr>
<th>Year</th>
<th>ACTIVITIES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Veterinary Technician Program</td>
</tr>
<tr>
<td></td>
<td>Number enrolled</td>
</tr>
<tr>
<td></td>
<td>Undergraduate Programs</td>
</tr>
<tr>
<td></td>
<td>Number enrolled</td>
</tr>
<tr>
<td></td>
<td>Other</td>
</tr>
<tr>
<td></td>
<td>Number enrolled</td>
</tr>
</tbody>
</table>

* represents students or students admitted for only the clinical year from other accredited and non-accredited schools
12.7. Admission

**Standard 7, Admission**

The college must have a well-defined and officially stated admissions policy and a process that ensures a fair and consistent assessment of applicants. The policy must provide for an admissions committee, a majority of whom must be full-time faculty members. The committee must make recommendations regarding the students to be admitted to the professional curriculum upon consideration of applications of candidates who meet the academic and other requirements as defined in the college’s formal admission policy.

The college must demonstrate its commitment to diversity and inclusion through its recruitment and admission processes, as consistent with applicable law. The college’s admissions policies must be nondiscriminatory, as consistent with applicable law.

Subjects for admission must include those courses prerequisite to the professional program in veterinary medicine, as well as courses that contribute to a broad general education. The goal of pre-veterinary education shall be to provide a broad base upon which professional education may be built, leading to lifelong learning with continued professional and personal development.

Factors other than academic achievement must be considered for admission criteria.

12.7.1. State the minimum requirements for admission.
12.7.2. Describe the student recruitment and selection process, including measures to enhance diversity.
12.7.3. List factors other than academic achievement used as admission criteria.
12.7.4. Complete Table A.
12.7.5. Describe current plans for assessing the success of the selection process to meet the mission of the college.
12.7.6. Describe your policies and procedures for admitting transfer students who will receive a degree from your institution, and state the number of transfer students admitted per year for the last five years.

<table>
<thead>
<tr>
<th>YEAR</th>
<th>STATE RESIDENTS</th>
<th>NON-RESIDENTS</th>
<th>CONTRACT STUDENTS</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>A/P*</td>
<td>O/A**</td>
<td>A/P</td>
<td>O/A</td>
</tr>
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<td></td>
<td>A/P</td>
<td>O/A</td>
<td>A/P</td>
<td>O/A</td>
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<td></td>
<td>A/P</td>
<td>O/A</td>
<td>A/P</td>
<td>O/A</td>
</tr>
</tbody>
</table>

*A/P = Applications/Positions Available
**O/A = Offers Made/Acceptances
12.8. Faculty

**Standard 8, Faculty**

Faculty numbers and qualifications must be sufficient to deliver the educational program and fulfill the mission of the college. Participation in scholarly activities is an important criterion in evaluating the faculty and the college. The college must provide evidence that it utilizes a well-defined and comprehensive program for the evaluation of professional growth, development, and scholarly activities of the faculty.

Academic positions must offer the security and benefits necessary to maintain stability, continuity, and competence of the faculty. The college must cultivate a diverse faculty though its hiring policies and retention practices, consistent with applicable law. The college must demonstrate its ongoing efforts to achieve parity in advancement opportunities and compensation. Part-time faculty, residents, and graduate students may supplement the teaching efforts of the full-time permanent faculty if appropriately integrated into the instructional program.

12.8.1. Complete Tables A and B. Assess the strengths of the faculty and support staff in fulfilling the college mission.

12.8.2. State the current number of academic faculty (head count) who possess credentials as listed in Tables C and D.

12.8.3. Assess the challenges for your college in maintaining faculty numbers and quality.

12.8.4. Provide information on the loss (what discipline/specialty) and recruitment of faculty (Table A).

12.8.5. Provide a concise summary of promotion and tenure policies, and the policy to assure stability for non-tenured, long-term faculty.

12.8.6. Provide an estimate of the weight assigned to promotion/tenure and or compensation for teaching, research, service, or other scholarly activities.

12.8.7. Briefly describe faculty professional development opportunities available in the college/university, including, but not limited to learning theory and instructional practices.

12.8.8. Describe the college’s processes to annually monitor equity in compensation and advancement.

12.8.9. Describe current plans or major changes in program direction that would be affected by faculty retirements, recruitment and retention.

12.8.10. Describe measures taken to attract and retain a diverse faculty.

12.8.11. Describe programs for on-campus delivery of curricular content by individuals not employed full time by the institution (other than occasional guest lecturers), including subjects taught. Estimate the percentage of core curricular content delivered in this way.

12.8.12. Describe the role of interns, residents, and graduate students in teaching and evaluating veterinary students.

Table A – Loss and recruitment of faculty (both tenure track & clinical track/equivalent)

<table>
<thead>
<tr>
<th>Department</th>
<th>Faculty Lost, number</th>
<th>Discipline/Specialty</th>
<th>Recruited, number</th>
<th>Year</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>
### Table B – Staff support for teaching and research

<table>
<thead>
<tr>
<th>AREA</th>
<th>FTE CLERICAL</th>
<th>FTE TECHNICAL</th>
<th>OTHER</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLINICAL TEACHING</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>NON-CLINICAL TEACHING</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RESEARCH</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
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<td></td>
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</tbody>
</table>

### Table C – Non-Veterinarians

<table>
<thead>
<tr>
<th>Title</th>
<th>MS</th>
<th>PhD</th>
<th>Board Certified</th>
<th>Board Certified &amp; MS</th>
<th>Board Certified &amp; PhD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrator</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Professor*</td>
<td></td>
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<tr>
<td>Associate Professor*</td>
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</tr>
<tr>
<td>Assistant Professor*</td>
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<tr>
<td>Instructor</td>
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<tr>
<td>Lecturer</td>
<td></td>
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<tr>
<td>Part-time Faculty (less than 75% time)</td>
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</tbody>
</table>

*include clinical track

### Table D – Veterinarians

<table>
<thead>
<tr>
<th>Title</th>
<th>DVM (only)</th>
<th>MS</th>
<th>PhD</th>
<th>Board Certified</th>
<th>Board Certified &amp; MS</th>
<th>Board Certified &amp; PhD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrator</td>
<td></td>
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</tr>
<tr>
<td>Professor*</td>
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<td>Associate Professor*</td>
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<tr>
<td>Assistant Professor*</td>
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<tr>
<td>Instructor</td>
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<tr>
<td>Lecturer</td>
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<tr>
<td>Part-time Faculty (less than 75% time)</td>
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</tbody>
</table>

*include clinical track

### Table Definitions:

**FTE** — An FTE is based on the contract with the employee. For example: If a dean hires a professor on a full-time basis, that contract counts as “1.0 FTE” whether or not the professor teaches. Similarly, if the professor is hired for a half-time, the FTE is “0.5”.

**Titles** — To simplify consolidation of these data, use the standard academic titles to the maximum extent possible.

Administrators = include deans, associate deans, assistant deans, directors, etc., who are involved in college-level administration and who are faculty members. Do NOT include department heads, chairs, section heads, etc., of programs not included in college-level administration.

Other Academic Personnel = all salaried academic staff (full or partial FTE) not granted the rank of administrator, professor, associate professor, or assistant professor.
Other Academic Staff = all paid academic staff in a teaching or research position. Do NOT include non-academic staff in this category. Non-academic staff refers to all clerical and technical staff.

Non-Clinical Resident = residents in basic science programs.
### Standard 9, Curriculum

The curriculum shall extend over a period equivalent to a minimum of four academic years, including a minimum of one academic year of hands-on clinical education. The curriculum and educational process should initiate and promote lifelong learning in each professional degree candidate.

The curriculum in veterinary medicine is the purview of the faculty of each college, but must be managed centrally based upon the mission and resources of the college. There must be sufficient flexibility in curriculum planning and management to facilitate timely revisions in response to emerging issues, and advancements in knowledge and technology. The curriculum must be guided by a college curriculum committee. The curriculum as a whole must be reviewed at least every seven (7) years. The majority of the members of the curriculum committee must be full-time faculty. Curriculum evaluations should include the gathering of sufficient qualitative and quantitative information to assure the curriculum content provides current concepts and principles as well as instructional quality and effectiveness.

The curriculum must provide:

- **a.** an understanding of the central biological principles and mechanisms that underlie animal health and disease from the molecular and cellular level to organismal and population manifestations.

- **b.** scientific, discipline-based instruction in an orderly and concise manner so that students gain an understanding of normal function, homeostasis, pathophysiology, mechanisms of health/disease, and the natural history and manifestations of important animal diseases, both domestic and foreign.

- **c.** instruction in both the theory and practice of medicine and surgery applicable to a broad range of species. The instruction must include principles and hands-on experiences in physical and laboratory diagnostic methods and interpretation (including diagnostic imaging, diagnostic pathology, and necropsy), disease prevention, biosecurity, therapeutic intervention (including surgery and dentistry), and patient management and care (including intensive care, emergency medicine and isolation procedures) involving clinical diseases of individual animals and populations. Instruction should emphasize problem solving that results in making and applying medical judgments.

- **d.** instruction in the principles of epidemiology, zoonoses, food safety, the interrelationship of animals and the environment, and the contribution of the veterinarian to the overall public and professional healthcare teams.

- **e.** opportunities for students to learn how to acquire information from clients (e.g. history) and about patients (e.g. medical records), to obtain, store and retrieve such information, and to communicate effectively with clients and colleagues.

- **f.** opportunities throughout the curriculum for students to gain an understanding of professional ethical, legal, economic, and regulatory principles related to the delivery of veterinary medical services; personal and business finance and management skills; and gain an understanding of the breadth of veterinary medicine, career opportunities and other information about the profession.

- **g.** Opportunities throughout the curriculum for students to gain and integrate an understanding of the important influences of diversity and inclusion in veterinary medicine, including the impact of implicit bias related to an individual’s personal circumstance on the delivery of veterinary medical services.

- **h.** knowledge, skills, values, attitudes, aptitudes and behaviors necessary to address responsibly the health and well-being of animals in the context of ever-changing societal expectations.

- **i.** fair and equitable assessment of student progress. The grading system for the college must be relevant and applied to all students in a fair and uniform manner.
12.9.1. State the overall objectives of the curriculum and describe how those objectives are integrated into individual courses.

12.9.2. Describe major curricular changes that have occurred since the last accreditation.

12.9.3. Describe the process used for curriculum assessment (including course/instructor evaluation) and the process used to assess curricular overlaps, redundancies, and omissions.

12.9.4. Describe the strengths and weaknesses of the curriculum as a whole.

12.9.5. Describe preceptor and externship programs (including the evaluation process).

12.9.6. **Curriculum Digest**

   In an addendum (printed or electronic) provide information on courses and rotations in the curriculum according to the following guidelines.

   12.9.6.a. Organize listing by year of the curriculum.

   12.9.6.b. Include both courses and clinical rotations in each year’s listing.

   12.9.6.c. In each year, list required courses/rotations first, followed by a listing of elective courses/rotations. Clearly mark the division between the two.

   12.9.6.d. For each item listed, please include:

      12.9.6.d.i. Course # and title,
      12.9.6.d.ii. Credit hours (divided by lecture/lab if appropriate),
      12.9.6.d.iii. Position in curriculum (quarter/semester as appropriate),
      12.9.6.d.iv. Predominant mode of instruction (didactic, problem-based, clinical rotation, or other with explanation), and

12.9.7. Describe current plans for curricular revisions.

12.9.8. Provide a description of the testing/grading system (scoring range, pass levels, pass/fail) and the procedures for upholding academic standards.

12.9.9. Describe the opportunities for students to learn how different cultural and other influences (e.g., ethnic origin, socio-economic background, religious beliefs, educational level, disabilities and other factors) can impact the provision of veterinary medical services.

12.9.10. Describe opportunities for students to learn principles of business management skills in veterinary medicine, and opportunities to learn personal financial management (e.g. coursework in financial literacy in the curriculum).

Should the educational program of a college be disrupted for more than two weeks (for example, closure of a hospital due to an infectious disease, loss of core course or rotation, etc.), the college must report in writing to the COE the cause of the disruption and remedies to minimize or to provide an alternative educational opportunity for students in response to the disruption.
12.10. Research Programs

Standard 10, Research Programs

The college must maintain substantial research activities of high quality that integrate with and strengthen the professional program. The college must demonstrate continuing scholarly productivity and must provide opportunities for any interested students in the professional veterinary program to be exposed to or participate in on-going high-quality research. All students must receive training in the principles and application of research methods and in the appraisal and integration of research into veterinary medicine and animal health.

The research standard serves to ensure student exposure to and/or participation in performance of high-quality research and ability to acquire, evaluate, and use new knowledge. Veterinary medical students must be introduced to how new knowledge is developed and disseminated and have access to participation in coursework and career development in research. Examples of learning objectives may include acquisition and evaluation of scientific literature, experimental and non-experimental design, critical analysis of data, scientific writing including writing of research proposals and submission of manuscripts for publication, and hands-on experience in bench, clinical, or field research.

Research Programs

12.10.1. Describe up to five programs of research emphasis and excellence and specifically focus on how these programs integrate with and strengthen the professional program.

12.10.1.a. Provide a description (one page or less) of measures of faculty research activity, apart from publications and grants enumerated in Tables 12.10.3.b and 12.10.3.c (e.g., faculty participation and presentation of original research in scientific meetings; involvement of faculty in panels, advisory boards or commissions; and national and international research awards received).

Student Experiences

12.10.2. Describe courses or portions of the curriculum where research-related topics are covered (for example – literature review/interpretation, research ethics, research methods or techniques, and study design).

12.10.2.a. Describe/list the current opportunities for participation in research, including summer research programs (Merial, NIH, Howard Hughes, etc.), academic year programs (NIH fellowships, industry funded, curricular time allowed for research), student employment in research labs and projects, and individually mentored research experiences.

12.10.2.b. Describe college research seminars and presentation for veterinary medical students, including the number of internal and external speakers, endowed research lectureships, veterinary medical student research seminars, veterinary medical student poster presentations, and college research days and awards and presentations made by veterinary medical students at scientific meetings or seminars at external sites.

12.10.2.c. Describe efforts by the college that facilitate the link between veterinary medical student research and subsequent or concurrent graduate education, and that enhance the impact of college research on the veterinary professional program.
12.10.3 Complete the following tables

Table 12.10.3.a.

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Total college DVM enrollment</th>
<th>DVM Students involved in research</th>
<th>Peer-reviewed pubs with DVM student as author or co-author</th>
<th>DVM/PhD students enrolled</th>
<th>DVM/MS/MPH students enrolled</th>
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Table 12.10.3.b.

<table>
<thead>
<tr>
<th>Dept</th>
<th>Year</th>
<th>Number Faculty*</th>
<th>Total Faculty FTE</th>
<th>Faculty in Research1 **</th>
<th>Total Research FTE</th>
<th>Research Faculty teaching in DVM curr**</th>
<th>No. unique peer-reviewed pubs2</th>
<th>No. book chapters including original findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dept A</td>
<td>Year 1</td>
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*All faculty, including full- and part-time faculty. **Research faculty are defined as faculty with ≥ 20% time devoted to research activity.
1The number of individual faculty members within each department involved in research, total research FTE, and research productivity (tabulate below for each of the last three years). For example: Dept. A has 35 faculty members with 30 involved in research and 6 FTE assigned to research
2 Count of unique publications only – a publication containing multiple co-authors must be counted only once in this table
Table 12.10.3.c.

<table>
<thead>
<tr>
<th></th>
<th>Extramurally Sponsored Federal Grants</th>
<th>Extramurally Sponsored State Grants</th>
<th>Extramurally Sponsored Private Contracts</th>
<th>No. Patents</th>
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<tbody>
<tr>
<td></td>
<td>Number</td>
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Only count grant, contract or patent in the year it is awarded to faculty holding a primary (≥50%) appointment within the college.

*Include only the component of the total budget awarded to the college
12.11. Outcomes Assessment

Standard 11, Outcomes Assessment

Outcomes of the veterinary medical degree program must be measured, analyzed, and considered to improve the program. New graduates must have the basic scientific knowledge, skills, and values to provide entry-level health care, independently, at the time of graduation. Student achievement must be included in outcome assessment. Processes must be in place to remediate students who do not demonstrate competence in one or more of the nine competencies.

The college should have in place a system to gather outcomes data on recent graduates to ensure that the competencies and learning objectives in the program result in relevant entry level competencies.

The college must have processes in place whereby students are observed and assessed formatively and summatively, with timely documentation to assure accuracy of the assessment for having attained the following competencies:

1. comprehensive patient diagnosis (problem solving skills), appropriate use of diagnostic testing, and record management
2. comprehensive treatment planning including patient referral when indicated
3. anesthesia and pain management, patient welfare
4. basic surgery skills and case management
5. basic medicine skills and case management
6. emergency and intensive care case management
7. understanding of health promotion, and biosecurity, prevention and control of disease including zoonoses and principles of food safety
8. ethical and professional conduct; communication skills including those that demonstrate an understanding and sensitivity to how clients’ diversity and individual circumstance can impact health care
9. critical analysis of new information and research findings relevant to veterinary medicine.

The Council on Education expects that 80% or more of each college’s graduating senior students sitting for the NAVLE will have passed at the time of graduation.*

*Colleges that do not meet this criterion will be subjected to the following analysis. The Council will calculate a 95% exact binomial confidence interval for the NAVLE scores for colleges whose NAVLE pass rate falls below 80%. Colleges with an upper limit of an exact 95% binomial confidence interval less than 85% for two successive years in which scores are available will be placed on Probationary Accreditation. Colleges with an upper limit of an exact 95% binomial confidence level less than 85% for four successive years in which scores are available will, for cause, be placed on Terminal Accreditation. If no program graduates take the NAVLE, the Council will use other student educational outcomes in assessing compliance with the standard including those listed in 12.11.1.

Data to demonstrate outcomes of the educational and institutional program(s) may be collected by a number of means that include, but are not limited to, subjective and objective measures such as surveys, interviews, focus groups, self-assessments, observation and evaluation of skills and competencies. Data reported to the COE must be summarized for brevity.

Except for the North American Veterinary Licensing Examination (NAVLE), the Council does not assign numerical values to document levels of achievement for students in any of the outcome delineators, but closely analyzes trends for the college. Decreasing trends in student achievement over a five-year period may imply deficiencies in the program. The trends are used by the Council in its analysis of the compliance of the college with the Standards.
In the case of declining trends in the delineators, the college must provide an explanation for the decline(s), and must provide a plan to reverse the trend(s).

12.11.1. Student educational outcomes must include, but are not limited to:

12.11.1.a. Evidence of direct observations of students performing and/or having attained entry level competence in skills that demonstrate mastery of the nine competencies. Processes must be in place to provide remediation for any of the nine competencies in which students do not demonstrate competence.

12.11.1.b. Describe how student progress is monitored in each academic year and how each student is given formative assessment for their further development or timely remediation.

12.11.1.c. NAVLE school score report data and passage rates over the past five years (Table A).

Each college must submit a copy of the annual NAVLE School Score Report with the AVMA-COE Interim Report each year for those graduating students who sat for the examination.

12.11.1.d. Assessments of graduating seniors; and assessments of alumni at some post-graduation point (for example, three and/or five years post-graduation) assessing educational preparedness and employment satisfaction.

12.11.1.e. Assessments by employers of graduates to determine satisfaction with the graduates.

12.11.2. Program Outcomes

12.11.2.a. Student attrition rates with reasons (Table B).

Summarize student attrition by reporting student attrition from their initial matriculation cohort in Table B – Student Attrition. List the data for all the cohorts graduating in the last 5 years, as well as attrition thus far for currently enrolled students. List the cumulative attrition for each cohort from the time of matriculation. Colleges with multiple matriculation points per year should list each cohort separately. The Council on Education expects that an increasing (positive) trend in absolute attrition from the college will be explained, including the factors that are contributing to the trend, and that the college will describe the steps implemented and a timeline for arresting the trend. If absolute attrition over a five-year average is greater than 20%, the Council may request a focused site visit.

12.11.2.b. Employment rates of graduates (within one year of graduation) (Table C).

Annually each college must submit data on employment during the first year following graduation. The Council on Education expects that a declining (negative) trend in proportionate employment from the college will be explained. Colleges with an average employment rate over five years of less than 80% must provide an assessment of the factors that are impacting the trend.

12.11.2.c. Assessments by faculty (and other instructors, for example interns and residents) related to such subjects as adequacy of clinical resources, facilities and equipment, information resources, etc.; and preparedness of students entering phases of education, and

12.11.2.d. Additional assessment that might assist the college in benchmarking its educational program.

12.11.3. Institutional outcomes.

12.11.3.a. Describe the adequacy of resources and organizational structure to meet the educational purposes (dean should provide).

12.11.3.b. Describe how the college evaluates progress in meeting its mission (for example, benchmarking with other institutions, scholarly activity of the faculty, faculty awards, faculty and staff perception of teaching resources, student satisfaction with the educational program, teaching improvement benchmarks, and others, etc.).
12.11.3.c. If your program assesses other outcomes, briefly describe the results.

12.11.4. Describe how outcomes findings at the student, programmatic, and institutional level are used by the college to improve the educational program (give examples).

Table A – NAVLE

<table>
<thead>
<tr>
<th>Year</th>
<th>Students taking exam(s)</th>
<th>Students passing exam(s)</th>
<th>Average scores</th>
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</table>

Table B – Attrition

| Graduating Cohort | Relative Attrition | Absolute Attrition | |
|-------------------|--------------------|--------------------|-
|                   | Academic Reasons   | Personal Reasons   | Transfer to Another DVM Program |
|                   | Total Relative Attrition | Percent Relative Attrition | Total Absolute Attrition | Percent Absolute Attrition | Total Attrition | Percent Attrition |
| Graduating Cohort | Academic Reasons   | Personal Reasons   | Transfer to Another DVM Program |
|                   | Total Relative Attrition | Percent Relative Attrition | Total Absolute Attrition | Percent Absolute Attrition | Total Attrition | Percent Attrition |

Graduating Cohort - List by the scheduled time of graduation (e.g., spring 2021 or summer 2021 or fall 2021). Colleges with multiple cohorts should list each cohort separately.

Relative Attrition - Students moving to a subsequent cohort at the same institution for academic or personal reasons, or moving to a DVM program at another institution.

Absolute Attrition - Students who leave the DVM program and will not return.

Table C – Employment Rates

<table>
<thead>
<tr>
<th>Graduating Class</th>
<th>Total # graduates (number of respondents)</th>
<th># Employed in field related to veterinary training</th>
<th># Graduates in advanced clinical training (internships/residencies)</th>
<th># in advanced academic training (Masters/PhD)</th>
</tr>
</thead>
</table>
13. SITE VISIT AGENDA

The site team is responsible for verifying elements of the college self-study that focus on the professional education (DVM or equivalent), specifically addressing compliance of the college with the Standards of Accreditation.

The tour of the facilities must include all areas where all of the students are required to gather for learning (core sites) and all areas where all students in a specific track are required to gather for learning (core track sites). The full site team should visit all core sites if practical and either all of the site team or subcommittees of the site team may visit track sites. Any external site used for required clinical training in any discipline that is visited by at least 20 percent of the students over a two-year span SHOULD BE CONSIDERED FOR VISITATION FOR SOME OR ALL OF THE SITE TEAM.

The site team uses the meeting with various groups to validate information in the self-study report and to gather additional information relative to the Standards of Accreditation. While specific standards are the area of focus at a given meeting, any standard may be addressed at any meeting.

<table>
<thead>
<tr>
<th>MEETING</th>
<th>STANDARDS ADDRESSED</th>
<th>GOAL OF MEETING</th>
</tr>
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<tbody>
<tr>
<td>REQUIRED MEETINGS</td>
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<tr>
<td>Dean and selected administrators</td>
<td>Organization, Finance</td>
<td>To confirm governance structure in the college including effectiveness and flexibility; to clarify data in finance tables and discuss factors impacting financial viability of the college</td>
</tr>
<tr>
<td>Admissions Committee, Admission Officer(s)</td>
<td>Admissions, Outcomes Assessment</td>
<td>To clarify admissions processes as described in the Standard</td>
</tr>
<tr>
<td>Curriculum Committee, Outcome Officer(s)</td>
<td>Curriculum, Outcomes Assessment</td>
<td>To clarify curriculum, verify processes for ongoing curricular review</td>
</tr>
<tr>
<td>DVM Students</td>
<td>Students, Curriculum, Admissions, Organization, Physical Facilities and Equipment, Clinical Resources</td>
<td>To gather from the students their impressions/concerns regarding all aspects of their experience in veterinary school</td>
</tr>
<tr>
<td>Research Committee</td>
<td>Research</td>
<td>To document the adequacy of the research program and how DVM student learning is impacted by the research program</td>
</tr>
<tr>
<td>Post-graduate students, Interns and Residents</td>
<td>Research, Students, Curriculum, Clinical Resources, Physical Facilities and Equipment</td>
<td>To determine how post-graduate students and house officers interact with DVM students</td>
</tr>
<tr>
<td>Faculty</td>
<td>Faculty, Physical Facilities and Equipment, Clinical Resources</td>
<td>To clarify faculty employment as described in the Standard, and to gather impressions/concerns regarding the educational program</td>
</tr>
<tr>
<td>Confidential meetings with DVM students</td>
<td>All Standards</td>
<td></td>
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<tr>
<td>Confidential meetings with faculty</td>
<td>All Standards</td>
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</tr>
<tr>
<td>Alumni</td>
<td>All Standards</td>
<td>To verify that career goals could be reached with the education provided by the college</td>
</tr>
</tbody>
</table>
### Meetings with students

Meetings with students are scheduled for each site visit. The scheduled meeting with professional students should involve two or three representatives of each class, selected by their peers. The meeting with post-graduate students should include those students who interact with the DVM program either through teaching (usually laboratories) or through formal research opportunities for DVM students. The meeting with house officers should include both interns and residents, with representation from all clinical departments.

The meeting with faculty representatives should involve >1 (two or three) faculty members from each department or administrative unit. These should be individuals, other than department heads (administration), chosen as spokespersons by the faculty of that department AND SHOULD BE REPRESENTATIVE OF THE DEPARTMENT. The representatives meet as a group with the visiting team.

Alumni should reflect the career paths taken by the students; if a preponderance of students enter mixed animal practice upon graduation, for example, the alumni group should consist of a preponderance of mixed animal practitioners. The president of the alumni association and some alumni acting as adjunct faculty should be included if possible.

THE DEAN SHOULD NOT EXPECT TO BE PRESENT AT MEETINGS UNLESS INDICATED ON THE AGENDA OR INVITED BY THE SITE TEAM CHAIR.

<table>
<thead>
<tr>
<th>Role</th>
<th>Department</th>
<th>Purpose</th>
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<tbody>
<tr>
<td>Department Heads</td>
<td>Faculty, Organization</td>
<td>To determine coordination between faculty and administration and impact on the DVM students, faculty development process, adequacy of resources</td>
</tr>
<tr>
<td>Section leaders in VTH, “center” leaders</td>
<td>Faculty, Organization</td>
<td>To determine coordination between faculty and administration and impact on the DVM students, faculty development process, coverage of the veterinary curriculum</td>
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<tr>
<td>Exit interview with dean</td>
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<tr>
<td>Exit interview with university administration</td>
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</tr>
<tr>
<td>Section Chiefs</td>
<td>Curriculum, Students, Faculty, Clinical Resources</td>
<td>To gather information from mid-level administrators about functionality of the DVM program as a whole</td>
</tr>
<tr>
<td>Outcomes Officer(s)</td>
<td>Outcomes Assessment</td>
<td>How is information from outcomes transferred to the appropriate stakeholders – completing the loop</td>
</tr>
<tr>
<td>Technical staff in teaching hospital</td>
<td>Physical Facilities and Equipment, Faculty</td>
<td>To verify working conditions in the hospital, staff and faculty support of the DVM program, role of paraprofessionals in training and assessment of students</td>
</tr>
<tr>
<td>Library</td>
<td>Information Resources</td>
<td>To question the librarian and library staff about factors beyond those captured during the tour, to see demonstrations of specific technologies</td>
</tr>
</tbody>
</table>
The agenda for the visit is established by the chair of the site visit team in consultation with the college administration. The example schedule is designed to address each Standard by meeting with groups that can provide the needed evidence of compliance. It is not necessary to visit all faculty members. The dean should use the following example as a guide to develop a proposed site visit schedule with the site team chair. The chair should work with the dean and offer suggestions (additions/deletions) to better serve the site team.

<table>
<thead>
<tr>
<th>SUGGESTED SITE VISIT SCHEDULE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Day One</strong></td>
</tr>
<tr>
<td>3:00 – 5:00 pm</td>
</tr>
<tr>
<td>5:30 – 7:00 pm</td>
</tr>
<tr>
<td>7:00 pm</td>
</tr>
<tr>
<td><strong>Day Two</strong></td>
</tr>
<tr>
<td>8:00 – 9:00 am</td>
</tr>
<tr>
<td>9:00 am – 5:00 pm</td>
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<tr>
<td></td>
</tr>
<tr>
<td>6:00 pm</td>
</tr>
<tr>
<td><strong>Day Three</strong></td>
</tr>
<tr>
<td>7:30 – 8:30 am</td>
</tr>
<tr>
<td>8:45 – 9:45 am</td>
</tr>
<tr>
<td>9:45 – 10:00 am</td>
</tr>
<tr>
<td>10:00 am – noon</td>
</tr>
</tbody>
</table>
SUGGESTED SITE VISIT SCHEDULE

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Noon – 1:30 pm</td>
<td>Lunch with DVM students</td>
</tr>
<tr>
<td>1:30 – 2:15 pm</td>
<td>Research committee, associate dean for research, university veterinarian</td>
</tr>
<tr>
<td>2:15 – 2:30 pm</td>
<td>Break</td>
</tr>
<tr>
<td>2:30 – 3:30 pm</td>
<td>Department heads</td>
</tr>
<tr>
<td>3:30 – 5:00 pm</td>
<td>Site team revisits as needed</td>
</tr>
<tr>
<td>6:00 pm</td>
<td>Dinner and site team executive session at hotel</td>
</tr>
</tbody>
</table>

**Day Four**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 – 9:00 am</td>
<td>Breakfast meeting and executive session with the dean</td>
</tr>
<tr>
<td>9:00 – 10:00 am</td>
<td>Faculty</td>
</tr>
<tr>
<td>10:00 – 11:00 am</td>
<td>Educational management</td>
</tr>
<tr>
<td>11:00 – 11:15 am</td>
<td>Break</td>
</tr>
<tr>
<td>11:15 – 11:55 am</td>
<td>Outcomes officer(s)</td>
</tr>
<tr>
<td>Noon – 1:00 pm</td>
<td>Lunch with alumni</td>
</tr>
<tr>
<td>1:00 – 1:30 pm</td>
<td>Graduate students, interns and residents</td>
</tr>
<tr>
<td>1:30 – 2:15 pm</td>
<td>Break or optional meeting with technical staff in hospital(s)</td>
</tr>
<tr>
<td>2:15 – 2:45 pm</td>
<td>Confidential meetings with individual students</td>
</tr>
<tr>
<td>2:45 – 3:00 pm</td>
<td>Break</td>
</tr>
<tr>
<td>3:00 – 3:30 pm</td>
<td>Confidential meetings with individual faculty</td>
</tr>
<tr>
<td>3:30 – 5:00 pm</td>
<td>Site team revisits, optional meetings (library staff, IT staff, etc.)</td>
</tr>
<tr>
<td>6:00 pm</td>
<td>Dinner and site team executive session at hotel</td>
</tr>
</tbody>
</table>

**Day Five**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 – 8:55 am</td>
<td>Exit interview with dean</td>
</tr>
<tr>
<td>9:30 – 10:55 am</td>
<td>Exit interview with university administration</td>
</tr>
</tbody>
</table>

**Note:** *Outcomes will be assessed throughout the visit.*

At the conclusion of the site visit the team holds exit interviews with the dean of the college, and with the chief executive officer of the institution to review its findings. The exit interview with the dean and college administrators of the dean’s choosing, completes the site visitation of the college and precedes the exit interview with university administration. The exit interview with university administration normally involves the president of the institution and such other administrative officers as the president may choose. In the absence of the president, the team meets with his duly authorized representative. The dean is usually not present at the interview with the chief executive officer, but this option is available at the discretion of the SITE TEAM CHAIR.

14. REPORTS OF EVALUATION

The chair of the team will prepare a final draft of the report and forward it to staff within 30 days of the conclusion of the visit. Copies of the final draft are sent by AVMA staff to the dean of the college for correction of factual errors. The final draft, together with any comments by the dean or the university president, is presented to the Council by the primary COE reviewer at the next semi-annual Council meeting.
Directives are a part of the report of evaluation. If major or minor deficiencies with a Standard(s) are noted, the Council proposes a remedy for each deficiency listed in the Directives section under the affected Standard(s) and sets a time line for the college to come into compliance. Notation is made in the Recommendation section of the Standard when specific deficiencies are not identified, but the Council wishes to provide suggestions for improvement of the educational program.

Within 90 days of mailing the final Report of Evaluation, the COE will request that the dean of the college provide written comments on outcome(s) of the accreditation process. Specifically, he/she will provide comments regarding the impact of the recommendations on 1) the education and educational process of the DVM students, 2) student outcomes, 3) program finances, 4) the university, 5) the state legislative process (where appropriate), and 6) other (to be defined by the dean). This report will be used by the Council to determine if the recommendations are clearly understood; and to determine the impact of the recommendations on the college/university/state.
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15. OVERVIEW OF THE COUNCIL ON EDUCATION

The AVMA Council on Education is recognized by CHEA as the accrediting body for schools and programs that offer the professional DVM degree, or its equivalent in the US and Canada. The Council may also accredit foreign veterinary colleges.

The Council on Education, American Veterinary Medical Association is also recognized by the US Secretary of Education as authorized by US law. The scope of this recognition may differ from the CHEA Recognition Statement. Please consult the USDE website at: www.ed.gov/admins/finaid/accred/index.html for additional information.

The COE meets the needs of society by promoting active programs in veterinary medical education. In fulfilling this function, the Council encourages and assists colleges of veterinary medicine in meeting the requirements for full accreditation. Further, the COE provides consultation to proposed and developing colleges of veterinary medicine.

The Council on Education prohibits discrimination on the basis of sex, creed, race, or national origin. The AVMA prohibits discrimination in the election of members and public representatives to the COE. The COE is composed of voluntary members selected by the AVMA COE Selection Committee (8), the AAVMC COE Selection Committee (8), and the Canadian Veterinary Medical Association (1) specifically representing the diversity of disciplines in the profession. The membership consists of at least five veterinary medical college faculty members; at least six private practitioners; one at-large member; one veterinary researcher; one public health veterinarian; and one non-private practice, non-academic veterinarian. Additionally, the COE appoints three public members. One Canadian veterinarian is appointed and funded by the Canadian Veterinary Medical Association. One voting member is appointed as an official representative of the AAVMC. The official AAVMC representative and other COE members selected by the AAVMC COE Selection Committee are funded by the AAVMC. Many of the Council members, including public representatives, have advanced degrees. All members are appointed for a term of six years except the official AAVMC and CVMA representatives who serve three-year terms, renewable once. The terms of new members begin at the close of the AVMA Annual Convention.

15.1. Public Member Selection
The criteria used in the selection of public members specify that they shall not be:
● An employee, member of the governing board, owner, or shareholder of, or consultant to, an institution or program that either is accredited or preaccredited by the COE or has applied for accreditation or preaccreditation;
● A member of any trade association or membership organization related to, affiliated with, or associated with the COE; or
● A spouse, parent, child, or sibling of any of the individuals listed above.

Public members are appointed by the Council when a vacancy exists, for a six-year term that begins at the close of the AVMA Annual Convention.

15.2. Meetings
The full Council meets biannually at AVMA headquarters to conduct business. Prior to the COE meeting, various subcommittees may meet to conduct business and prepare recommendations and reports for the Council.

Issues brought to subcommittees are discussed and, in most cases, appear as agenda items for consideration by the full COE. Items not on the agenda are considered under the item “New Business.” Where appropriate, business is conducted according to the conventions of Robert’s Rules of Order, Newly Revised, through presentation of a motion followed by a vote. During interim periods, the COE Executive Committee may conduct Council business via conference call or electronic means.
15.3. Officers
The officers of the Council on Education are as follows:
Chair of the Council
Vice Chair of the Council
Chair of the Committee on Evaluation
Chair of the Committee on Academic Affairs

The Chair of the Council on Education is the Chief Administrator of the Council and presiding officer responsible for the conduct of all official meetings. As presiding officer, the Chair:

a. Must be familiar with the bylaws and standing rules of the Council as well as the job descriptions for officers and committees.
b. Ensures that action taken by the Council is based on a majority vote.
c. Conducts meetings according to the most recent version of Robert’s Rules of Order, Newly Revised.
d. In consultation with AVMA staff, establishes the agenda for the Council, and with the Executive Committee and staff, plans the order and conduct of the meetings.
e. With AVMA staff assistance, originates or edits all official Council correspondence and communication reflecting policies and procedures of the Council to the colleges of veterinary medicine and other individuals and organizations interacting with the COE. Such correspondence communicating official Council action or policy will be on AVMA letterhead, over the signature of the Chair.

The Vice Chair of the Council on Education shall be a member of the Executive Committee and shall assume all duties and responsibilities of the Chair in the latter’s absence.

The Executive Committee is composed of the COE Chair, Vice Chair, the Chair of the Committee on Evaluation, and the Chair of the Committee on Academic Affairs. The Committee is responsible for providing counsel and assistance to the Chair in making executive decisions and acting for the Council between meetings; however, the Executive Committee does not make accreditation decisions.

Various ad hoc committees are appointed and disbursed by the Chair of the COE as needed. All committee action is conducted according to established Council policy and procedure. Each committee reports on its activities at regular meetings of the Council. Terms of service begin and end at the close of the AVMA Annual Convention.

15.4. Member Responsibilities
Members of the Council on Education are expected to:

- Fairly and accurately evaluate veterinary medical educational programs based on the Standards of Accreditation and make accreditation decisions;
- Uphold the fiduciary responsibility of a member of the COE, through the duty of care, duty of loyalty, and duty of obedience and adhere to the COE Confidentiality policy (Section 5.3), the AVMA COE Conflict of Interest policy (Section 5.4), and the AVMA Code of Conduct (Appendix J) at all times;
- Establish and/or amend the Requirements of an Accredited College of Veterinary Medicine (Standards of Accreditation) and the Policies and Procedures of the AVMA Council on Education as needed;

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1 Duty of care requires that a COE member be informed and discharge his/her duties in good faith and act in a reasonable and informed manner when participating in COE’s decisions and oversight of the management of COE.
2 Duty of loyalty requires that an individual acting in the name of the COE will act with the COE’s best interests in mind. An individual must have undivided allegiance when making decisions affecting the COE.
3 Duty of obedience requires that an individual acting in the name of COE will adhere to the standards, policies and procedures, and procedures of that organization. A member must be faithful to the COE’s mission.
• Uphold the *Policies and Procedures of the AVMA Council on Education* and any other policies, standards, procedures, and guidelines as adopted;
• Devote the time and energy necessary to COE activities;
• Agree not to represent oneself as a spokesperson of the COE without the express written authorization of the Chair of the COE.

15.5. **Travel Expenses**
The Council is authorized to appoint one member to accompany the staff consultant to one conference on accreditation each year, at a cost not to exceed $500 each year.

15.6. **Reports Made to the Council**
From time to time, the Council is provided with liaison, progress, information, and other reports from colleges or other groups. Such reports may be: 1) received, 2) accepted, or 3) rejected.

• Received – The Council studies the report but does not agree or disagree with the content. The Council may or may not choose to respond to the submitter of the report and may choose to forward the report to another entity.

• Accepted – The Council studies the report, approves the report as to form and accepts the report as written. The Council notifies the submitter of the report stating its action.

• Rejected – the Council studies the report, disagrees with the report, in part or in full, and rejects the report. The Council notifies the submitter of the report stating its findings and its action.

15.7. **Committees and Liaison** (revised July 8, 2015)

15.7.1. **Standing Committees**
The COE has four standing committees: Evaluation Committee, Academic Affairs Committee, Nominating Committee, and Executive Committee. The following procedure is used in forming committees.

The Chair of the COE, in consultation with the Executive Committee, appoints all committees and liaisons. To ensure balance, the Chair considers the professional activity of each COE member in making appointments. The public members serve on committees as assigned. Chairs and members serve one-year terms with opportunity for reappointment.

The Chair of the Evaluation Committee is elected by COE membership. The Committee is responsible for recommending site visitors for assignment to site visit teams and monitoring site visit protocol.

The Chair of the Committee on Academic Affairs is elected by COE membership. The Committee is responsible for ongoing review of and recommendations for improvement to the standard requirements and Council policy and procedure.

The Nominating Committee consists of three members appointed from COE membership by the COE Chair. The Chair of the Nominating Committee will also be appointed by the COE Chair. The Committee is responsible for presenting a slate of nominees at each spring Council meeting for the offices of Chair, Vice Chair, Academic Affairs Committee Chair, and Evaluation Committee Chair, and forwards these to the COE members two weeks prior to the spring meeting.

At an appropriate time during the first day of the spring meeting, the Chair will call for nominations from the floor. The Nominating Committee will receive all nominations, ask those nominated if they are willing to serve, and provide a revised list of nominees to the COE members. Voting will be by written ballot.
15.7.2. Associated Committees, Commissions, and Boards

Committee on Veterinary Technician Education and Activities – One member appointed by the Chair of the Council to serve as a voting member for a one-year term.

Educational Commission for Foreign Veterinary Graduates (ECFVG) – One member of the Council will serve as a voting member for a six-year term, or until the end of the member’s term on the Council. The Council submits a nomination for this position to the AVMA Board of Directors for Board approval.

National Board of Veterinary Medical Examiners – One member is appointed by the Chair of the Council annually.

Committee on International Veterinary Affairs – One member of the Council will serve as a voting member for a six-year term, or until the end of the member’s term on the Council. The Council submits a nomination for this position to the AVMA Board of Directors for Board approval.

Liaison representatives report on the activities of the groups to which they are assigned at each regular Council meeting. Terms of appointment begin and end at the close of the AVMA Annual Convention.

15.8. Conduct of COE Meetings

No member of the COE who has an identified conflict of interest shall participate in any way in accrediting decisions. The individual shall leave the room when the report in question is being discussed. In cases where the existence of a conflict of interest is less obvious, it is the responsibility of any Council member who feels a potential conflict of interest exists, to absent himself/herself from the room. The conflict of interest policy shall be limited to decisions regarding accreditation and shall not infer conflict with other decision-making responsibilities.

15.9. Resignation of a Member of the COE

A member of the COE may resign from his/her position on the COE by submitting a letter of resignation to the Chair of the COE. Upon the Chair’s receipt of such letter of resignation, the position will be vacant on the effective date of resignation contained in the letter of resignation. A replacement member will be selected to complete the remainder of the resigned member’s term by the agency that was responsible for the original appointment of the member who has resigned.

15.10. Removal of a Member of the COE

A member of the Council on Education may be removed by a two-thirds vote of the COE conducted by confidential written ballot when, in the judgement of the COE, the best interests of the COE would be served. This may include, but it not limited to, the failure of the member to perform his or her responsibilities appropriately and/or the violation of rules of confidentiality. In removing a COE member, the following procedures shall apply:

1) With concurrence of the COE Executive Committee, the Chair of the COE shall provide the member in question with written notice of the proposed removal, which shall include an explanation of the reason(s) for the proposed removal. The member shall be given an opportunity to provide a written response to the notice and to appear before the COE Executive Committee.

2) If the COE Executive Committee deems removal of the member to be in the best interests of the COE, the Chair of the COE shall submit to the COE the written notice of the proposed removal, the member’s written response, and a recommendation of the COE Executive Committee. The recommendation will also be submitted to the member in question.

3) The COE shall act upon the recommendation of the COE Executive Committee at its next meeting. The member in question shall be given an opportunity to appear before the COE at that meeting. The action of the COE is final and not appealable. At the option of the COE Executive Committee, during
the process from notice of the proposed removal through action of the COE, the member in question may not attend COE meetings.

4) The action of the COE shall be communicated by the Chair of the COE to the member, and the fact of the member’s seat being vacant shall be communicated as appropriate to enable the seat to be filled. A replacement member will be selected to complete the remainder of the removed member’s term by the agency that was responsible for the original appointment of the removed member. Apart from the fact of the member’s seat being vacant, the details and rationale of the removal action shall be considered confidential.

16. STANDARD OPERATING PROCEDURES

16.1. Consistency of Application
The COE is committed to consistency in application of the 11 Standards used as a basis for veterinary college accreditation. Because of turnover in COE membership and the potential for variation in individual interpretations of the standards, the Council provides several means to ensure a clear understanding of member responsibility and interpretation of documentation in making accreditation decisions.

16.2. Database Retrieval
Staff of the Division of Education and Research, along with the Chair of the COE, maintain a database on interpretation of site visit results and outcomes. The database uses information from the past ten years of accreditation history and will be evolutionary as new sites are visited and data entered. Use of the database ensures that similar situations and concerns are subject to analogous interpretation. Factual information from the database is used in evaluating similar situations (standard findings) at differing locations (colleges). Further, this activity ensures consistency of application of policy in making accreditation decisions.

16.3. Training
Orientation and annual training for COE members and initial and annual training for site team members is conducted using in-person training sessions, videotapes, a training manual, and online presentations. The training ensures a common understanding of standard interpretation and site visit conduct. AVMA staff accompanies all site teams to provide reference and consistency.

16.4. Records
The Council maintains complete records of each veterinary medical college or school indefinitely. The records are confidential and include reports of evaluation, annual interim reports, self-study and reaccreditation reports, and all related correspondence. These files are available for inspection by representatives of the Department of Education.

16.5. Sharing Information
The Council shares information related to the accreditation or preaccreditation status of a veterinary medical program, and/or any adverse action taken, with appropriate accrediting agencies and state agencies.

17. QUALITY ASSURANCE

17.1. Development of Accreditation Standards
The COE is charged with developing, adopting, and implementing standard requirements for the accreditation of veterinary colleges and schools, leading to the degree of DVM, or equivalent. The COE reports the development of new standards or changes to existing standards to the AVMA Board of Directors; and that action is reported to the AVMA House of Delegates.

In developing standards, all committees of interest within the COE are substantially involved in the process. Outside input comes through the House of Delegates, the Board of Directors, councils and committees of the
AVMA, practitioners, and other interested parties. Suggested changes in the standards are placed on the AVMA website (in the public section) requesting comments from the profession and the public. Notification of the open comment period to the profession and the public will be via AVMA communication modalities, e.g. blogposts, electronic newsletters, and by posting on the AVMA website (in the public section). All college deans, regional accreditors, and selected specialized accreditors are provided the opportunity to comment on the proposed standard changes by direct notification. Comments are received by the staff to the Council for a period of two weeks; comments received are considered by the COE in making changes to the standards. Changes reported to the AVMA Board of Directors reflect the input from all groups of interest. The process culminates in the adoption of standard requirements which are published in the Accreditation Policies and Procedures of the AVMA Council on Education manual. The manual is updated semi-annually, as needed.

17.2. Review of Established Standards
The Council’s ongoing review of the standards results in their evolution, based upon changes in the educational and professional community. Requests for modifying the standards are received from a variety of sources, and action on these suggestions is the result of broad input by the profession, reporting to the AVMA Board of Directors, and review by the AVMA House of Delegates. Two forms of revision are used: the revision of an existing standard to meet evolving educational and professional needs; and developing a new standard in response to changes in contemporary education, or professional needs or processes. As a result of these processes, standards may be revised, added, or deleted.

17.3. Adding or Revising a Standard
- A proposal for revising a standard is developed.
- The COE Committee on Academic Affairs considers the revision in relation to changing educational processes, demographics, impact on the profession, impact on the students and faculty, impact on the colleges, and expected outcome for students. Recommended revisions are approved by the Council.
- Approved revisions are circulated to deans of veterinary colleges and others (as described in 17.1 above) for input.
- Adopted changes are reported to the AVMA Board of Directors and the House of Delegates and conveyed to the colleges and the profession.

Initiation of action for revision of a standard(s) will occur within 12 months of the determination by Council that a revision is needed. Each year, four Standards of Accreditation are comprehensively reviewed by the COE Committee on Academic Affairs. As a result of this review, standards may be revised or refined for clarification, undergo no change, be dropped, or be subjected to comprehensive revision resulting in a more effective means of assessing the veterinary medical programs. Using the above-noted system, review of the 11 standard requirements occurs approximately every four years to coincide with the Survey of Stakeholder Groups in the validity and reliability assessment.

When modification occurs, the revision is reported to the AVMA Board of Directors and reviewed by the AVMA House of Delegates. Deans of colleges of veterinary medicine are notified of the change and given instruction on implementation. Finally, the veterinary medical community is notified of the change through publication in the JAVMA and on the AVMA website (in the public section), and through AVMA communication modalities (e.g. blogs, electronic newsletters).

17.4. Assessment of Revised Standards
The COE believes a minimum time span should elapse between the adoption of new or revised standards and their implementation. While the COE believes some time is necessary to allow colleges to understand and adjust to the new or revised standard(s), rapid implementation is necessary so that colleges can gain experience each year of the curriculum. Assessment of new or revised standards will be initiated at the end of one year.
17.5. Application of Standards
The evaluation process for the application of standards consists of seven components: (1) a survey of relevant groups to assess the adequacy of all components of each standard; (2) an evaluation of the NAVLE scores to verify adequacy and relevance through student outcome; (3) a survey of the college site visit participants to ensure the consistency in application of the standards; (4) the annual review by the COE Academic Affairs Committee evaluating four standards, and when necessary, changing or eliminating standards (process described in Section 17.3); (5) encouraging COE members to read current literature in veterinary practice; (6) database retrieval for application of the standards; and (7) the provision of training all COE members annually and for site team members to ensure consistent understanding and application of the standards.

To ensure confidentiality in survey results and the NAVLE scores in relation to colleges, the AVMA Statistical Research Group (SRG) within the AVMA Marketing and Communications Division distributes, collects, and analyzes materials from all participants or organizations.

When changes in standards are proposed by the Council, comment is welcomed from the profession and the public. Input from deans of colleges is collected by direct mailings and input from the profession and public is collected through the AVMA website. Proposed changes are listed on the AVMA website in the public sector and a time limit for comment is indicated. The Council considers all comments before finalizing proposed changes in the standards. Changes reported to the AVMA Board of Directors reflect the input from all groups of interest.

17.6. Ongoing Review of Standards
In order to ensure that the Standards of Accreditation meet the needs of students in colleges offering educational programs in veterinary medical education and the resultant practitioners in the profession, the adequacy and relevancy of the standards must be assessed on an ongoing basis. For the purpose of definition, adequacy is a measure of quality in outcome (preparation for practice) while relevancy measures the consistent application and interpretation of the standards. In order for standards to be adequate, they must be relevant.

17.7. Annual Review of Standards
Annually, four standards are reviewed in depth by the Academic Affairs Committee. The review consists of carefully reading the standard for content, clarity, and contemporary need. Since all members of the committee serve as COE members and site team observers, the evaluation of the standard includes that experience. Further, the committee considers comments from any source, paying particular attention to third party and student comments (if any); the survey of education consumers (see below); outcomes of the site visit surveys; and any other available resources. The full Council considers recommendations from the Academic Affairs Committee and initiates the process to make changes where deemed necessary.

17.8. Survey Process
The Council uses a short survey to evaluate the adequacy of the standards as a whole in conjunction with a larger survey based on the system of Parks and Hendrick, international experts in the evaluation accreditation standards. The larger survey instrument was developed by reducing each standard to its simplest components. Assessed in this format are the ease and consistency of interpretation of the components of each standard; and a measure of the level of contribution of each component to the preparation of graduates.

A survey is conducted every four years. The survey sample includes 5200 veterinary practitioners, the executive director of each state veterinary medical association, 2400 faculty members in US veterinary colleges, 1700 currently enrolled, fourth-year veterinary students in US veterinary colleges, and deans from the 30 US veterinary colleges. Sample sizes for veterinary practitioners, veterinary faculty and senior students were selected to provide a minimum confidence level of 95% +/-5. At the same time the statistical survey is being completed, a survey instrument assessing the ease and consistency of
interpretation of each of the standards and a measure of the level of contribution of each standard to the preparation of graduates will be posted on the AVMA website (in the public section). This survey will be open to the profession and the public for the same time frame as the statistical survey is open.

Data collected are analyzed and summarized by the AVMA survey research group; the analysis is presented to the COE. The Committee on Academic Affairs evaluates the survey analysis for impact on the standards and presents appropriate recommendations to the COE, based on its evaluation. The Council may request further analysis if the responses related to 1) ease of interpretation, or 2) the level of importance as a contributor to the education of veterinary professionals for any standard component is below 80%. Proposed revision to the standards is initiated when the review of the analysis is complete.

17.9. Review of NAVLE Scores
The NAVLE assesses entry-level competency for licensure to practice veterinary medicine. The SRG evaluates NAVLE results annually, by noting significant changes in scores and passing rates over time and significant differences in scores or passing rates among graduates from different veterinary colleges. Decreasing scores may indicate a reduction in the adequacy of the standards, while significant differences among graduates from different colleges may suggest the standards are not relevant.

During the fall meeting the Academic Affairs Committee reviews the SRG analysis. Recommendations from this committee are used to assess the potential for needed changes in or application of the standards. Processes are initiated by the COE to make necessary changes.

17.10. Survey of Site Visit Participants
Following a site visit, the dean is asked to provide each faculty member, student, and administrator information to access an on-line evaluation form. Site team members also complete the post-site visit evaluation form. The SRG conducts an analysis of the survey according to frequency and distribution of response, and prepares a report to the COE. The COE Committee on Evaluation studies the report and makes recommendations to the Council regarding changes to be made in the site visit process. During its fall meeting, the COE reviews the recommendation and initiates necessary changes to improve the site visit to ensure that the standards are applied in a reliable manner.

17.11. Data Collection
A database system is used to log the conditions of accreditation evaluation and decision outcomes. The data are employed at each site and COE meeting to ensure equitable and consistent application of the standards. Inconsistencies are noted by AVMA staff and the committee chair who provide guidance in accreditation discussions.

Additionally, all COE members have access to current practice literature through their AVMA membership, or in the case of public members a complimentary subscription to the JAVMA. The Journal provides full text, and article and interpretative summaries of the most recent scientific findings in veterinary clinical practice. The COE members are encouraged to read the information as a benchmark of current clinical practice and education and to apply the knowledge to program evaluation. Further, a strong awareness of current clinical practice is important in the critical review of the standards for adequacy and relevancy.

In summary, adequacy of the standards is ensured by the results of the questionnaire which survey appropriate groups, analysis of the NAVLE examination, and the COE process used to routinely review each standard. The relevancy of the standards is ensured by the makeup of the team (see Section 18), training of COE and site team members, ongoing review of the standards as applied, database utilization, literature review, and by the survey of the college site visit participants.
18. SITE VISITS

18.1. Site Visit Team
Site visit teams are selected to represent educators, practitioners, and others (including public members) in the proportion necessary to evaluate a college and its programs.

- **US** – Accreditation site teams are composed of at least five trained site visitors, at least four of whom shall be trained site visitors selected by the COE (one of whom will serve as chair) and one trained site visitor selected by the CVMA. In addition, the team will be accompanied by one or two current COE member(s) (non-voting observers), and one AVMA staff member (non-voting).

- **Canada** – Accreditation site teams are composed of at least five trained site visitors, at least two of whom shall be trained site visitors (one of whom will serve as chair) selected by the COE and three trained site visitors selected by the CVMA. In addition, the team will be accompanied by one or two current COE member(s) (non-voting observers), and one AVMA staff member (non-voting).

- **Foreign** – Accreditation site teams are composed of six trained site visitors; three trained site visitors (one of whom shall serve as chair) selected by the COE, one trained site visitor selected by the CVMA, and two members from the country wherein the college is located, with the exception of joint site visits where the make-up of the team shall be decided by the accrediting bodies. In addition, the team will be accompanied by one or two current COE member(s) (non-voting observers), and one AVMA staff member (non-voting).

- **Advisory/Consultative site team** – These site teams are composed of at least three trained site visitors and one AVMA staff member (non-voting). In addition, the team will be accompanied by one or two current COE member(s) (non-voting observers).

COE site visitors will be veterinarians or former COE public members who have undergone training to conduct site visits. Such training shall include review of an on-line training module and a two and one half-day initial training session and annual refresher training online. Training must be updated annually to continue to serve as a site visitor. Current COE members may not serve as voting COE site visitors.

Site visitors will serve six-year, staggered terms. A call for applications and nominations will be distributed broadly. The COE will review the credentials of the applicants and nominees and select site visitors. A pool of no less than 30 will be maintained.

Observers may not vote at the site visit. Current COE members serving as observers may not vote on the accreditation status of the institution visited.

Site visitors are identified and assigned to each team by the chair of the Evaluation Committee. These individuals participate as volunteers and are not eligible for honorariums, but may be reimbursed, when necessary, for transportation, food, lodging, and incidental expenses. Public members may be included on site visits, but because of their limited number, are not included in every visit. However, public members shall fulfill all the duties of a team member and have the right to vote.

An effort will be made to balance the areas of expertise on the site visit team. Each site visit team includes a representative of the CVMA appointed and supported by that organization. No member is assigned to a site visit team until they have completed training and orientation.

An AVMA staff member will accompany each site team and assist in coordinating activities. Staff will consider how each of the standard requirements is being met by the college and note any points not covered in the self-evaluation report. If major deficiencies are found in the material presented, staff is requested to ask the college for supplemental material.

18.2. Conflict of Interest / Confidentiality Statements
Each site team member is required to sign a Conflict of Interest/Confidentiality Statement (see Section 21.1, Appendix A).

18.3. Objective of Site Visit
The objective of a site visit is to verify and supplement information presented in the self-study report. Site visits are made only with the concurrence of the administration of the college and its parent institution. When it appears in the best interest of the college, the university concerned, the AVMA, or another accrediting agency, every effort is made to coordinate and cooperate with other accrediting agencies in request for information and conduct of visits.

18.4. Site Visit Overview
The agenda for the visit is established by the chair of the site visit team in consultation with the college administration.

Site visit teams are fact-finding bodies, usually composed of seven members, including AVMA staff. Using the college self-study as the basis for evaluation, a four-day site visit is conducted. Input is sought from all program factions of the college including faculty, students, staff, and alumni. Facilities, programs, and other pertinent areas are also studied. A factual report of the current status of the college is produced using a standardized site visit rubric (see Section 21.9, Appendix I) to ensure thorough and consistent application of the standards by each site team. The report is reviewed by all team members for factual correctness.

During the site visit the team audits the college educational program by consulting with the dean and appropriate staff, department heads, representative faculty members, the librarian, representative students at both professional and graduate levels including interns and residents, and appropriate faculty committees. In addition, the team tours the buildings, facilities, equipment, and views case records. The site visit team holds a series of executive sessions to compare notes on its findings, begin formulation of its report, and instruct the chair as to the points to be addressed and directives and recommendations made in the draft report of evaluation. Each member drafts directives concerning deficiencies in meeting the standard requirements for which he/she has been assigned responsibility. All directives are based on discussion noted in the commentary provided by the site team under each standard. Directives are stated as specifically as possible to identify the deficiency involved and suggest possible solutions, without dictating the specific method for achieving the necessary outcome. The entire team discusses and approves all directives, which become part of the report. The site team may also add recommendations when a standard is in compliance, but an opportunity to make a suggestion for improvement has been identified. If there is disagreement within a team concerning a directive or recommendation, the item remains in the report; the disagreement is called to the attention of the Council when the report is presented.

The final report of evaluation will inform the college of the Council’s assessment of student achievement.

18.5. Code of Conduct for Site Team Members
Site team members are required to conduct themselves professionally, courteously, and with the utmost respect for faculty, students, and other representatives of the college educational program visited as well as fellow site visit team members.

Site team members must:
- Remember that the objectives of accreditation include verifying that an institution or program meets established standards, assisting prospective students in identifying acceptable institutions, creating goals for self-improvement of weaker programs and stimulating a general raising of standards among educational institutions, and involving the faculty and appropriate staff comprehensively in institutional evaluation and planning;
- Keep a positive attitude and not offer negative feedback or other criticism during the site visit;
- Remember that all materials, discussions, deliberations, and reports of the site visit are confidential;
• Refrain from discussing the “state of a college” with anyone other than site team members and appropriate AVMA staff;
• Remain open-minded throughout the evaluation process;
• Carefully study the materials contained in the college self-study to acquire a basic understanding of the college and its operation;
• Be prepared for four and a half days of intensive work with long evenings;
• Participate in the discussions, both with college administration and personnel, and in the team deliberations;
• Focus on and uphold the Standards of Accreditation;
• Be alert at all times using all senses;
• Be on time for all functions;
• Be involved in all functions of the site visit;
• Dress in corporate/professional attire for all site visit activities (men are asked to wear suits or coats and ties, and women are asked to wear suits or dresses); and
• Wear AVMA-COE identification badges at all times.

Site team members must not:
• Bring any preconceived ideas about the college to the site visit;
• Have a personal agenda regarding the college, its programs, or people;
• Become separated from the team for any reason unless so assigned by the site team chair;
• Become involved in a confrontation involving any issue of the visit;
• Compare colleges or programs, since each college and its program will be unique, and the Council is not attempting to diminish diversity among programs or to hinder or impede innovation;
• Offer judgments on solutions to problems during the course of the visit; these activities are to be reserved for the exit interviews with the college dean and university president; and
• Tell “war stories”.

Remember at all times, the site team is a guest of the college and is there to assist the college in meeting its mission and goals.

18.6. Site Team Modus Operandi
It is important that the college recognize that comments made during the site visit about the status of the program with respect to a specific standard are in no way a final determination. During the exit interview, the chair of the site visit team should emphasize that the comments made represent the majority view of the site visit team and will be considered as a directive or recommendation by the full Council on Education. The team votes on a classification of accreditation to be recommended to the Council. The final decision on the status of each standard and the accreditation status rests solely with the full COE.

Each evening during the site visit the team meets and reviews the day’s activities. The draft report of evaluation is updated and revised in light of new information gained during the day. All members of the team attend the evening meetings. On the last evening of the visit, development of the draft report is completed and recommendations agreed upon. Each directive must be based on a deficiency described in commentary under the appropriate section of the affected standard.

At the conclusion of the site visit the team holds exit interviews with the dean of the college, and with the chief executive officer of the institution to review its findings. The exit interview with the dean and college administrators of the dean’s choosing, completes the site visitation of the college and precedes the exit interview with university administration. The exit interview is a critical part of the site visit; therefore, all site team members will attend. The exit interview with university administration normally involves the president of the institution and such other administrative officers as the president may choose. In the absence of the president, the team meets with his duly authorized representative. The dean is usually not present at the interview with the chief executive officer. The chair of the team is responsible for developing remarks for the
exit interview. The team assists in preparing the outline for these remarks, and each member comments on items concerning the sections of the report drafted by the respective member.

There is no place in accreditation for adversarial relationships. The college and the COE site teams should proceed with the premise that both parties are dedicated to the common goal of quality in veterinary education. Only through full and open communication and cooperative efforts to correct deficiencies can educational excellence be attained.

Interactions between the COE site teams and the colleges should have a collegial tone, and be based on mutual trust and a desire to arrive at a full understanding of the current status of the educational program of the college. The dean and other administrative officers should be knowledgeable in the definitions of the various levels of accreditation status and the impact of the failure to meet one or more of the standards.

18.7. Guidelines for Site Team Visitors to Foreign Veterinary Colleges
Site team members and AVMA staff are the guests of the host foreign veterinary college. Cultures and customs may differ from those in the US and Canada.

Regarding travel, the host institution is responsible for all expenses. However, the COE has established limitations to enable each site team member to understand the process and avoid misunderstandings. The following guidelines should be followed.

**Travel**
Air transportation is in business class. Should you choose to use first-class, the additional charges will be the responsibility of the site team member and will not be paid by the host institution. Tickets need to be purchased at least three weeks prior to departure and no later. The host institution is responsible for ground transportation to move the site team during the visit.

**Lodging**
The host institution is responsible for arranging lodging for the site visit. There may be those who want to combine the site visit with personal vacation or business, which is permissible. However, lodging charged to the host institution will be limited to the following:

- For those traveling only for the site visit, two nights of lodging before the site visit are permitted to allow for adjustment to time zone changes. At the end of the site visit (general mid-week at mid-day) air flights may not be available for immediate or convenient departure. In that case, one additional night is permitted. Please use good judgment in choosing the proper options.
- Extenuating circumstances may arise (weather, aircraft maintenance, etc.) which might delay departure on any leg of the flight. The host college is responsible for the cost of lodging during these rare occurrences. Charges resulting from injury or illness of the site team member causing delay in departure are the responsibility of the team member.
- The host institution is not responsible for charges associated with spouses, significant others, or dependents of a site team member.

**Meals and Miscellany**
The host institution is responsible for all meals and other related incidentals for the team during the site visit, with the same time limitations as lodging.

**Telephone Calls**
Telephone calls made by site team members for family or business reasons are not paid by the host institution. Calls, if made, are billed directly to the site team member. Use careful judgment related to any other charges.
Gifts
In many countries where special guests are being hosted, it is customary to provide or be provided with gifts. It is AVMA policy that official gifts will not be presented to the host institution. If a host institution wishes to provide a small gift to each participant, acceptance is allowed. However, gifts offered to individuals (and not to all members of the site team) must be refused. It is the desire of the AVMA that no gifts be presented; however, it is not the intent to disregard customs of a given society. It is permissible for site team members (as individuals or as a group) to provide a gratuity for some special services (chauffeur, hotel employees, etc.), but this voluntary gesture should not be charged to the host institution.

18.8. Reports of Evaluation
The final draft report of the site visit team is the responsibility of the team chair. Drafts of report sections previously assigned to individual members of the team are submitted to the chair prior to leaving the site.

Following a general introduction, each section of the report will coincide with a standard requirement and a list of directives and recommendations, as warranted. The report indicates in what ways the college complies or does not comply with the standard requirements. Strengths (Commendations), as well as weaknesses are noted. Directives are written with enough detail to be helpful to team members on subsequent site visits, as well as to the current college administration, but are not intended to be prescriptive.

The chair of the site visit team will provide AVMA staff with an edited draft copy of the report within ten days following the visit for duplication and distribution to the team members. Each member will review the draft, suggest changes, and make corrections. Such suggested changes and corrections will be sent to the chair of the site visit team within ten days of receipt of the draft by each member of the team. The chair of the team will prepare a final draft of the report and forward it to staff within 30 days of the conclusion of the visit. Copies of the final draft are sent by AVMA staff to the dean of the college for correction of factual errors. The final draft, together with any comments by the dean or the university president, is presented to the Council by a COE reviewer assigned to the college at the next semi-annual Council meeting.

Directives are a part of the report of evaluation. Recommendations may be included, but are only suggestions for program improvement. Deficiencies in the compliance with any Standard results in lowered accreditation status and are clearly noted in the report of evaluation.

Within 90 days of mailing the final Report of Evaluation, the COE will request that the dean of the college provide written comments on outcome(s) of the accreditation process. Specifically, he/she will provide comments regarding the impact of the recommendations on 1) the education and educational process of the DVM students, 2) student outcomes, 3) program finances, 4) the university, 5) the state legislative process (where appropriate), and 6) other (to be defined by the dean). This report will be used by the Council to determine if the recommendations are clearly understood; and to determine the impact of the recommendations on the college/university/state.

19. TRAINING AND SUPPORT

19.1. New Member Training
The Council provides substantive training and mentoring for new Council members, who must be trained prior to participation as an evaluation committee member. This training allows members to assume increased responsibility as their knowledge and understanding of the policies and procedures of the Council is demonstrated. The Council’s Committee on Evaluation chair assigns site visit teams in accordance with the competence and readiness of site visitors appointed to serve.

Newly-elected COE members receive an orientation manual, the current COE policies and procedures manual, an instructional video on interpretation of the standards of accreditation, and a book published by CHEA on the history and future of higher education accreditation in the US. New members attend the annual COE site visitor training and receive two hours of formal training the evening before their first COE meeting. The COE
Chair assigns a senior COE member as a mentor to each incoming COE member; mentors also attend the evening training session. All training focuses on member responsibilities and COE practices.

The Chair and COE mentors review each standard, citing examples of activities conducted to ascertain compliance with the standards at the colleges, and outcomes related to deficiency in meeting the standards. General information regarding such matters as confidentiality, non-confrontational conduct of the visit, time commitment for the visit, and expected level of involvement are also discussed.

During the first COE meeting attended by new members (fall), a minimum of two hours are devoted to continuing education of all COE members. The topic is selected by the incoming Council Chair.

19.2. On-site Training
Site team members are required to arrive at the college one-half day early. The site team chair and COE staff provide refresher training based on initial site team training and the instructional video in the interpretation of standards, which are provided to novice members at least two weeks in advance of the site visit. Further, prior to each site visit, the chair of the site visit team meets with all team members in executive session, to outline the plan for the visit, describe situations arising in the self-study which may require special attention, and reemphasize the specific assignments of each team member. This orientation session must be attended by all site team members.

20. TRAINING AND ORIENTATION MATERIALS

COLLEGE OF VETERINARY MEDICINE ACCREDITATION SITE VISIT TEAM

PURPOSE
The purpose of this section is to assist training site team members who conduct site visits to colleges of veterinary medicine for the purpose of program evaluation and accreditation. Detailed information related to the full activities of the AVMA COE, whose charge is to accredit colleges of veterinary medicine, is found in the Accreditation Policies and Procedures of the AVMA Council on Education manual.

The Council has the important responsibility of ensuring that each college complies with the Standards of Accreditation and that each college demonstrates a commitment to educational integrity and improvement.

Accreditation for a college should be an ongoing process for educational integrity and improvement, not an event or episode that occurs once every seven years.

ACCREDITATION
Through action of the AVMA House of Delegates, the COE is charged to provide means and processes for veterinary college accreditation by:

- Promoting programs in veterinary medical education and encouraging colleges to become fully accredited.
- Studying and recommending educational methods to improve veterinary medical education.
- Recommending Standards of Accreditation.
- Evaluating colleges according to the accepted accreditation standards.
- Publishing annually a list of the colleges and their accreditation status.

Through the USDE, a governmental recognition body, and the CHEA, a non-profit/non-governmental recognition body, the AVMA COE is recognized as an official accrediting agency for colleges of veterinary medicine in the US.

In conducting accreditation visits and assigning an accreditation status, the COE focuses only on the professional degree program in colleges of veterinary medicine. Accreditation of a college by the COE is important to the colleges because: it makes available certain federal student loan funds; gives the college an excellent opportunity
to conduct a comprehensive self-study and to project program growth or change; provides recognition of a quality program; and assures the public that veterinary medical education in the US is of the quality needed to meet the needs of society. The COE, without review by any other entity of the AVMA, judges the adequacy of the resources and organization of the college to meet its stated purposes, and that the educational outcomes are measured indicating that those purposes are being met on an ongoing basis.

ACCREDITATION PROCESS

ALL DISCUSSIONS, OBSERVATIONS, AND DOCUMENTS ASSOCIATED WITH THE SITE VISIT AND ACCREDITATION DECISION ARE CONFIDENTIAL TO THE COE. ACCREDITATION INFORMATION CANNOT BE SHARED WITH ANY OTHER INDIVIDUAL OR GROUP EXCEPT THE UNIVERSITY AND COLLEGE THROUGH THE OFFICIAL REPORT OF EVALUATION.

ACCREDITATION DECISIONS MADE BY THE COE CAN HAVE FAR-REACHING CONSEQUENCES FOR THE COLLEGE. CAREFUL AND THOUGHTFUL SITE VISIT ACTIVITIES AND ACCREDITATION DECISION ACTIVITIES MUST REFLECT THE INTEGRITY OF THE PROCESS.

Accreditation of a college of veterinary medicine is based upon compliance with the 11 Standards of Accreditation. These are: organization, finances, physical facilities and equipment, clinical resources, information resources, students, admission, faculty, curriculum, research programs, and outcomes assessment. The standards are dynamic, reflecting the changing educational needs of the veterinary profession, student populations, levels of scientific knowledge, health needs of animals and humans, and expectations of society.

Accreditation of veterinary colleges is voluntary, based upon a request from a college. The process begins when a college requests a site visit and submits a comprehensive self-study based upon COE guidelines. Appointment of site team members is the responsibility of the Chair of the COE Evaluation Committee in consultation with the COE Chair and staff. Site visits are fact-finding missions wherein observations are made, data are gathered, and subjective judgments are made. This summarized information is presented to the full Council for discussion and assignment of an accreditation status. When an accreditation status is assigned, the college is notified of the outcome and the accreditation status for each college is published.

The site visit is an intensive four-day visit to the college used to verify the factual material presented in the self-study, clarify any questions regarding the college and its programs, ensure appropriate learning environments exist, and promote educational improvement.

GETTING STARTED

The first objective is to be familiar with the information pertaining to site visits presented in the AVMA COE manual by paying particular attention to the content and meaning of the 11 Standards.

Approximately eight weeks before the scheduled site visit, each site team member will receive a self-study and supporting documentation directly from the college. These documents serve as a basis for the site visit. Each site team member must carefully read and study the materials received so that he/she will have a thorough understanding of the mission, structure, programs, curriculum, operation, and student learning outcomes of the college. It is important for each site team member to gain an overall understanding of the college before the site visit begins. It may be helpful to write questions regarding any specific area that is not fully understood.

Approximately two weeks before the scheduled visit, each site team member will receive a site team evaluation rubric, a list of questions from the COE reviewers, the previous report of evaluation and subsequent interim reports from the AVMA Education and Research Division. Each site team member is responsible for developing an in-depth knowledge of the college and is responsible for assisting the team in expanding the group’s collective knowledge base through observations, questions, and interpretations.

THE SITE VISIT

At no time during the site visit will a member of the site team make any evaluative or prescriptive comments regarding the “state of the college” or the findings of the site team. Comments will be made to college and university officials at the appropriate time.
For a typical site visit schedule, please refer to the COE manual (Section 13). On site, each site team member must be satisfied that compliance with all standards is thoroughly investigated and discussed and that results (deficiencies) are recorded. The chairperson of the site visit team will provide special assignments to team members regarding one or more of the standards. Each member should pay special attention to these standards since he/she will be asked to write the team’s comments for the evaluation report. However, each team member is responsible for all standards. The evaluation should take into account that program diversity exists in colleges; the Council encourages diversity and educational innovation. The site team will not compare programs with other veterinary colleges. Each team member must judge only the college being visited in the context of its mission and educational objectives as presented in the self-study.

From the typical schedule, one will see that the site team tours facilities and meets with: administrators (both college and university); faculty (teaching, research, service); professional and graduate students; interns and residents; departmental service (hospital, special program, etc.) representatives; specialized committees (research, curriculum, etc.); library and learning resources personnel; and faculty and students interested in confidential discussion. From these observations and discussions, and comparing these findings with the standards, the college mission, and self-study, the team forms evaluation judgments to be reported to the COE.

During the tour of facilities each site team member should ask questions of college personnel regarding program and function; observe and make notes regarding specific areas, functions, and the adequacy of the facilities to meet the educational needs of the program. Remember that the facilities and equipment must meet the stated purposes of the program. It is not appropriate for individual team members to wander about by themselves or to separate themselves from the team because of interests in other areas or engage in social visits with faculty or staff. All members must be present during the entire tour.

On-Site Inspection of Distributive Models
The following set of guidelines should be used as supplementary information for site team chairs conducting visits to schools in which clinical education is accomplished in distributive sites.

- Sites which are considered “core” educational sites (as defined in Section 8) must be visited by the site team or representatives of the team.
- A minimum of two site team members of the site team (may include AVMA staff) must visit each site.
- At each distributive site, personnel who supervises and evaluates the veterinary students must be present to interact with the site team representatives.
- Each site must be toured in a manner analogous to that used to evaluate on-campus teaching hospitals.
- Evaluation of each site must be documented, in a written manner, on a standardized evaluation survey that may be tailored to the specific educational program but must be based specifically on all pertinent COE standards (see Section 21.6, Appendix F).

At the beginning of each discussion-based meeting, the chair of the team will make introductions and explain the purpose of the visit so that all in attendance will understand the process being undertaken and the desired outcome. All team members are expected to enter into discussions by asking good questions, but are not to become a discussant except for clarification of unclear points. Each site team member is to be a good listener, and record observations, and plan on being present during all discussions as appropriate to the schedule.

Questions asked and discussed during these sessions should be focused by the site team to gain additional information and insight about the programs of the college. Issues not related to the standards, and ultimately the outcome of the accreditation visit should not be discussed. A careful leader (and the team) will continually focus and refine the discussion to enhance understanding of the program. If discussion wanders, the team becomes less effective.
Each evening the site team members and AVMA staff will meet in executive session to further refine understanding of the programs and to revise the evaluation report. Be prepared for late night sessions, keeping in mind that your input is highly valued.

**STANDARD INTERPRETATION**

Based upon individual knowledge, professional interests, and capabilities of each team member, the individuals and the collective site team are expected to make judgments regarding compliance with the standards at each college. The team judges compliance with each of the Standards of Accreditation. Compliance with some of the standards can be verified with data provided by the college. Others will be judged through more subjective means using professional judgment. The Council relies on the experience of the team members to make judgments based on their expertise with the application of reason and reality. The most important items dealt with are the college’s ability to provide the educational program within the context of its mission, current resources, and societal needs; and the sustainability of the educational program.

The site visit is a point-in-time observation (“still photograph”) of a dynamic process representing current conditions in the college. Be careful not to evaluate plans, unfinished renovations or structures, projected equipment purchases, desired program changes, and other non-existing “dreams.” These items can be noted, but should not be used to make your assessments of compliance. This understanding should not eliminate entrepreneurial efforts that might improve the quality of education, research, or service to the profession, but must be evaluated based upon the mission of the college, the resources available, and the projected student learning outcomes.

Special emphasis is placed upon gathering information and data related to student learning outcomes. A college must have an ongoing process to collect, summarize, and analyze student learning outcome data and must use the findings to improve student education. Examples of how student outcomes were used to improve educational quality of the program should be discussed with the college administration.

**EVALUATING THE PROGRAM BASED ON THE ELEVEN STANDARDS**

The standards describe the necessary requirements for accreditation. Specific items mentioned in the standard must be present in the team’s findings or the standard is not met. As an example, under the standard for Physical Facilities and Equipment, the last paragraph states “Facilities for the housing of animals used for teaching and research shall be sufficient in number, properly constructed, and maintained in a manner consistent with accepted animal welfare standards.” Team members must subjectively ascertain whether or not a college’s isolation facilities are appropriate and sufficient for clinical and research animals (see Section 21.7, Appendix G). Obviously, no two colleges are the same, yet they may all meet the standard in a variety of ways.

It is important also to note that if a college fails to comply with a specific part of the standard then the entire standard has been compromised. However, there are many gray areas where generalizations, not specifics, are the norm. In these areas, the team members must look for compliance. As an example, under the standard Information Resources, it is stated that “The college shall have access to the human, digital, and physical resources for retrieval of relevant veterinary and supporting literature and necessary for development of instructional materials.” Just exactly what constitutes human resources adequate for retrieval of relevant veterinary and supporting literature and necessary for development of instructional materials? This remains for the site team to determine. It is possible for a marginally qualified librarian to be doing a world-class job in running the library. What we are looking for is compliance. The site team needs to continuously ask two questions. First, does the present finding comply with the standard? Second, is the mission of the college being accomplished? Make sure enough information is provided to make a judgment decision on compliance with the standard as a whole and in a manner defensible before the full Council.

The chair of the site team and AVMA staff member will answer questions that may arise.
CONCLUDING THE VISIT
As the days pass, site team members will develop a clear sense of the college’s ability to comply with the standards and its ability to sustain the program within the resources identified. Many of your thoughts will be condensed and entered into the draft of the evaluation report during executive sessions of the site team. During the site team executive sessions, the chair will begin to formulate directives and recommendations to be verbally presented to the dean of the college (and his/her designated group) and the president of the university (and his/her designated group). It is important that there is site team consensus with these recommendations. At these two final meetings the site team chair will verbally present the finding of the team. Other team members should not speak until the report is complete, or unless the chair, dean, or president asks for additional information wherein a team member might make a substantial contribution. No written report will be given to the college or university at this time.

WRITING THE REPORT OF EVALUATION
The final draft of the report of evaluation prepared by the site team should be concise, accurate, and defensible through written (self-study or addendums) or observed (site visit verification) evidence. Information in the report of evaluation draft must be understandable to the COE members and to the administration of the college and the university. Clarity is an absolute requirement.

Each site team member is assigned one or more standards as lead writer. Each element of the standard and material required in the self-study should be addressed in the draft. (Remember that the college must comply with the elements of the standard and provide the information/evidence requested in the outline for the self-study report.

There are five major elements to each draft of the report of evaluation. 1) the compliance scoring rubric that lists each component/requirement of every standard. 2) Commentary: This section describes the factual findings of the site team, positive or negative, and provides context for any subsequent directives made to correct specific deficiencies. Specific facts and/or figures can be presented in the commentary to describe the factual finding of the site team or included as addenda. Each part of the standard must be addressed at the end of the section for each standard. 3) Commendations: This section is reserved for commending the college for quality endeavors. 4) Directives: This section is used to report the compliance of a college with each standard and to provide directives to correct each deficiency. 5) Recommendations: This section contains suggestions intended to assist the college in improving its educational program and carry no adverse consequences.

The site team should strive to reach consensus on the strengths, directives, and recommendations for each college.

Following the site visit, the chair of the site team, assisted by the AVMA staff, will modify the draft report of evaluation to ensure that all standards have been addressed adequately, paying particular attention to ensure that directives are matched with supporting narrative in the commentary of the draft. This draft is sent to site team members for their final input and the chair will make the necessary revisions. The approved draft is included in the agenda of the COE for its next meeting wherein the Council will assign accreditation status based upon the evidence provided in the draft evaluation report. The Council may make changes in the draft presented and a final report of evaluation will be prepared and mailed to the college dean and university president. The report or any part thereof is confidential and will not be made public except by the actions of the dean or president.

ACCREDITATION DECISIONS
The self-study and supporting documentation furnished by the college, the draft report of evaluation, the dean’s response to the report, and any other appropriate information from other sources to determine whether the college complies with the standards are made available to the Council prior to the COE meeting. Council members read and review draft reports of evaluation (provided in the COE meeting agenda distributed online prior to the meeting) for each college being considered for accreditation and come to the meetings prepared to discuss the findings of the site team and/or seek additional information necessary to evaluate that college.
Two COE members are assigned as primary and secondary reviewers to conduct a pre-site visit review of the self-study and post site visit review of the report of evaluation. The COE reviewers evaluate the self-study to identify and communicate concerns regarding compliance with each standard to the site team chair three weeks prior to the site visit. The reviewers also discuss the report of evaluation with the site team chair following the site visit to clarify any areas of concern. The COE reviewers may request clarifying information from the site team chair or ask COE staff to gather additional evidence from the college, as needed to facilitate review by the full Council. The primary COE reviewer presents an accurate summary of the draft report of evaluation, leads discussion, and provides the directives and recommendations of the site team for each Standard. Each Standard is presented and discussed separately, followed by a recommendation from the COE reviewer regarding the college’s compliance with that Standard. COE members then vote on that recommendation. After compliance with all Standards has been approved/disapproved, an individual voting in the majority regarding a specific Standard may propose a motion for reconsideration of that Standard based on substantive reason(s). The Council may reconsider that Standard with additional discussion and confirm its decision or, with supporting evidence, reverse its decision. When Standard 11, Outcomes Assessment, is considered, the Council votes to approve or disapprove the college’s performance in advancing student achievement.

At the conclusion of review of all the Standards and upon recommendation of the COE reviewer, the accreditation status and the assigned length of time for that status is determined by a vote of the Council, unless the Council notes deficiencies which may result in an adverse action. If major or minor deficiencies with a Standard(s) are noted, the Council proposes a remedy for each deficiency. Notification is made in the Recommendation section of the final report of evaluation when specific deficiencies are not identified, but the Council wishes to provide suggestions for improvement for the educational program.

When the Council notes deficiencies which may result in an adverse accreditation action, it will defer the accreditation decision, give written notice to the college of each deficiency and recommendation, and provide the college with an opportunity to respond in writing pursuant to Section 10.6. The college’s response must only include documentation, data, or other information relevant to the deficiencies identified by the Council that may result in an adverse accreditation action. The college must notify the Council of its intent to respond within fifteen (15) days after receipt of the draft report of evaluation and file its response with the Council within thirty (30) days after receipt of the draft report of evaluation. An adverse accreditation action is defined as withholding initial or renewed accreditation, denial of a reasonable assurance status, or assignment of terminal accreditation.

If the Council notes deficiencies regarding Standard 2, Finances that may result in an adverse accreditation action, the college may submit new financial information only if all of the following conditions are met:

1. The financial information was unavailable to the college until after the Council made the adverse findings regarding the college’s finances; and
2. The financial information is significant and bears materially on the financial deficiencies identified by the Council, i.e., the information is of such a nature that if found to be credible it could result in the finding that Standard 2, Finances is now met; and
3. The only remaining deficiency cited by the Council is the college’s failure to meet Standard 2, Finances.

An affected college may seek the review of new financial information as described in this section only once per accreditation cycle and any determination by the Council made with respect to that review does not provide a basis for an appeal.

The Council will consider the written response and documentation sent by the college within 30 days of receipt. The Council reserves the right to conduct a focused site visit, as needed, to validate information submitted for reconsideration. Should a letter of reasonable assurance be denied, or another adverse accreditation action taken for a specific college, the college is notified in writing of the reasons for the action and reminded of the appeal process. Within 30 days after action of the Council, staff prepares a letter for the dean of the college and the
president of the parent institution that accompanies the report of evaluation conveying the accreditation status, length of time a given status is assigned, and any special instructions. A formal statement of classification or reasonable assurance decision, signed by the Chair of the Council, accompanies the letter and the report.

After the opportunities to respond in writing or appeal have passed or the processes completed, the action of the Council is considered final and a final report of evaluation is prepared, including recommendations and a classification of accreditation or reasonable assurance. Copies of the final report are sent to the dean of the college, the chief executive officer of the institution, Royal College of Veterinary Surgeons, and the Canadian Veterinary Medical Association. The officials of the college and the institution are authorized to disseminate all or part of the content of the report at their discretion. Should an institution choose to make public disclosure, it must disclose its accreditation status accurately, including the specific academic program covered by that status, and specify that the AVMA-COE, the accrediting agency, is located at 1931 North Meacham Road, Suite 100, Schaumburg, IL (847-925-8070). Any incorrect or misleading information regarding preaccreditation or accreditation released by the institution will be corrected by the COE. These corrections include, but are not limited to 1) the accreditation or preaccreditation status, 2) content of reports of on-site visits, and 3) the accreditation or preaccreditation action by the COE with respect to the program. The content of the report is not available from AVMA, CVMA, Council members, or the site visit team. Except under the conditions cited above, all findings, the self-study, correspondence, recommendations, and related information and documentation of the site visit and the evaluation are confidential to the Council and will not be publicly disclosed.

The AVMA publishes the final accreditation or reasonable assurance classification of the college and the dates of the last and next evaluation of the college. All requests for details of the report are referred to the dean or the university president.

**Objective of Site Visit**

The objective of a site visit is to verify and supplement information presented in the self-study report. Site visits are made only with the concurrence of the administration of the college and its parent institution. When it appears in the best interest of the college, the university concerned, the AVMA, or another accrediting agency, every effort is made to coordinate and cooperate with other accrediting agencies in request for information and conduct of visits.

**Site Visit Overview**

The agenda for the visit is established by the chair of the site visit team in consultation with the college administration.

Site visit teams are fact-finding bodies, usually composed of seven members, including AVMA staff. Using the college self-study as the basis for evaluation, a four-day site visit is conducted. Input is sought from all program factions of the college including faculty, students, staff, and alumni. Facilities, programs, and other pertinent areas are also studied. A factual report of the current status of the college is produced using a standardized site visit rubric to ensure thorough and consistent application of the standards by each site team. The report is reviewed by all team members for factual correctness.

During the site visit the team audits the college educational program by consulting with the dean and appropriate staff, department heads, representative faculty members, the librarian, representative students at both professional and graduate levels including interns and residents, and appropriate faculty committees. In addition, the team tours the buildings, facilities, equipment, and views case records. The site visit team holds a series of executive sessions to compare notes on its findings, begin formulation of its report, and instruct the chair as to the points to be addressed and directives and recommendations made in the draft report of evaluation. Each member drafts directives concerning deficiencies in meeting the standard requirements for which he/she has been assigned responsibility. All recommendations are based on discussion noted in the body of the report. Directives are stated as specifically as possible to identify the deficiency involved and suggest possible solutions, without dictating the specific method for achieving the necessary outcome. The entire team discusses and approves all directives and recommendations, which become part of the report. The site team also may add recommendations when a
standard is in compliance, but an opportunity to make suggestions for improvement has been identified. If there is disagreement within a team concerning a directive or recommendation, the recommendation remains in the report; the disagreement is called to the attention of the Council when the report is presented.

The final report of evaluation will inform the college of the Council’s assessment of student achievement.

**Code of Conduct for Site Team Members**

Site team members are required to conduct themselves professionally, courteously, and with the utmost respect for faculty, students, and other representatives of the college educational program visited as well as fellow site visit team members.

Site team members must:

- Remember that the objectives of accreditation include verifying that an institution or program meets established standards, assisting prospective students in identifying acceptable institutions, creating goals for self-improvement of weaker programs and stimulating a general raising of standards among educational institutions, and involving the faculty and appropriate staff comprehensively in institutional evaluation and planning;
- Keep a positive attitude and not offer negative feedback or other criticism during the site visit;
- Remember that all materials, discussions, deliberations, and reports of the site visit are confidential;
- Refrain from discussing the “state of a college” with anyone other than site team members and appropriate AVMA staff;
- Remain open-minded throughout the evaluation process;
- Carefully study the materials contained in the college self-study to acquire a basic understanding of the college and its operation;
- Be prepared for four and a half days of intensive work with long evenings;
- Participate in the discussions, both with college administration and personnel, and in the team deliberations;
- Focus on and uphold the Standards of Accreditation;
- Be alert at all times using all senses;
- Be on time for all functions;
- Be involved in all functions of the site visit;
- Dress in corporate/professional attire for all site visit activities (men are asked to wear suits or coats and ties, and women are asked to wear suits or dresses); and
- Wear AVMA-COE identification badges at all times.

Site team members must not:

- Bring any preconceived ideas about the college to the site visit;
- Have a personal agenda regarding the college, its programs, or people;
- Become separated from the team for any reason unless so assigned by the site team chair;
- Become involved in a confrontation involving any issue of the visit;
- Compare colleges or programs, since each college and its program will be unique and the Council is not attempting to diminish diversity among programs or to hinder or impede innovation;
- Offer judgments on solutions to problems during the course of the visit; these activities are to be reserved for the exit interviews with the college dean and university president; and
- Tell “war stories”.

Remember at all times, the site team is a guest of the college and is there to assist the college in meeting its mission and goals. The accreditation process is only as good as the site team members and the COE.

**Site Team Modus Operandi**

It is important that the college recognize that comments made during the site visit about the status of the program with respect to a specific standard are in no way a final determination. During the exit interview, the chair of the site visit team should emphasize that the comments made represent the majority view of the site visit team and
will be considered as a directive or recommendation by the full Council on Education. The final decision on the status of each standard and the accreditation status rests solely with the full COE.

The lunch period indicated on the third day may be used for meeting with any group such as the state veterinary medical association or major committees not scheduled elsewhere.

Meetings with students are scheduled for each site visit. The scheduled meeting with professional students should involve two or three representatives of each class, selected by their peers. The meeting with graduate students should include one or more representatives from each appropriate department.

The meeting with faculty representatives should involve one faculty member from each department or administrative unit. These should be individuals, other than department heads (administration), chosen as spokespersons by the faculty of that department. The representatives meet as a group with the visiting team.

The site team will be available for a one-hour period to meet with students and faculty for confidential interviews, conducted in ten-minute increments. The dean’s office is responsible for announcing the time for such interviews, noting the location in an area remote from administrative offices. Interviews are conducted on a first-come, first-served basis until the time period has elapsed.

At colleges with very large departments, conferences with department heads often include heads of major sections.

The dean or the dean’s representative is welcome to participate in any of the meetings except those with students and faculty representatives. The university administration may invite the dean to participate.

Each evening during the site visit the team meets and reviews the day’s activities. The draft report of evaluation is updated and revised in light of new information gained during the day. All members of the team attend the evening meetings. On the last evening of the visit, development of the draft report is completed and directives agreed upon. Each directive must be based on a deficiency described in the commentary under the appropriate sections of the affected standard(s). The team votes on a classification of accreditation to be recommended to the Council.

At the conclusion of the site visit the team holds exit interviews with the dean of the college, and with the chief executive officer of the institution to review its findings. The exit interview with the dean and college administrators of the dean’s choosing, completes the site visitation of the college and precedes the exit interview with university administration. The exit interview is a critical part of the site visit; therefore, all site team members will attend. The exit interview with university administration normally involves the president of the institution and such other administrative officers as the president may choose. In the absence of the president, the team meets with his duly authorized representative. The dean is usually not present at the interview with the chief executive officer. The chair of the team is responsible for developing remarks for the exit interview. The team assists in preparing the outline for these remarks, and each member comments on items concerning the sections of the report drafted by the respective member.

There is no place in accreditation for adversarial relationships. The college and the COE site team should proceed with the premise that both parties are dedicated to the common goal of quality in veterinary education. Only through full and open communication and cooperative efforts to correct deficiencies can educational excellence be attained.

Interactions between the COE site teams and the colleges should have a collegial tone, and be based on mutual trust and a desire to arrive at a full understanding of the current status of the educational program of the college. The dean and other administrative officers should be knowledgeable in the definitions of the various levels of accreditation status and the impact of the failure to meet one or more of the standards.
Guidelines for Site Team Visitors to Foreign Veterinary Colleges

Site team members and AVMA staff are the guests of the host foreign veterinary college. Cultures and customs may differ from those in the US and Canada.

Regarding travel, the host institution is responsible for all expenses. However, the COE has established limitations to enable each site team member to understand the process and avoid misunderstandings. The following guidelines should be followed.

Travel
Air transportation is in business class. Should you choose to use first-class, the additional charges will be the responsibility of the site team member and will not be paid by the host institution. Tickets need to be purchased at least three weeks prior to departure and no later. The host institution is responsible for ground transportation to move the site team during the visit.

Lodging
The host institution is responsible for arranging lodging for the site visit. There may be those who want to combine the site visit with personal vacation or business, which is permissible. However, lodging charged to the host institution will be limited to the following:

- For those traveling only for the site visit, two nights of lodging before the site visit are permitted to allow for adjustment to time zone changes. At the end of the site visit (general mid-week at mid-day) air flights may not be available for immediate or convenient departure. In that case, one additional night is permitted. Please use good judgment in choosing the proper options.
- Extenuating circumstances may arise (weather, aircraft maintenance, etc.) which might delay departure on any leg of the flight. The host college is responsible for the cost of lodging during these rare occurrences. Charges resulting from injury or illness of the site team member causing delay in departure are the responsibility of the team member.
- The host institution is not responsible for charges associated with spouses, significant others, or dependents of a site team member.

Meals and Miscellaneous
The host institution is responsible for all meals and other related incidentals for the team during the site visit, with the same time limitations as lodging.

Telephone Calls
Telephone calls made by site team members for family or business reasons are not paid by the host institution. Calls, if made, are billed directly to the site team member. Use careful judgment related to any other charges.

Gifts
In many countries where special guests are being hosted, it is customary to provide or be provided with gifts. It is AVMA policy that official gifts will not be presented to the host institution. If a host institution wishes to provide a small gift to each participant, acceptance is allowed. However, gifts offered to individuals (and not to all members of the site team) must be refused. It is the desire of the AVMA that no gifts be presented; however, it is not the intent to disregard customs of a given society. It is permissible for site team members (as individuals or as a group) to provide a gratuity for some special services (chauffeur, hotel employees, etc.), but this voluntary gesture should not be charged to the host institution.
21. APPENDICES

21.1 Appendix A — Conflict of Interest / Confidentiality Statements
All site team members are required to sign a Conflict of Interest Statement/Confidentiality Statement.

AVMA COUNCIL ON EDUCATION CONFLICT OF INTEREST STATEMENT
Site Visit Team Member

To assure that all matters dealing with accreditation of colleges of veterinary medicine are conducted in an unbiased manner, the COE has adopted a Conflict of Interest Policy. The policy extends and pertains to those COE members and other site team members who have immediate family (e.g., parents, spouses, and siblings) in any of the potential conflict areas listed.

No COE member or other site team member shall serve on a site visit team who:
1. Is a graduate of any program in the institution being evaluated.
2. Has collaborative research, teaching, or service interests with a key administrator or faculty member of the institution being evaluated. (Holding a patent interest, shared research grants, and contract teaching are examples of collaboration.)
3. Is or has been employed by the institution being evaluated. (Members who have been interviewed for employment at an institution wherein some conflict arose should exclude themselves from consideration as a site visit team member.)
4. Has served as a consultant on accreditation matters with the institution being evaluated.
5. Is an employee or former (within the past five years) employee of the AVMA.
6. Has reason to believe other conflicts of interest exist that have not been listed herein. (The member should communicate with the Chair of the Committee on Evaluation for clarification of any concerns.)

AVMA COUNCIL ON EDUCATION CONFIDENTIALITY AGREEMENT
Site Visit Team Member

In accordance with AVMA policy, all information related to the Council on Education (COE) accreditation of a veterinary medical college is strictly confidential. This includes but is not limited to reports of evaluation, letters, self-evaluation and accreditation materials, interim/annual reports, correspondence, and the content of any discussion related to the veterinary medical college or its accreditation. All requests for information related to a specific institution and/or veterinary medical college must be referred to AVMA staff, or the respective institution.

Freedom of Information Acts which may be applicable in a given state, province, or country do not apply to AVMA confidential information related to the accreditation of veterinary medical colleges. Information requested through such acts may be obtained through due process from the respective institution or state/province/country office.

By signing your name below, you are agreeing to abide by AVMA policy with respect to the accreditation of veterinary medical colleges.

I, _____________________________, on this date _____________

signature

have read the conflict of interest policy and confidentiality agreement for COE site visit team members and by signing this document confirm that no conflict exists for me to serve as a site team member in evaluating the ____________ College of Veterinary Medicine.
AVMA COUNCIL ON EDUCATION CONFLICT OF INTEREST STATEMENT
AVMA Staff Member

Although AVMA staff members do not participate directly in decisions regarding accreditation of colleges, they are in a position to influence the outcomes of the process. On the other hand, staff provides continuity to the evaluation process.

No AVMA Staff Member will serve on a site visit team who:
1. Has graduated during the past five years from a college being evaluated.
2. Has been employed during the past five years by the college being evaluated.
3. Has close personal or familial relationships with key personnel in the college being evaluated.

AVMA COUNCIL ON EDUCATION CONFIDENTIALITY AGREEMENT
AVMA Staff Member

In accordance with AVMA policy, all information related to the Council on Education (COE) accreditation of a veterinary medical college is strictly confidential. This includes but is not limited to reports of evaluation, letters, self-evaluation and accreditation materials, interim/annual reports, correspondence, and the content of any discussion related to the veterinary medical college or its accreditation. All requests for information related to a specific institution and/or veterinary medical college must be referred to AVMA staff, or the respective institution.

Freedom of Information Acts which may be applicable in a given state, province, or country do not apply to AVMA confidential information related to the accreditation of veterinary medical colleges. It is our understanding that information requested through such acts may be obtained through due process from the respective institution or state/province/country office.

By signing your name below, you are agreeing to abide by AVMA policy with respect to the accreditation of veterinary medical colleges.

I have read the conflict of interest policy and confidentiality agreement for AVMA Staff participating as a COE site visit team member and by signing this document confirm no conflict exists for me to serve as a site team member in evaluating the _____.

(Staff Member Name) Signature ___________________________ Date ___________________________

AVMA COUNCIL ON EDUCATION CONFLICT OF INTEREST STATEMENT
FOR PUBLIC MEMBERS

I certify that I am not:

• An employee, member of the governing board, owner, or shareholder of, or consultant to, an institution or program that either is accredited or preaccredited by the Council on Education (COE) or has applied for accreditation or preaccreditation.

• A member of any trade association or membership organization related to, affiliated with, or associated with the COE; or

• A spouse, parent, child, or sibling of any of the individuals listed above.

Signature ___________________________ Date ________________
21.2 Appendix B — Primer on interim reports

What are interim reports?
Interim reports are most commonly annual reports to the AVMA Council on Educaions by accredited colleges/schools of veterinary medicine. Interim reports are also required at 6-month intervals for schools/colleges functioning under Reasonable Assurance or Provisional Accreditation. Each COE member is assigned several interim reports to review as primary and/or secondary reviewer. Written reports are submitted and are presented and discussed at the spring meeting of the COE.

Purposes of interim reports
- Provide a means by which the COE may be alerted of any significant changes in the college that are relevant to one or more standards of accreditation
- Allow the COE to monitor and assess college’s compliance with standards prior to the next scheduled site visit
- Provide a means by which the COE can make recommendations to a college before a situation may become an adverse accreditation issue
- Provide an opportunity for college to describe progress toward rectifying previously identified deficiencies and/or addressing recommendations from the last site visit or a previous interim report
- Provide the COE with important documentation and a longitudinal perspective for future interim reports
- Like Reports of Evaluation, provide important documentation should any appeals or adverse accreditation decisions arise
- Provide documentation that may be needed if Department of Education chooses to conduct an inspection or audit of the COE.

“Do's and Don'ts”

Do:
- Prepare the document just as carefully and seriously as you would prepare a Report of Evaluation
- Treat the interim report documents and your review with the same degree of confidentiality as you would treat all other council deliberations, discussions, and documents.
- If you are a primary reviewer, you must take the lead in assuring that the report is completed in a timely fashion. Contact the secondary reviewer and set a time line for preparation of the interim report review. Make sure to allow sufficient time for discussion of any concerns; pursuit of additional information, if needed; review of the primary reviewer’s draft; incorporation of edits; and submission of the final report.
- Read previous interim report reviews, Reports of Evaluation, and any other supporting documents that are made available to you along with the most current interim report. It is your responsibility to read these and be familiar with the college and its accreditation history.
- When reading prior interim report review, pay particular attention to any recommendations and/or concerns expressed by the Council.
- Early on in the process, check the report and make sure that no critical requested information is missing from the report.
- If needed, solicit missing information and/or clarification from the college administration AFTER consultation with the secondary reviewer.
• In the review, briefly summarize the information under each standard. Emphasize significant changes which are directly relevant to the standards of accreditation and, in particular, any changes which were made in response to prior recommendations.

• Write the background in the third person (e.g. the College has added 3 new tenure-track faculty members in the basic sciences; the State’s contribution the School’s budget declined by 10% in FY09; etc.)

• When making recommendations in the interim report review, point out concerns and give some direction, if needed, but don’t be prescriptive.

• Make the recommendations to the college; recommendations to the rest of the Council re accreditation status (for any status other than full accreditation) will be made at the meeting of the full Council.

• Commend the college only if the college has made an extraordinary achievement, accomplishment, or significant progress toward meeting a recommendation or correcting a deficiency.

• Check the report and correct typographical, spelling, and grammatical errors.

Do Not:

• Cut and paste entire sections from the interim report and insert them into your review. Also, if you are cutting and pasting some factual information, be particularly careful not to copy and insert first person pronouns into your review.

• Call the Dean or other College personnel without first consulting with your secondary reviewer; also, make sure that the information you are seeking is not contained within the current or previous interim reports.

• Call the Dean unexpectedly without preparing her/him and alerting her/him to the specific concerns. Do not contact the college for minor details or clarification that are of little or no significance to the accreditation standard.

• When speaking with the college administration in order to obtain needed information for the review, do not stray from the topic of concern. Specific discussions regarding how the reported information will affect the accreditation status are not appropriate. The entire Council will discuss and vote on the degree of compliance with the standards and the resultant accreditation status.
21.4 Appendix D — Justification for Good Cause Extension

Factors to consider to justify extension:

Has the school developed and followed a reasonable remediation plan
• Why is an extension necessary?
• Has progress been reasonable given the circumstances?
• Is there evidence that the remediation plan is likely to succeed in a defined time period?
• Are there opportunities to improve the remediation process?

Impact of the deficiencies on student achievement or safety
• Review five year trends associated with the standard(s) in question; are they negative, positive, or stable?
• Review outcomes assessment data to identify declining performance attributable to deficiencies identified

Is the evidence adequate to make an informed decision?
• Is additional or more definitive evidence needed?
• Is a focused site visit necessary to validate the evidence?

Examples of past extension include:
• Construction and major renovation projects where reasonable progress has been demonstrated and project completion is anticipated within a short period (less than a year).
• Outcomes assessment planning and implementation have shown good improvement, but curricular changes based on collection and analysis remain in progress.
21.5 Appendix E — Participation of Site Visit Observers

As a principal goal of accreditation is to improve educational outcomes, we recognize that observation of the practices of the Council of Education as they conduct veterinary accreditation site visits is of value to certain individuals. To facilitate this process, the following policies have been established.

Observers are welcome to participate in COE site visits if the following conditions are met.

1. Each observer must be a(n):
   a. A COE member (up to two) or
   b. Veterinarian or professional educator serving in a leadership role in a veterinary accrediting body with which the AVMA has established a working relationship (the COE will determine when such a relationship exists).

2. The chairperson of the site team and the Dean of the host institution must agree to each proposed observer*.

3. A total of four observers (from all sources) may be accommodated on each site visit. Observers will be selected on a first come, first served basis within the constraints of the priority list in Item 1 (see above).

4. Observer requirements

   All observers must:
   a. Arrange to pay the full costs of their participation in the site visit. (Except COE members)
   b. Assume full liability for personal safety during the site visit.
   c. Be competent in spoken and written English.
   d. Attend all functions of the site visit.
   e. Sign a COE confidentiality statement.
   f. Sign a COE conflict of interest statement.
   g. Prepare for the site visit by reading information provided.

* Observers from the RCVS require only approval by the dean.
## 21.6 Appendix F — Distributive Model: Off-site Inspection Guide

### OFF-SITE CLINICAL FACILITIES

<table>
<thead>
<tr>
<th>Site:</th>
<th>Third year site</th>
<th>Fourth year site</th>
<th>Third AND Fourth year site</th>
</tr>
</thead>
</table>

Names of clinical personnel:

<table>
<thead>
<tr>
<th>Position</th>
<th>Name</th>
<th>Position</th>
<th>Name</th>
<th>Position</th>
<th>Name</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>

Relationship of practicum rotation coordinator and site (practice or facility)?

### Standard 3

#### 21.3.3a Adequacy of Safety Measures:

**Posted protocols/warning signs:**

1. **isolation facilities**  
   - YES____  
   - NO_____  
   - NA _____

2. **radiology/radioactivity**  
   - YES____  
   - NO_____  
   - NA _____

3. **first aid/evacuation/other emergencies**  
   - YES____  
   - NO_____  
   - NA _____

4. **hydraulic chutes**  
   - YES____  
   - NO_____  
   - NA _____

Describe safety measures at this facility. Who is responsible for safety inspections?

Any unsafe conditions? Note specific area and deficiency:

Safety of facilities for housing animals (fencing, corrals, caging, runs, etc.)?

Safety equipment is in place for radiographic procedures?

<table>
<thead>
<tr>
<th>Item</th>
<th>YES</th>
<th>NO</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Lead barriers</td>
<td>YES</td>
<td>NO</td>
<td>NA</td>
</tr>
<tr>
<td>2) Aprons</td>
<td>YES</td>
<td>NO</td>
<td>NA</td>
</tr>
<tr>
<td>3) Gloves</td>
<td>YES</td>
<td>NO</td>
<td>NA</td>
</tr>
<tr>
<td>4) Eyewear</td>
<td>YES</td>
<td>NO</td>
<td>NA</td>
</tr>
<tr>
<td>5) Dosimetry Badges</td>
<td>YES</td>
<td>NO</td>
<td>NA</td>
</tr>
</tbody>
</table>

#### 21.3.3b — h: Adequacy of instructional environment and equipment

Waiting rooms/client areas  

<table>
<thead>
<tr>
<th>Status</th>
<th>Concerns</th>
</tr>
</thead>
<tbody>
<tr>
<td>NA</td>
<td>OK</td>
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111
<table>
<thead>
<tr>
<th>Area</th>
<th>NA</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Examination rooms</td>
<td></td>
<td>OK</td>
<td></td>
</tr>
<tr>
<td>Treatment areas</td>
<td></td>
<td>OK</td>
<td></td>
</tr>
<tr>
<td>Laboratory – clinical pathology/diagnostics</td>
<td></td>
<td>OK</td>
<td></td>
</tr>
<tr>
<td>Kennels/Animal Housing</td>
<td></td>
<td>OK</td>
<td></td>
</tr>
<tr>
<td>Surgery and anesthesia</td>
<td></td>
<td>OK</td>
<td></td>
</tr>
<tr>
<td>Gas cylinders secured</td>
<td></td>
<td>OK</td>
<td></td>
</tr>
<tr>
<td>Intensive/critical care</td>
<td></td>
<td>OK</td>
<td></td>
</tr>
<tr>
<td>Necropsy</td>
<td></td>
<td>OK</td>
<td></td>
</tr>
<tr>
<td>Pharmacy</td>
<td></td>
<td>OK</td>
<td></td>
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<tr>
<td>Controlled substances:</td>
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<td></td>
<td></td>
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<tr>
<td>Access? In clinic and ambulatory?</td>
<td></td>
<td></td>
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<tr>
<td>Records?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expired/ outdate drugs?</td>
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<td></td>
<td></td>
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<tr>
<td>Comment:</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Safety of chemo drugs? Hood?, personal safety gear?, waste?</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Offices/Student break area</td>
<td></td>
<td>OK</td>
<td></td>
</tr>
<tr>
<td>Computers and internet access</td>
<td></td>
<td>OK</td>
<td></td>
</tr>
<tr>
<td>Overall building infrastructure</td>
<td></td>
<td>OK</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td>OK</td>
<td></td>
</tr>
</tbody>
</table>
21.4.4  Monitoring and supervision

**Third year sites and fourth year sites** – questions for preceptors

How were you trained/ oriented to the responsibilities of being a distant veterinary teaching facility coordinator, and by whom? Discuss your responsibilities for student evaluations.

With whom do you communicate in regard to students and goals and expectations for students rotating through your clinic/ facility? How often?

Discuss your responsibilities regarding clinical competencies of students. How are these used to improve student learning at your facility?

How often, during a rotation, does someone from the school/college come to visit your clinic?

  Who usually makes these visits?

  What do they do while they’re here, i.e., nature of the visit?

  follow-up?

  do you keep record of these visits and/or correspondences?

Who is responsible for day-to-day supervision and monitoring of students in your practice?

Who is responsible for completing the on-line evaluations of students in your practice? (21.6.4)

Does this person also discuss this evaluation or otherwise give feedback to the students?

  Please describe nature and frequency of evaluation and feedback.

  Do you use the feedback forms /internet programs that are available from the school/ college?

  Do you feel that the assessment system provided allows you to assess the students in an adequate manner?

  YES

  NO
Fourth year sites – additional questions for preceptors

How often does someone from the school/college inspect or examine your practice/ facilities and update information related to their criterion and requirements for your participation as a CORE fourth year site?

Describe the types of rounds you have with the students? How often do these occur?

21.4.5: Student involvement and responsibilities
When students are rotating through this practice/site, how are they involved in healthcare management? Do they:

<table>
<thead>
<tr>
<th>Activity</th>
<th>YES</th>
<th>NO</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>meet with clients?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>discuss costs/ billing with clients?</td>
<td></td>
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</tr>
<tr>
<td>admit patients?</td>
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<td></td>
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<tr>
<td>discharge patients?</td>
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<td></td>
</tr>
<tr>
<td>take medical history?</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>examine patients?</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>make entries in medical records?</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>participate in diagnoses?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>take cytology sample?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>treat patients?</td>
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<td></td>
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<tr>
<td>participate in surgeries?</td>
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<tr>
<td>administer and/or monitor anesthesia?</td>
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<tr>
<td>participate in emergency treatments?</td>
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</tr>
</tbody>
</table>
participate in critical care? YES NO NA

participate in imaging YES NO NA

radiography? YES NO NA

positioning/taking radiographs? YES NO NA

interpretation? YES NO NA

ultrasound? YES NO NA

imaging process? YES NO NA

interpretation? YES NO NA

other? YES NO NA

conduct necropsy examinations? YES NO NA

other? YES NO NA

How did the students learn about the facility? Describe how arrangement for transportation and housing were made at the DVTH?

How do the students evaluate the site and their experiences there?

How are students instructed in bio-safety at the sites?

*If possible verify these with students on site. If not then do so during student interview session including their thoughts regarding pros and cons of site.*

21.4.7: Medical records
What type of medical records do you maintain? electronic paper both

Do students have access to the records? YES NO NA
Are records “readily retrievable?”

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<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>NA</th>
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</table>

(Team should, if possible, examine a few representative records to validate what has been stated)

Other comments regarding records?

**Standard 5**
21.5.1, 21.5.3

To what type of learning and information resources do students have access at your practice?

<table>
<thead>
<tr>
<th>Resource Type</th>
<th>YES</th>
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<tr>
<td>Textbooks</td>
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<tr>
<td>Journals</td>
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<tr>
<td>Hardcopy</td>
<td>YES</td>
<td>NO</td>
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<tr>
<td>Electronic</td>
<td>YES</td>
<td>NO</td>
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<tr>
<td>Electronic data bases</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Other internet resources</td>
<td>YES</td>
<td>NO</td>
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<tr>
<td>Other?</td>
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</table>

Describe:

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**Other:**

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Date: __________________________________ Site team members: ____________________________________________
21.7 Appendix G — Guidelines for COE site visit teams: Isolation Facilities/Procedures

Principles:
• It is possible for colleges/schools of veterinary medicine to meet Standard 3, Physical Facilities and Equipment, with a wide range of isolation facilities.
• Other standards are also involved: Standard 9, Curriculum (patient management and care including intensive care, emergency medicine and isolation procedures) and Standard 11, Outcomes Assessment (clinical competencies – health promotion, disease prevention/biosecurity, zoonosis, and food safety).
• The top priority is to educate students on infection control in a safe environment; students must understand the principles and characteristics of an ideal isolation facility.
• It may be possible to mitigate physical facility limitations through the use of effective procedures; emphasis will be placed on implementation of an effective program:
  o Infection control plan must be appropriate for caseload and effectively mitigate facility deficits.
  o Faculty, students, and staff must have an in-depth knowledge and understanding of the infection control plan.
  o Evidence of program effectiveness must be available, for example, nosocomial infection rate, results and analysis of microbial surveillance.

Facilities – “Ideal” General Characteristics:
• Separation from high traffic areas and other animals which might be infected
• Single purpose use
• Equipment and materials dedicated to this area
• Negative pressure air flow
• Ante room
• Easily cleaned and disinfected surfaces
• Other characteristics?

Procedures Must:
• Ensure personnel follow infection control policies related to personal hygiene, patient care, and disinfection of equipment facilities
• Include method(s) to identify potentially infectious diseases upon entry to the hospital
• Address various types of infectious diseases
  o Respiratory – viral
  o G.I. – viral, bacterial, parasitic
  o Zoonotic diseases
• Include workflow and traffic patterns to reduce risk of cross contamination
• Include disposal procedures for potentially infective material, bedding, and animals to limit the potential for cross contamination
• Include appropriate surveillance methods to ensure procedures are effective

Questions for the Site Team to Explore:
• How often are patients placed in isolation in comparison to the total case load?
• Do clinicians and students apply risk assessment to all patients admitted to the veterinary teaching hospital (VTH) – such as risk of spreading disease, zoonotic potential, increased risk of some types of patients in the VTH (immunocompromised, young, non-vaccinated animals, etc.)
• Does the VTH have a method/system to track disease transmission?
• Does the VTH monitor or track potential antimicrobial resistance in their patients?
• Is there a method/procedure to segregate or not admit animals suspected of a specific infectious disease such as:
  o Canine parvovirus, or other types of viral diseases
  o Feline upper respiratory disease
- Neonatal ruminants with cryptosporidiosis
- Any animal with Salmonella

- Does the VTH have a biosecurity report that is shared with faculty, students, and staff?
- Is there an active educational process to inform all members of the VTH on issues of biosecurity?
- Are there easily accessible and understood procedures for infectious disease control and is there evidence that the procedures are effective?

Are surveillance results used to evaluate program effectiveness?
21.8 Appendix H — Philosophy and Interpretations of the COE

Introduction

This section of the manual is included to provide a sense of the philosophy and interpretations expressed by various Councils over the years relative to specific accreditation matters. Items included herein do not represent any official Council or AVMA policy. They may be revised, added or deleted on the basis of Council action.

This is in contrast to the main body of the manual which represents official Council and AVMA policy on matters relating to accreditation.

Admission
The Council encourages schools to utilize appropriate individuals (qualified Psychologists) within the university to aid admissions committees in defining and developing improved parameters for selection of students based on the objectives of the school and the needs of society. Studies to aid in defining entering characteristics of students should also assist in planning more flexible educational programs and resources for effective learning.

Admission committees should emphasize in the selection of candidates, evidence of scholarly endeavor, acceptable writing skills, analytic skills, and ability to learn independently.

Animal Ownership
The Council encourages the inclusion of instruction in responsible companion animal ownership in the veterinary curriculum. This should include concern for overpopulation, injuries to human beings, environmental pollution, zoonotic disease transmission, nutrition, and prevention of injury and disease.

Caged Bird Medicine
The veterinary profession has a responsibility to provide service in the treatment of disease and maintenance of health in caged birds. Because graduates need to be prepared to meet the demand for such service, colleges should include pertinent material in the curriculum.

Canadian Representative
The Council on Education has agreed that a representative from the Canadian Veterinary Medical Association will be a member of the evaluation teams at US, Canadian, and foreign colleges of veterinary medicine, the expense of the representative to be borne by CVMA.

Site visit teams assigned to evaluate Canadian colleges will include two trained site visitors selected by the COE and three trained site visitors appointed by the CVMA. A sixth, optional member may be appointed by the provincial veterinary medical association of the province where the college is located to serve as an observer and will be funded by the province. AVMA staff will organize the evaluation proceedings, provide secretarial service in developing the report of evaluation, and accompany the site visit team. AVMA accreditation policies and procedures will be followed.

One of the COE-selected site visitors will be appointed chair of the team. At least one representative from each country will represent clinical science and at least one representative from each country will represent basic science.

Consultation
The Council welcomes inquiries relative to further interpretation of the “Standards of an Accredited College of Veterinary Medicine” as published. AVMA staff will respond willingly to solicitations for advice and guidance in the solution of the individual problems of a college of veterinary medicine as they may relate to accreditation.
Cooperative Programs in Veterinary Medicine
A Cooperative Program in Veterinary Medicine consists of a federation of two or more accredited colleges which have affiliated to provide specifically defined components of the educational program of the cooperating institutions. Its purpose is to provide innovative comprehensive programs which may be shared by multiple colleges in an effort to enhance the quality and depth of the instructional process of the specific component, and the efficiency in utilization of specialized resources.

Implementation of such a program may result in economic savings to the participating institutions, contribute to the development of creative educational approaches, provide efficient utilization of facilities, equipment, and specialized faculty, and increase the overall quality of graduates of the professional program.

Consideration for establishment of a cooperative program in veterinary medicine should include:
1. A cooperative administrative plan agreed upon by all of the institutions involved in the program.
2. Well-defined and diligently practiced procedures for accommodating the relocation of students participating in the program.
3. A mechanism which provides for evaluation of the Cooperative Program in relationship to the accreditation process for each of the participating colleges.

Curriculum
The Council encourages the development of institutional individuality and the achievement of excellence without the establishment of uniformity. It is recognized that state, regional, national, and international needs may differ and that only a few schools may need to offer certain unique programs.

a. In its evaluation of the professional curriculum, the Council will consider the stated objectives and performance criteria of the school and how well they appear to meet the needs of the student, society, and the profession.

b. Curriculum planning should reflect:
   1. The results of research on learning and teaching.
   2. Results of studies to determine critical performance requirements for veterinarians.
   3. Efforts to design and provide learning experience that are consistent with the objectives of the curriculum.
   4. Recognition that students learn at different rates and in different ways.
   5. The application of fundamental principles of evaluation to each student’s progress in terms of stated performance criteria or objectives.

c. The Council wishes to foster innovation and experimentation in curriculum planning and development with the following basic guidelines:
   1. Such experiments should be planned in consultation with experts in criterion evaluation of learning to provide objective and subjective criteria for periodic evaluation of the changes.
   2. Revisions to provide for elective programs, multiple options, track systems, or areas of concentration within the professional curriculum should be designed to maintain a core of performance criteria to assure that the graduate veterinarian will be able to serve society in the several generally accepted areas of veterinary medical responsibility; that he have fundamental habits of learning and basic skills and knowledge to continue development as a specialist in one or more areas through graduate and continuing education.
   3. Schools intending to make significant revision of the curriculum, their objectives, or major learning experiences, are requested to consult with the AVMA staff during the planning of such changes, so that the Council is kept informed and may respond in an appropriate manner.

d. Curriculum should be under continuing review and revised as deemed necessary to meet the changing needs of students, society and the profession. Learning experiences should be designed to develop habits of self-education and self-assessment.
   1. In view of changes occurring in food animal medicine and the increased emphasis on preventive medicine and herd health programs, schools should review the learning experiences in these educational programs and revise them as appropriate. In addition, the relationship of food animal medicine and food safety should be an integral part of the curriculum.
2. The Council also wishes to encourage learning experiences for students in work-study programs utilizing public and private practitioners of veterinary medicine as preceptors. Preceptorship or extern programs can augment and enhance learning experiences for students in specialized as well as more general types of public and private practice. These programs should be carefully planned and evaluated in accordance with the objectives of the program and resources available.

The professional degree curriculum should emphasize the acquisition and development of skills, values, and attitudes at least as much as the acquisition of knowledge. Didactic instruction should be limited to provide unscheduled time for independent study and problem-solving activity. Evaluation should include the measurement of analytic skill as well as the ability to recall facts.

The curriculum as a whole should encourage humane stewardship of animals, contribute to improved understanding of animal needs, and provide opportunities to consider the scientific, ethical, philosophical, and moral values associated with the use of animals in teaching, research, safety testing, and commercial production.

Over the past several years the AVMA has held numerous task force meetings which have considered all aspects of the profession. These meetings have identified several critical areas necessary for the success of entry-level veterinarians. Many of these issues have a common basis in business and interpersonal management skills.

Integration of the following items throughout the curriculum is believed to be important to the success of new veterinary graduates. Time management, organizational behaviors, communications skills, the time value of money, personal financial management, personal work ethic and contemporary business are necessary in order to succeed in today’s professional environment. Additionally, the aforementioned concepts should be extended to externships in the form of written objectives.

**Degrees**

The Council on Education considers the use of the words “Veterinary Medicine” or “Veterinary Science” in any academic degree below the professional level to be undesirable. The award of such degrees is discouraged because of the danger of confusing the public as to who is, and who is not, capable of delivering professional veterinary service.

**Diagnostic Laboratories**

The Council recognizes that diagnostic laboratories constitute a very important educational resource, and strongly encourages each accredited college of veterinary medicine to develop and maintain a close working relationship with an appropriate diagnostic laboratory.

**Faculty**

The Council emphasizes the need for faculty to have and maintain a knowledge of:

1. Learning theory.
2. Results of research on learning and teaching.
3. New developments in the use of technology and learning resources.

The Council will evaluate:

1. Curriculum planning.
2. The general development of educational resources and their use.
3. The general use of instructional objectives, including performance criteria, and
4. Methods and criteria used for evaluation of students’ learning.

**Veterinary Public Health & Food Safety**

A significant societal need is the assurance of a safe and wholesome food supply. Veterinary medical education should provide veterinary students learning experiences which will enable them to assure that animals utilized for food are free of disease and unacceptable drug or chemical residues.
It is equally important to provide veterinary students learning experiences, which emphasize the relationship of zoonotic disease and human health and the actions required to prevent the transmission of these conditions.

For the ongoing benefit of society, continuing education and motivation in relation to these responsibilities following graduation should be an important goal of veterinary medical education and the profession.

**Foreign Animal Diseases**
Foreign animal diseases and the indigenous “look-a-likes” should be adequately covered in required courses in the curriculum. Students need to learn that foreign animal diseases are constant threats to animal and human health in this country.

**Human/Animal Bond and Animal Behavior**
The Council on Education recognizes the existence of the Human-Animal Bond (HAB) and its importance to client and community health, that the HAB has existed for thousands of years, and that the HAB has major significance for veterinary medicine because, as veterinary medicine serves society, it fulfills both human and animal needs. The Council has reviewed documents on and surveys about the status of veterinary medical education in the areas of human/animal bond and animal behavior. The Council will continue to review, monitor, and promote the improvement of these subject matter areas in the veterinary medical curriculum.

**Laboratory Animal Medicine**
The Council on Education encourages humane care, treatment, and handling of laboratory animals. It evaluates in a concerned manner the adequacy of laboratory animal facilities, compliance with the guidelines for the Care and Use of Laboratory Animals and the education program in laboratory animal medicine during visits to each institution. The ideal, of course, is accreditation by the Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC) or, in Canada, the Canadian Council on Animal Care (CCAC). However, the Council does not perceive AAALAC or CCAC accreditation of the laboratory animal program as being absolutely essential for a program in veterinary medical education. The Council evaluates each school as it complies with the published standards of an acceptable veterinary medical school without regard to whether it has been accredited by the various specialty organizations.

**Learning Disabilities**
The Council on Education expresses its concern that persons with disabilities, including learning disabilities, receive appropriate consideration as required by the Americans with Disabilities Act of 1990 (ADA) in both education and testing situations. In particular, the Council wishes to inform licensing agencies, e.g., National Board Examination Committee, state licensing boards, of the need to comply with this act (ADA) which requires that examinations (and the application process) for licensure/certification/credentialing be accessible to persons with disabilities. Thus the policies of such licensing/testing agencies must comply with this law. Organizations or persons desiring more information about these requirements for testing accommodations are referred to the publication “Exam Accommodations Reference Manual” which is available from the Association on Higher Education and Disability, 107 Commerce Center Drive, Suite 104, Huntersville, NC 28078, Phone 704/947-7779 (website: [http://www.ahead.org](http://www.ahead.org)).

**Libraries**
The Council does not plan to establish any standards for libraries in colleges of veterinary medicine beyond those listed in the “Standard Requirements.”

The Council does not plan to develop a list of recommended publications or books for veterinary college libraries, since such a list tends to become a maximum as well as a minimum requirement, thereby serving to reduce rather than expand the acquisition of new information.
Objectives
The Council encourages each school to develop well-defined educational and outcomes criteria. Such objectives and outcomes criteria should serve as the basis for evaluation of learning by students in the professional curriculum.

Postdoctoral Education
The term “postdoctoral education” includes post DVM/VMD learning experiences which contribute to an increase in knowledge and competence of veterinarians, including, but not necessarily limited to:
1. Internships or residencies with or without the objective of board certification.
2. Graduate programs leading to a master’s degree or another doctoral degree.
3. Formal academic courses without degree objectives.
4. Seminars, short courses, conferences, with or without award of certificates, academy credit, and/or Continuing Education Units (CEU).
5. Other college-sponsored or recognized learning experiences with or without award of CEU or other credit.
6. School motivated learning experiences recognized as continuing education which add to knowledge and competency of veterinarians.

Preceptorship
The Council recognizes the value of preceptorship programs to broaden students’ knowledge of various modes of veterinary practice.

Relation to Other Colleges
Veterinary medicine occupies a unique position as a bridge between medicine, agriculture, and biology. Colleges of veterinary medicine that enjoy close geographical and functional relations with schools of medicine and agriculture and with departmental or other groupings in the biological sciences are greatly strengthened.

Role of State & Canadian Veterinary Medical Associations
A. Each site visit team designated by the Council on Education to evaluate a college of veterinary medicine in the accreditation process includes a representative of the Canadian Veterinary Medical Association (CVMA COE site visitor). These members are designated by the organizations they represent. Other members of the site team are assigned to the committee by action of the Council. The dean of the college concerned has the right to challenge the appointment of any member of the committee and request replacement.
B. Team members representing CVMA must attend initial and annual COE site visitor training and are full voting members of the site visit team. State or provincial veterinary medical association representatives are non-voting observers.

Safety of Animals and Handlers
Members of the COE place a great deal of emphasis on safety of animals and handlers, students, and faculty members. In standard 3 (physical facilities and equipment) and standard 9 (curriculum), mention is made of humane care and treatment of animals as well as a mandate to maintain clinical equipment to allow examination and treatment. A prime consideration of the site visitors is the issue of safety as related to physical facilities and equipment, personnel, and animals.

Specialty Education
A. Definitions
   Internship - An internship shall be one year of flexible rotating clinical training in veterinary medicine beyond the professional degree.
   Residency - A residency shall be advanced, structured, clinical training in a specialty in veterinary medicine taken after completion of an internship or its equivalent.
Veterinary graduates should have:
1. An understanding of the importance of quality control (peer-evaluation) in the generation and dissemination of new knowledge (i.e., to distinguish between what is known, what is anecdotal, and what is unknown).
2. An ability to read and critically evaluate the scientific (veterinary medical) literature.
3. An ability to generate, record, standardize, evaluate, manage, and retrieve high quality data.
4. An understanding of the ways in which the research enterprise links veterinary medicine to other sciences, such as animal behavior, drug safety and development, animal science and husbandry, human medicine, etc.
5. An ability to apply the scientific thought process (hypothesis testing) to individual case evaluation.
6. An ability to apply new knowledge to the practice of veterinary medicine (i.e., apply a new surgical technique).
7. An ability to define the current limit of knowledge, and therefore identify priorities for where new knowledge is needed.
8. An ability to educate clients and the public regarding the current status and need for new knowledge in veterinary medicine.
### Standard 1, Organization

**The college must develop and follow its mission statement.**

Intent: A well-developed mission statement is helpful in communicating the values and purpose of the college, as long as it is followed and reflected in the actual practices of the college.

What to look for: Evidence of overall teaching, research, and service commitment; commitment to professional DVM program or equivalent; commitment to provide instruction and clinical opportunities for students in a wide variety of domestic species, including food animal, equine, and companion animal; commitment to excellence in program delivery.

The college has a well-developed mission statement that is followed.

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Comments:

An accredited college of veterinary medicine must be a part of an institution of higher learning accredited by an organization recognized for that purpose by its country's government.

Intent: The COE is recognized by the US Department of Education and Council on Higher Education Accreditation as a programmatic accreditor and does not evaluate independent veterinary colleges. Institutional accreditation in the United States, provincial recognition in Canada, and governmental recognition in other countries provides a measure of institutional quality assurance and accountability beyond the college level.

What to look for: The institutional accrediting body has been identified; the accreditation status of the university is provided; deficiencies noted by the accreditor that may impact compliance with the Standards of Accreditation are being addressed adequately.

The college is part of an institution accredited or federally recognized for this purpose.

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Comments:

A college may be accredited only when it is a major academic administrative division of the parent institution and is afforded the same recognition, status, and autonomy as other professional colleges in that institution.

Intent: Effective veterinary colleges are complex, multidisciplinary, and resource intensive. Access to senior institutional leaders is essential to ensure ongoing needs are fully appreciated and adequate resources are made available to sustain the teaching, research, and service mission of the college.

What to look for: A flow chart indicating the position of the college of veterinary medicine in the university structure; lines of authority and responsibility are shown; names and titles of principal administrative officers are provided to the level of college.

The college is a major academic administrative division of the university afforded the same recognition, status, and autonomy as other professional colleges.

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Comments:
The chief executive officer or dean must be a veterinarian. This individual must have overall budgetary and supervisory authority necessary to assure compliance with accreditation standards. The officer(s) responsible for the professional, ethical, and academic affairs of the veterinary medical teaching hospital or equivalent must also be (a) veterinarian(s).

Intent: Veterinary medicine is a unique, multidisciplinary health profession. Decisions affecting the education of veterinarians are best understood and administered by veterinarians.

What to look for: A flow chart of the organizational design of the college, listing names, titles (deans or chief executive officer, associate/assistant deans, directors, department heads, etc.), academic credentials, and assignments of the college administrators. Verify that the dean and chief academic officer of the hospital (or the individual with senior leadership responsibility for the clinical programs) are veterinarians.

The dean and academic head of the veterinary teaching hospital are veterinarians.

Comments:

There must be sufficient administrative staff to adequately manage the affairs of the college as appropriate to the enrollment and operation.

Intent: Administrative staff (including administrators) play an essential role in all phases of college operation. The administrative staff and structure must be adequate to support students and faculty and fulfill the teaching, research and service mission of the college.

What to look for: Description of the role of administrators (deans, associate/assistant deans, directors, department heads, including academic credentials), faculty, support staff, and students in the governance of the college; listing of major college committees including committee charge, appointment authority, terms of service (term length/rotation), and current members;

College committee structure, representation, and function are adequate to meet the operational needs of the college effectively.

Sufficient administrative staff is present to support the operational needs of the college.

Does the college plan to change its current organization?

Intent: Accreditation site visits represent a snapshot of current conditions. However, program sustainability can be positively or negatively impacted by planned organizational changes.

What to look for: A rationale and summary of planned organizational changes including timelines and how the planned changes are expected to improve the existing conditions or address anticipated future needs

Comments:

The college must create an academic environment that does not discriminate and seeks to enhance diversity, consistent with applicable law. Diversity may include, but is not limited to, race, religion, ethnicity, age, gender, gender identity, sexual orientation, cultural and socioeconomic background, national origin, and disability.

Intent: The college must have policies and activities that demonstrate the value of a diverse culture within the institution and the workplace outside the institution.
What to look for: policies and procedures, activities, recruiting strategies and other evidence to show that a diverse culture is valued.

Policies and procedures and college activities demonstrate an institutional value and commitment to promoting a diverse academic and workplace environment.

Comments:

Overall, can the college be said to be in compliance with Standard 1?

YES     NO
☐     ☐

Comments:

Colleges with non DVM undergraduate degree programs must clearly report finances (expenditures and revenues) specific to those programs separately from finances (expenditures and revenues) dedicated to all other educational programs.
Intent: It is important to evaluate the impact non DVM, undergraduate degree programs offered by the college have on the professional program.

What to look for: Clear reporting of the expenditures and revenues specific to non DVM, undergraduate degree programs offered by the college and impact on the DVM program.

Non DVM undergraduate degree programs offered by the college do not adversely affect resources available to deliver the professional program.

Comments:

Clinical services, field services, and teaching hospitals must function as instructional resources. Instructional integrity of these resources must take priority over financial self-sufficiency of clinical services operations.

Intent: Efficient operation of clinical services is highly encouraged, but must not take precedence over the educational mission of the college.

What to look for: Evidence that adequate resources for instruction and clinical opportunities are provided for students in a wide variety of domestic species, including food animal, equine, and companion animal; commitment to excellence in program delivery.

Clinical services, field services, and teaching hospitals function as instructional resources Y MD N ☐ ☐ ☐

Instructional integrity of these resources takes priority over financial self-sufficiency of clinical services operations (educational objectives take priority) Y MD N ☐ ☐ ☐

Comments:

Overall, can the college be said to be in compliance with Standard 2?

YES MD NO ☐ ☐ ☐

Standard 3, Physical Facilities and Equipment

All aspects of the physical facilities must provide an appropriate learning environment. Safety of personnel and animals must be a high priority. Classrooms, teaching laboratories, teaching hospitals, which may include but are not limited to ambulatory/field service vehicles, seminar rooms, and other teaching spaces shall be clean, maintained in good repair, and adequate in number, size, and equipment for the instructional purposes intended and the number of students enrolled.

Administrative and faculty offices and research laboratories must be sufficient for the needs of the faculty and staff.

An accredited college must maintain an on-campus veterinary teaching hospital(s), or have formal affiliation with one or more off-campus veterinary hospitals or other training sites used for teaching. Appropriate diagnostic and therapeutic service components must be present to meet the expectations of the practice type. These include, but are not limited to, pharmacy, diagnostic imaging, diagnostic support services, isolation facilities, intensive/critical care, ambulatory/field service vehicles, and necropsy facilities in the teaching hospital(s) and/or facilities that provide core clinical training. Operational policies and procedures must be posted in appropriate places. Standards related to providing an adequate teaching environment and safety of personnel and animals shall apply to all teaching hospitals and core training sites.
Intent: Colleges must have adequate and appropriate physical facilities to facilitate interaction among administration, faculty and students. The physical facilities must meet legal standards and be safe, well maintained, and adequately equipped. Colleges must demonstrate compliance with relevant institutional practices and the American Disabilities Act to provide appropriate access to learning and clinical facilities for students with disabilities.

What to look for:
Evidence that all aspects of the physical facilities provide an appropriate learning environment for the number of students enrolled, including students with disabilities. Effective biosecurity and safety measures are in place and regularly monitored.

Classrooms, teaching laboratories, teaching hospitals, which may include but are not limited to ambulatory/field services vehicles, seminar rooms, and other teaching spaces are:

| Clean and well maintained | ☐ | ☐ | ☐ |
| Adequate in number, size, and equipment for the instructional purposes intended. | ☐ | ☐ | ☐ |
| Adequate in number, size, and equipment for the number of students enrolled. | ☐ | ☐ | ☐ |

Administrative and faculty offices and research laboratories are sufficient for the needs of faculty and staff.

Adequate on-campus veterinary teaching hospital(s), or formal affiliation with one or more adequate off-campus veterinary hospitals are provided for teaching.

Diagnostic and therapeutic service components, including but not limited to the following are available that reflect contemporary standards and provide an adequate learning environment:

| Pharmacy | ☐ | ☐ | ☐ |
| Diagnostic imaging | ☐ | ☐ | ☐ |
| Diagnostic support services | ☐ | ☐ | ☐ |
| Isolation facilities | ☐ | ☐ | ☐ |
| Intensive/critical care | ☐ | ☐ | ☐ |
| Ambulatory/field service vehicles | ☐ | ☐ | ☐ |
| Necropsy facilities | ☐ | ☐ | ☐ |

Effective college and/or institutional biosecurity officer/committee and safety officers responsible for clinical and research facilities in place
Evidence that building materials, especially flooring and wall surfaces are in good repair, promote animal and personnel safety, and can be adequately disinfected for infectious disease control

Operational policies and procedures are posted in appropriate places.

Protocols (SOP’s) for Isolation units or other biosecurity areas are posted or readily accessible

If Isolation units do not have separate external entrances, appropriate protocols for admission of isolation patients are in place

Evidence of appropriate controlled substance management and auditing in the hospital pharmacy, at distributed dispensing sites in clinical facilities and in ambulatory facilities, including policies related to student access to/use of controlled substances

Evidence of safe handling of chemotherapeutic/cytotoxic drugs

Evidence of regular monitoring of radiation safety

Evidence of regular monitoring (at least annually) of formaldehyde levels in anatomy laboratories and compliance with OSHA or other state regulations

Evidence that learning and clinical facilities are accessible to disabled students

Comments:

Facilities for the housing of animals used for teaching and research shall be sufficient in number, properly constructed, and maintained in a manner consistent with accepted animal welfare standards. Adequate teaching, laboratory, research, and clinical equipment must be available for examination, diagnosis, and treatment of all animals used by the college.

Intent: Teaching and research animals must be maintained and cared for in accordance with the accepted animal welfare standards including the Animal Welfare Act

What to look for: Evidence that the housing and care provided for teaching and research animals is consistent with the Animal Welfare Act and other accepted animal welfare standards, for example, an appropriately functioning Institutional Animal Care and Use Committee (IACUC) is in place, favorable USDA inspection reports, and AAALAC accreditation (not required). Evidence that the college/institutional biosecurity/safety committee is appropriately structured and functions effectively are covered above.

Housing for teaching and research animals provides sufficient space that is properly constructed and maintained in accordance with accepted animal welfare standards.

Adequate teaching, laboratory, research, and clinical equipment are available for examination, diagnosis, and treatment of all animals used by the college.

Adequate safety and facilities management plans are in place and followed.

Comments:
Overall, can the college be said to be in compliance with Standard 3?  

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**Standard 4, Clinical Resources**

*Normal and diseased animals of various domestic and exotic species must be available for instructional purposes, either as clinical patients or provided by the institution. While precise numbers are not specified, in-hospital patients and outpatients including field service/ambulatory and herd health/production medicine programs are required to provide the necessary quantity and quality of clinical instruction. The program must be able to demonstrate, using its assessment of clinical competency outcomes data, that the clinical resources are sufficient to achieve the stated educational goals and mission.*

*It is essential that a diverse and sufficient number of surgical and medical patients be available during an on-campus clinical activity for students’ clinical educational experience. Experience can include exposure to clinical education at off-campus sites, provided the college reviews and regularly monitors these clinical experiences and educational outcomes. Further, such clinical experiences should occur in a setting that provides access to subject matter experts, reference resources, modern and complete clinical laboratories, advanced diagnostic instrumentation and ready confirmation (including necropsy). Such examples could include a contractual arrangement with nearby practitioners who serve as adjunct faculty members and off-campus field practice centers. The teaching hospital(s) shall provide nursing care and instruction in nursing procedures. A supervised field service and/or ambulatory program must be maintained in which students are offered multiple opportunities to obtain clinical experience under field conditions. Under all situations students must be active participants in the workup of the patient, including physical diagnosis and diagnostic problem oriented decision-making.*

**Intent:** The clinical resources available through the veterinary college should be sufficient to ensure the breadth and quality of outpatient and inpatient teaching. These resources include adequate numbers and types of patients (e.g., species, physiologic status, intended use) and physical resources in appropriate learning environments.

**What to look for:** Documentation and analysis of caseload in the Teaching Hospital, Ambulatory/Field Service, Herd/Flock Programs, and Off-campus Facilities for the past five years; Analysis must demonstrate the availability of adequate, sustainable numbers of diseased animals to fulfill the teaching, research, and service mission. The number and variety of normal animals must be consistent with student enrollment. Assess the college response to increasing/decreasing medical resources and efforts to maximize the teaching value of each case across the curriculum. Core off-campus clinical sites must provide an appropriate learning environment and be regularly reviewed and monitored.

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<tr>
<td>There are adequate numbers of normal and diseased animals; analysis of five-year caseload data are consistent with student enrollment</td>
<td>Y</td>
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<tr>
<td>There is an adequate mix of domestic and exotic animal species</td>
<td>Y</td>
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<tr>
<td>There are adequate numbers of in-hospital patients and outpatients</td>
<td>Y</td>
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<tr>
<td>There is adequate access to a reasonable number of surgical and medical patients</td>
<td>Y</td>
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<tr>
<td>There are adequate number of patients available for instructional purposes, either as clinical patients or provided by the institution.</td>
<td>Y</td>
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Core off-campus clinical experiences occur in settings/field practice centers that provide:

- Consistent and appropriate access to subject matter expertise.  
  - Y MD N  

- Adequate reference resources  
  - Y MD N  

- Access to modern and complete clinical laboratories  
  - Y MD N  

- Sufficient access to advanced diagnostic instrumentation and ready confirmation (including necropsy)  
  - Y MD N  

- Appropriate numbers of adjunct faculty members  
  - Y MD N  

Students have multiple opportunities to obtain clinical experience under field conditions.  
  - Y MD N  

Students are active participants in the workup of the patient including physical diagnosis and diagnostic problem-oriented decision making and client communication.  
  - □ □ □

Comments:

**Medical records must be comprehensive and maintained in an effective retrieval system to efficiently support the teaching, research, and service programs of the college.**

Intent: Comprehensive, retrievable medical records are an essential instructional resource for student learning and fulfillment of the research and service mission. Although not specifically mentioned in the P&P, it is understood that the medical records include the record keeping and tracking of controlled substances. This is considered under pharmacy in Standard 3 but should be documented within this standard as well.

What to look for: Evidence of effective, retrievable medical recordkeeping across clinical service areas.

- A comprehensive medical records system is maintained and kept in an effective retrieval system for major species  
  - Y MD N  

- Students have the opportunity to learn the use of an electronic medical records system.  
  - Y MD N  

Comments:

Overall, can the college be said to be in compliance with Standard 4?  
  - YES MD NO  

Standard 5, Information Resources

Timely access to information resources and information professionals must be available to students and faculty at core training sites. The college must have access to up-to-date human, digital, and physical resources for retrieval of relevant veterinary and supporting literature and for development of instructional materials, and provide appropriate training and technical support for students and faculty. The program must
**Standard 5, Information Technology Resources for Faculty and Students**

*be able to demonstrate, using its outcomes assessment data, that students are competent in retrieving, evaluating, and applying information through the use of electronic and other appropriate information technologies.*

**Intent:** Timely access to information resources and information professionals is essential to veterinary medical education, research, public service, and continuing education.

**What to look for:** Evidence that the college provides adequate access to the human, digital, and physical resources for students, faculty, staff, and graduate students for information retrieval and the development of instructional materials.

| Access to information resources for students and faculty is adequate on and off-campus | ☐ ☐ ☐ ☐ |
| The qualifications of personnel who support learning and information technology resources for faculty and students are adequate | ☐ ☐ ☐ ☐ |
| Access to personnel who support learning and information technology resources for faculty and students is adequate | ☐ ☐ ☐ ☐ |
| Access to qualified personnel necessary for development of instructional materials is adequate | ☐ ☐ ☐ ☐ |
| The college provides adequate access to the information technology resources necessary for development of instructional materials. | ☐ ☐ ☐ ☐ |
| The college provides adequate resources (training, support) for students to improve their skills in accessing and evaluating information relevant to veterinary medicine from sources in various media | ☐ ☐ ☐ ☐ |
| Students demonstrate skills in retrieving, evaluating, and applying information through information technologies | ☐ ☐ ☐ ☐ |
| Current plans for improvement are adequate, if indicated. | ☐ ☐ ☐ ☐ |

**Comments:**

**Overall, can the college be said to be in compliance with Standard 5?**

*YES MD NO* ☐ ☐ ☐ ☐

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**Standard 6, Students**

*The number of professional degree students, DVM or equivalent, must be consistent with the resources and the mission of the college. The program must be able to demonstrate, using its outcomes assessment data, that the resources are sufficient to achieve the stated educational goals for all enrolled students.*

**Intent:** Accredited colleges must have sufficient resources to accommodate the number of students enrolled and meet the stated mission.

**What to look for:** Evidence that the facilities, number of faculty and staff, and pre-clinical/clinical resources are sufficient to meet student needs. Analyze five-year trends for enrollment, the percent of minorities, and the number of students in other educational programs offered by the college.

| Facilities, number of faculty and staff, and pre-clinical/clinical resources are sufficient to meet student needs | ☐ ☐ ☐ ☐ |
### Comments:

**Colleges should establish post-DVM/VMD programs such as internships, residencies and advanced degrees (e.g., MS, PhD), that complement and strengthen the professional program and not adversely affect the student experience.**

<table>
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Intent: Post-DVM training programs and the presence of interns, residents, and graduate students enrich the learning environment for professional students

What to look for: The number of post-DVM students over the last five years and evidence of appropriate integration of interns, residents, and graduate students into the education of professional students. On clinical rotations, there should be sufficient caseload to support the education of professional students and interns and residents with appropriate balance between professional student and intern exposure to, and opportunity to participate in, entry-level clinical skills/competencies.

College has established post-DVM/VMD programs such as internships, residencies and advanced degrees (e.g., MS, PhD), that complement and strengthen the professional program and do not adversely affect the student experience

### Comments:

**Student support services must be available within the college or university. These must include, but are not limited to, appropriate services to support student wellness and to assist with meeting the academic and personal challenges of the DVM program; support for students with learning or other disabilities; and support extra-curricular activities relevant to veterinary medicine and professional growth.**

The college or parent institution must provide information and access to counseling services regarding financial aid, debt management, and career advising. Career advising must include selection of clinical experiences.

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Intent: To ensure student support services are readily available and adequate.

What to look for: Evidence that the college provides adequate student services for the number of students enrolled, including registration, testing, mentoring/advising, counseling (career and mental health), tutoring, services for students with disabilities, financial aid, debt management, peer assistance, and clubs and organizations

Adequate student support services are available within the college or university, including mental health counseling, career, and financial advising

### Comments:

**The college must promote an inclusive institutional climate that fosters diversity within the student body, consistent with applicable law.**

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Intent: Accredited colleges must demonstrate through policies, procedures, and activities that a diverse student body is valued.

What to look for: Evidence that the college has policies and procedures in place that are enforced to promote diversity and inclusion within the student body.

The college has policies and procedures in place that are enforced to promote diversity within the student body.

### Comments:
In relationship to enrollment, the colleges must provide accurate information for all advertisements regarding the educational program by providing clear and current information for prospective students. Further, printed catalog or electronic information, must state the purpose and goals of the program, provide admission requirements and procedures, state degree requirements, present faculty descriptions, provide an accurate academic calendar, clearly state information on educational cost and debt risk, for the college. The college must provide information on procedures for withdrawal including the refund of student’s tuition and fees as allowable. Information available to prospective students must include relevant requirements for professional licensure.

Intent: Accredited colleges must provide accurate, complete information for recruiting purposes. The college catalog should provide accurate admission requirements and procedures, withdrawal processes, financial aid information, licensure requirements, and an accurate academic calendar.

What to look for: Evidence the college provides accurate, complete information for recruiting purposes on its web site, catalog, and advertisements covering area listed below

<table>
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<tr>
<th>Y</th>
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College provides clear and current information for prospective students

Printed catalog or electronic information:

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States the purpose and goals of the program

Provides admission requirements and procedures

States degree requirements

Presents faculty descriptions

States information on tuition and fees

States procedures for withdrawal

Gives necessary information for financial aid programs

Provides an accurate academic calendar

Includes relevant requirements for licensure

Comments:

Each accredited college must provide a mechanism for students, anonymously if they wish, to offer suggestions, comments, and complaints regarding compliance of the college with the Standards of Accreditation. These materials shall be made available to the Council annually.
Intent: This is a USDE recognition requirement. It represents another method to help ensure that the evidence gathered for accreditation decisions is complete.

What to look for: A reasonable mechanism for students to comment anonymously regarding the college’s compliance with the 11 Standards of Accreditation. If comments have been received — how has the College responded?

College provides a mechanism for students, including anonymous means, if students wish, to offer suggestions, comments, and complaints regarding compliance of the college with the Standards of Accreditation.

Student comments have been made available to the Council annually

Comments:

Overall, can the college be said to be in compliance with Standard 6?

Standard 7, Admission

The college must have a well-defined and officially stated admissions policy and a process that ensures a fair and consistent assessment of applicants.

Intent: Accredited colleges are expected to have a fair and unbiased admission policy (selection process and minimum criteria) that is clearly stated and easily accessible for prospective students.

What to look for: The admissions process should be standardized as much as possible to ensure applicants are evaluated fairly and consistently. The admissions process and minimum criteria for acceptance must be clearly stated in the college catalogue and web site.

The college has a well-defined admissions policy that is fair and unbiased

The selection process is fair and unbiased

Academic performance criteria indicate reasonable potential for successful completion of the professional curriculum

The admissions policy is clearly stated and readily accessible

Comments:

The policy must provide for an admissions committee, a majority of whom must be full-time faculty members. The committee must make recommendations regarding the students to be admitted to the professional curriculum upon consideration of applications of candidates who meet the academic and other requirements as defined in the college’s formal admission policy.

Intent: A properly appointed faculty committee is expected to be responsible for developing and implementing the admissions process and criteria, and making recommendations regarding the candidates admitted to college.
What to look for: The majority of the admissions committee must be full-time faculty members. Adequate training should be provided for committee members and others involved in the selection process to ensure applicants are evaluated fairly and consistently. Rotating terms for committee members is considered best practice. Recommendations for admission to the college are made by the admissions committee according to the stated criteria. The admissions committee should periodically evaluate the success of the admissions process.

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<th>Policy</th>
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<tr>
<td>Admission policy provides for an admissions committee</td>
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<tr>
<td>Majority of the admission committee are full-time faculty members.</td>
<td>Y</td>
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<tr>
<td>An adequate training program is in place to ensure the admissions</td>
<td>Y</td>
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<td>Committee makes recommendations regarding the students to be</td>
<td>Y</td>
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<tr>
<td>Candidates recommended meet the academic and other requirements</td>
<td>Y</td>
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<tr>
<td>Five-year trends for applicant/position and offers made/acceptances</td>
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<tr>
<td>Five-year trends for absolute and relative student attrition are</td>
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<td>The admissions committee periodically assesses the success of the</td>
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<td>The college must demonstrate its commitment to diversity and</td>
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<td>The college’s admissions policies must be non-discriminatory, as</td>
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<td>Subjects for admission must include those courses prerequisite to the</td>
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<tr>
<td>The goal of pre-veterinary education shall be to provide a broad</td>
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Intent: The college must demonstrate its commitment to a diverse student body through its admissions policies and procedures.

What to look for: A commitment to a diverse student body, as is consistent with applicable laws.

The admissions policies and procedures demonstrate a commitment to a diverse and inclusive student body.  

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Intent: The goal of pre-veterinary education shall be to provide a broad base upon which professional education may be built, leading to lifelong learning with continued professional and personal development.

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What to look for: The pre-veterinary curriculum includes requirements to prepare students for the professional curriculum, as well as a broad base for professional and personal development and lifelong learning.

Subjects for admission includes courses prerequisite to the professional program in veterinary medicine

Subjects for admission include courses that contribute to a broad general education.

Comments:

Factors other than academic achievement must be considered for admission criteria.

Intent: Effective veterinarians have a number of attributes unrelated to academic performance. Accredited colleges are required to consider other factors that contribute to the ability of their graduates to be successful members of the profession.

What to look for: Non-academic factors must be included in the selection process, for example, experience with animals and an understanding of veterinary medicine, effective interpersonal skills, leadership experience, economically disadvantaged background, etc.

Factors other than academic achievement are considered for admission

Selected candidates meet academic and non-academic requirements as defined in the college's formal admission policy

Transfer policies are academically appropriate and the five-year trend for admittance is reasonable based on available resources.

Comments:

Overall, can the college be said to be in compliance with Standard 7?

Yes MD No

Standard 8, Faculty

Faculty numbers and qualifications must be sufficient to deliver the educational program and fulfill the mission of the college.

Intent: Accredited veterinary colleges must have a cohort of faculty members with the qualifications and time needed to deliver the curriculum and to meet the other needs and mission of the college.

What to look for: Evidence that the number of faculty with appropriate qualifications in each functional area are adequate to deliver the didactic and clinical curriculum and fulfill the mission of the college.

The curricular responsibilities of faculty lost over the last five years have been replaced through faculty renewal, other appropriate personnel, or mitigated by curricular change.

Faculty numbers and qualifications in each functional area are sufficient to deliver the educational program and fulfill the mission of the college.
Participation in scholarly activities is an important criterion in evaluating the faculty and the college. The college shall give evidence that it utilizes a well-defined and comprehensive program for the evaluation of the professional growth, development, and scholarly activities of the faculty.

Intent: A comprehensive faculty evaluation program stimulates continuous professional development

What to look for: Evidence that promotion and tenure policies and procedures and annual performance review process include consideration of professional growth, development, and scholarly activity, for example, student and peer course evaluations, publications, research funding, etc.

The college utilizes a well-defined and comprehensive program for the evaluation of professional growth, development, and scholarly activities of the faculty  
Y    MD   N
☐   ☐   ☐

Appropriate weight is assigned to teaching, research and service activities for career advancement  
Y    MD   N
☐   ☐   ☐

Academic positions must offer the security and benefits necessary to maintain stability, continuity, and competence of the faculty.

Intent: Accredited colleges must provide adequate security and benefits to maintain a stable group of core faculty to provide continuity and assure ongoing faculty competence

What to look for: Evidence that security and benefits are adequate to attract and retain competent faculty, for example, competitive salary and benefit packages, adequate start-up funds, support for professional activities, such as, scientific meetings, invited presentations, sabbatical leave, development in methods of effective teaching.

Faculty turnover the last five years is within normal limits (typically < 10%)  
Y    MD   N
☐   ☐   ☐

Adequate professional development opportunities are available for faculty growth  
Y    MD   N
☐   ☐   ☐

Academic positions offer adequate security and benefits to attract and retain qualified faculty  
Y    MD   N
☐   ☐   ☐

The college must cultivate a diverse faculty through its hiring policies and retention practices, consistent with applicable law. The college must demonstrate its ongoing efforts to achieve parity in advancement opportunities and compensation

Intent: Accredited colleges must demonstrate a commitment to diversity among the faculty.

What to look for: Policies and procedures in recruiting and retention activities that promote a diverse faculty.

The college demonstrates that it values faculty diversity through its recruitment and retention policies  
Y    MD   N
☐   ☐   ☐
Part-time faculty, residents, and graduate students may supplement the teaching efforts of the full-time permanent faculty if appropriately integrated into the instructional program.

**Intent:** To ensure adequate full-time, permanent faculty members are present to effectively supervise teaching assignments of part-time faculty, residents, and interns. Whereas colleges may need to engage part-time faculty or locums for didactic teaching or clinical rotations, to meet curricular objectives, it is important to assess plans for hiring permanent faculty to provide this instruction, especially in core disciplines, so that there is stability, so students have regular access to this disciplinary expertise.

What to look for: Evidence that full-time, permanent faculty provide adequate supervision of part-time faculty, residents, and interns. If part-time faculty are used, evidence that there is stability/consistency of curricular contributions and that there are plans to replace these faculty with permanent faculty. If residents and graduate students are used in instruction of professional students, evidence that they are appropriately mentored in effective teaching and not solely responsible for student grades for didactic and clinical courses/rotations.

Full-time, permanent faculty ensure supplementary teaching efforts by part-time faculty, residents, and graduate students are appropriately integrated into the instructional program  

The amount of the core curriculum delivered by part-time faculty does not impact the effectiveness or quality of the educational program and that student access to this disciplinary expertise is not compromised

**Comments:**

Overall, can the college be said to be in compliance with Standard 8?

**Standard 9, Curriculum**

The curriculum shall extend over a period equivalent to a minimum of four academic years, including a minimum of one academic year of hands-on clinical education. The curriculum and educational process should initiate and promote lifelong learning in each professional degree candidate.

**Intent:** Adequate coverage of the material necessary to educate a competent veterinarian requires a minimum of four academic years, including at least one academic year of hands-on clinical education.

What to look for: The curriculum extends an equivalent of four academic years, including a minimum of one academic year of hands-on, clinical education

The curriculum extends an equivalent of four academic years; including a minimum of one academic year of hands-on, clinical education

**Comments:**

The curriculum in veterinary medicine is the purview of the faculty of each college, but must be managed centrally based upon the mission and resources of the college. There must be sufficient flexibility in curriculum planning and management to facilitate timely revisions in response to emerging issues, and advancements in knowledge and technology. The curriculum must be guided by a college curriculum committee. The curriculum as a whole must be reviewed at least every seven (7) years. The majority of the members of the curriculum committee must be full-time faculty. Curriculum evaluations should include the gathering of sufficient
Intent: The curriculum must be established by a competent faculty and managed centrally by the dean’s office in conjunction with an appropriately configured faculty curriculum committee according to the stated mission of the college. The curriculum requires regular review and management by the curriculum committee based on the collection and analysis of sufficient qualitative and quantitative evidence.

What to look for: The curriculum is regularly reviewed and managed by an appropriately configured faculty curriculum committee (e.g., staggered terms of appointment or rotating membership). A holistic review of the curriculum that has occurred within the last seven years or is currently in review. This does not require the curriculum to be revised, but that all facets of the curriculum, as one unit, is reviewed Curricular review should include the collection and analysis of sufficient qualitative and quantitative data to ensure curricular revisions promote instructional quality and effectiveness and include current concepts and principles necessary to meet societal needs.

The majority of the members of the curriculum committee are full-time faculty.

The curriculum is regularly reviewed and managed (revised), as indicated, by the dean’s office in conjunction with an appropriately configured college curriculum committee.

Adequate process for assessing curricular overlaps, redundancies, omissions

The curriculum, as a whole has been reviewed within the last seven years.

Comments:

The curriculum must provide:

a. an understanding of the central biological principles and mechanisms that underlie animal health and disease from the molecular and cellular level to organismal and population manifestations.

b. scientific, discipline-based instruction in an orderly and concise manner so that students gain an understanding of normal function, homeostasis, pathophysiology, mechanisms of health/disease, and the natural history and manifestations of important animal diseases, both domestic and foreign.

c. instruction in both the theory and practice of medicine and surgery applicable to a broad range of species. The instruction must include principles and hands-on experiences in physical and laboratory diagnostic methods and interpretation (including diagnostic imaging, diagnostic pathology, and necropsy), disease prevention, biosecurity, therapeutic intervention (including surgery and dentistry), and patient management and care (including intensive care, emergency medicine and isolation procedures) involving clinical diseases of individual animals and populations. Instruction should emphasize problem solving that results in making and applying medical judgments.

d. instruction in the principles of epidemiology, zoonoses, food safety, the interrelationship of animals and the environment, and the contribution of the veterinarian to the overall public and professional healthcare teams.

e. opportunities for students to learn how to acquire information from clients (e.g. history) and about patients (e.g. medical records), to obtain, store and retrieve such information, and to communicate effectively with clients and colleagues.
f. **opportunities throughout the curriculum for students to gain an understanding of professional ethical, legal, economic, and regulatory principles related to the delivery of veterinary medical services; personal and business finance and management skills; and gain an understanding of the breadth of veterinary medicine, career opportunities and other information about the profession.**

g. **Opportunities throughout the curriculum for students to gain and integrate an understanding of the important influences of diversity and inclusion in veterinary medicine, including the impact of implicit bias related to an individual’s personal circumstance on the delivery of veterinary medical services.**

h. **knowledge, skills, values, attitudes, aptitudes and behaviors necessary to address responsibly the health and well-being of animals in the context of ever-changing societal expectations.**

i. **fair and equitable assessment of student progress. The grading system for the college must be relevant and applied to all students in a fair and uniform manner.**

Intent: Accredited veterinary colleges must prepare entry level veterinarians with sufficient understanding of basic biomedical sciences, clinical sciences, and effective clinical and professional skills to meet societal needs

What to look for: Evidence that the curriculum provides all the curricular elements listed in the standard.

<table>
<thead>
<tr>
<th>Stated curricular objectives are appropriate and clearly integrated into individual courses</th>
<th>Y    MD   N</th>
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<tr>
<th>The curricular digest indicates courses and rotations as a whole provide appropriate rigor and sequence to meet curricular objectives and the mission of the college</th>
<th>Y    MD   N</th>
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<th>Curricular changes since the last accreditation site visit reflect appropriate curricular review and management</th>
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<tr>
<th>Self-identified curricular weaknesses have been or are being addressed by the curriculum committee in a timely manner</th>
<th>Y    MD   N</th>
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<tr>
<th>Preceptor and externship programs are effectively managed and evaluated by faculty to ensure educational objectives are met</th>
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<tr>
<th>Curriculum content provides current concepts and principles that underlie animal health and disease</th>
<th>Y    MD   N</th>
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<th>Curriculum covers mechanisms from the molecular and cellular level to organismal and population manifestations</th>
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<tr>
<th>Evidence of students’ understanding of normal function, homeostasis, pathophysiology, mechanisms of health/disease, and the natural history and manifestations of important domestic animal diseases is adequate</th>
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<th>Evidence of students’ understanding of normal function, homeostasis, pathophysiology, mechanisms of health/disease, and the natural history and manifestations of important foreign animal diseases is adequate</th>
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Curricular delivery is rooted in scientific, discipline-based instruction

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<tr>
<th>Evidence of high quality and effective instruction in theory and practice of medicine and surgery applicable to a broad range of species is adequate</th>
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Instruction includes principles and hands-on experience in physical and laboratory diagnostic methods and interpretation (including diagnostic imaging, diagnostic pathology, and necropsy) | Y    MD   N   |
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</table>
Instruction includes principles and hands-on experience in disease prevention

Y MD N

Instruction includes principles and hands-on experience in biosecurity

Y MD N

Instruction includes principles and hands-on experience in therapeutic intervention (including surgery)

Y MD N

Instruction includes patient management and care (including intensive care, emergency medicine and isolation procedures)

Y MD N

Instruction includes principles and hands-on experience involving clinical diseases of individual animals and populations

Y MD N

Instruction emphasizes problem-solving that results in making and applying medical judgments

Y MD N

Instruction includes principles of epidemiology, zoonoses, food safety, the interrelationship of animals and the environment, and the contribution of the veterinarian to the overall public and professional healthcare teams

Y MD N

Instruction allows for opportunities for students to learn how to acquire information from clients (e.g. history) and about patients (e.g. medical records).

Y MD N

Instruction allows for opportunities to obtain, store and retrieve medical records information, and to communicate effectively with clients and colleagues.

Y MD N

Opportunities throughout the curriculum for students to gain an understanding of professional ethical, legal, economic, and regulatory principles related to the delivery of veterinary medical services; personal and business finance and management skills; and gain an understanding of the breadth of veterinary medicine, career opportunities and other information about the profession.

Y MD N

Opportunities throughout the curriculum for students to gain an understanding of the influence of diversity and inclusion in veterinary medicine, and the impact of implicit bias related to personal circumstance in the delivery of veterinary medical services.

Y MD N

Opportunities throughout the curriculum for students to gain an understanding of the breadth of veterinary medicine, career opportunities and other information about the profession.

Y MD N

Curriculum provides for knowledge, skills, values, attitudes, aptitudes and behaviors necessary to address responsibly the health and well-being of animals in the context of ever-changing societal expectations

Y MD N

Assessment of student progress is fair and equitable.

Y MD N

Adequate procedures in place to uphold academic standards

Y MD N

The grading system is relevant and applied to all students in a fair and uniform manner.

Y MD N

Comments:

YES MD NO
Overall, can the college be said to be in compliance with Standard 9?

**Standard 10, Research Programs**

The college must maintain substantial research activities of high quality that integrate with and strengthen the professional program. The college must demonstrate continuing scholarly productivity and must provide opportunities for any interested student in the professional veterinary program to be exposed to or participate in on-going high-quality research. All students must receive training in the principles and application of research methods and in the appraisal and integration of research into veterinary medicine and animal health.

Intent: The research standard serves to ensure student exposure to performance of high-quality research and ability to acquire, evaluate, and use new knowledge. The development and maintenance of a community of scholars enhances the educational experience for students. DVM students must be introduced to how new knowledge is developed and disseminated and have access to participation in coursework and career development in research.

What to look for: The existence of a college research program that is adequate in scope and quality to expose students to high quality research. Examples of learning objectives may include acquisition and evaluation of scientific literature, experimental and non-experimental design, critical analysis of data, scientific writing including writing of research proposals and submission of manuscripts for publication, and hands-on experience in bench, clinical, or field research.

Objective metrics indicate substantial, high quality level of faculty research activity, for example:

- Number of individual faculty members within each department involved in research (total research FTE)
- Number of publications in refereed scientific journals, book chapters, case-reports
- Regular participation and presentation of original research in scientific meetings, poster sessions, publication of abstracts
- Involvement in external research panels, commissions, and advisory or editorial boards
- Number and amount of competitive, extramural research funding
- National and international research awards received

D.V.M. program learning objectives demonstrate emphasis on which of the following:

- Acquisition and evaluation of scientific literature
- Experimental and non-experimental research design
- Critical analysis of data
- Scientific writing

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<thead>
<tr>
<th>Objective</th>
<th>YES</th>
<th>MD</th>
<th>NO</th>
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<tbody>
<tr>
<td>Number of individual faculty members within each department involved in research (total research FTE)</td>
<td>☐</td>
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<tr>
<td>Number of publications in refereed scientific journals, book chapters, case-reports</td>
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<td>Regular participation and presentation of original research in scientific meetings, poster sessions, publication of abstracts</td>
<td>☐</td>
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<tr>
<td>Involvement in external research panels, commissions, and advisory or editorial boards</td>
<td>☐</td>
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<tr>
<td>Number and amount of competitive, extramural research funding</td>
<td>☐</td>
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<td>National and international research awards received</td>
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<tr>
<th>Objective</th>
<th>YES</th>
<th>NO</th>
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<tr>
<td>Acquisition and evaluation of scientific literature</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>Experimental and non-experimental research design</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>Critical analysis of data</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>Scientific writing</td>
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</table>
Students have had opportunities to do which of the following:

- Write research proposals
  - YES ☐ NO ☐
- Submit manuscripts for publication
  - YES ☐ NO ☐
- Hands-on experience in bench, clinical, or field research
  - YES ☐ NO ☐
- Interaction with graduate students
  - YES ☐ NO ☐

Evidence that students learn to acquire, evaluate, and use new knowledge

Evidence of student involvement in research after graduation

Adequate student exposure to performance of high-quality research
  - Y ☐ MD ☐ N ☐

**Comments:**

Overall, can the college be said to be in compliance with Standard 10?

**Standard 11, Outcomes Assessment**

Outcomes of the veterinary medical degree program must be measured, analyzed, and considered to improve the program. New graduates must have the basic scientific knowledge, skills, and values to provide entry-level health care, independently, at the time of graduation. Student achievement must be included in outcome assessment. Processes must be in place to remediate students who do not demonstrate competence in one or more of the nine competencies.

The college should have in place a system to gather outcomes data on recent graduates to ensure that the competencies and learning objectives in the program result in relevant entry level competencies.

The college must have processes in place whereby students are observed and assessed formatively and summatively, with timely documentation to assure accuracy of the assessment for having attained each of the following competencies:

1. comprehensive patient diagnosis (problem solving skills), appropriate use of diagnostic testing, and record management
2. comprehensive treatment planning including patient referral when indicated
3. anesthesia and pain management, patient welfare
4. basic surgery skills and case management
5. basic medicine skills and case management
6. emergency and intensive care case management
7. understanding of health promotion and biosecurity, prevention and control of disease including zoonoses, and principles of food safety
8. ethical and professional conduct; communication skills including those that demonstrate an understanding and sensitivity to how clients’ diversity and individual circumstance can impact health care
9. critical analysis of new information and research findings relevant to veterinary medicine.

The Council on Education expects that 80% or more of each college’s graduating senior students sitting for the NAVLE will have passed at the time of graduation.*

*Colleges that do not meet this criterion will be subjected to the following analysis. The Council will calculate a 95% exact binomial confidence interval for the NAVLE scores for colleges whose NAVLE pass rate falls below 80%. Colleges with an upper limit of an exact 95% binomial confidence interval less than 85% for two successive years in which scores are available will be placed on Probationary Accreditation. Colleges with an upper limit of an exact 95% binomial confidence level less than 85% for four successive years in which scores are available will, for cause, be placed on Terminal Accreditation. If no program graduates take the NAVLE, the Council will use other student educational outcomes in assessing compliance with the standard including those listed in 12.11.1.

Intent:
Outcomes of the DVM program must be measured, analyzed, and acted upon, as needed, to maintain compliance with the standards of accreditation and promote continuous program improvement.

What to look for:
Student achievement during the pre-clinical and clinical curriculum and after graduation must be included in outcome assessment. Evidence produced through outcomes assessment data collection and analysis must demonstrate that new graduates have the basic scientific knowledge, skills, and values to provide entry-level health care, independently, at the time of graduation.

Learning objectives for each of the nine listed competencies and a summary of the analysis of evidence-based data collected for each of the nine competencies must demonstrate graduates are prepared for entry-level practice. Evidence that there is a process to provide remediation for those students who have not demonstrated competence in one or more of the nine competencies. Evidence of student learning outcomes for the nine clinical competencies must be obtained and that students are observed and assessed formatively and summatively. Evidence that outcomes assessment results have been used to improve the curriculum are required for compliance.

Outcome assessment includes evidence of student achievement during the:

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<tr>
<td>Pre-clinical years</td>
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<td>Clinical years</td>
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<td>After graduation</td>
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Outcome assessment includes evidence that students and graduates at the time of graduation, have:

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<tr>
<td>Basic scientific knowledge</td>
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<td>Entry-level clinical skills</td>
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Values to provide entry-level health care independently

Direct and indirect evidence exists for student competency in:

Comprehensive patient diagnosis (problem solving skills)

Appropriate use of clinical laboratory testing

Record management

Comprehensive treatment planning including patient referral when indicated

Patient welfare

Anesthesia and pain management

Basic surgery skills, experience, case management

Basic medicine skills, experience, case management

Emergency and intensive care case management

Health promotion, disease prevention/biosecurity

Zoonoses and food safety

Client communications

Ethical conduct

Communication skills including those that demonstrate an understanding and sensitivity to how clients’ diversity and individual circumstance can impact health care

Critical analysis of new information and research findings relevant to veterinary medicine

Evidence that students have been assessed formatively and summatively.

Evidence of a process for remediation of students who have not demonstrated attainment of each of the clinical competencies.
| Evidence of plan to reverse negative trend(s) if and when necessary | Y | MD | N |
| Evidence of NAVLE School Score Report within expected range of NAVLE passing percentages | Y | MD | N |
| If applicable, adequate explanation and corrective remediation measures for decrease in NAVLE passing percentages | Y | MD | N |
| N/A | ☐ | ☐ | ☐ |
| Evidence of assessments of educational preparedness and employment satisfaction of: | Y | MD | N |
| Graduating seniors | ☐ | ☐ | ☐ |
| Alumni at some post-graduation point. | Y | MD | N |
| Employers of graduates | Y | MD | N |
| Program Outcomes: | Y | N |
| Five-year trends in student attrition rates within reason | ☐ | ☐ | ☐ |
| If applicable, adequate explanation and corrective remediation measures for increase in student attrition rates | Y | N |
| N/A | ☐ | ☐ | ☐ |
| Five-year trends in one-year post-graduation employment rates | Y | N |
| If applicable, adequate explanation and corrective remediation measures for decrease in employment rates | Y | N |
| N/A | ☐ | ☐ | ☐ |
| Evidence of assessments of faculty, instructors, interns, residents | Y | MD | N |
| Evidence of assessments of adequacy of clinical resources, facilities and equipment | Y | MD | N |
| Institutional Outcomes | Y | MD | N |
| Evidence of evaluation of college progress | ☐ | ☐ | ☐ |
| Adequacy of resources and organizational structure to meet the educational purposes | Y | MD | N |
| Appropriateness of outcomes assessed that are meaningful for the overall educational process | Y | MD | N |
| Evidence that outcome findings are used by the college to improve the educational program | Y | MD | N |

Comments:
Overall, can the college be said to be in compliance with Standard 11?

[☐ YES  ☐ MD  ☐ NO]
21.10 Appendix J – COE Code of Conduct

Council on Education Code of Conduct

The code of conduct for Council on Education members is defined in the Accreditation Policies and Procedures of the AVMA Council on Education (COE Manual). The COE manual is grounded in the recognition guidelines of the US Department of Education and Council on Higher Education Accreditation, and best practices published by the Association of Specialized and Professional Accreditors. Council members are expected to adhere to the COE code of conduct at all times. Failure to do so may result in measures including, but not limited to, a written reprimand or dismissal from the Council.

COE Mission Statement

The mission of the AVMA COE is to use clearly defined Standards of Accreditation and fairly and accurately evaluate DVM (or equivalent) veterinary medical education programs. The Standards are interpreted and applied by the Council to each school/college in relation to its mission. Through the accreditation process the Council is fully dedicated to protecting the rights of the students, assisting the schools/colleges to improve veterinary medical education, and assuring the public that accredited programs provide a quality education. In all its activities, the COE is committed to operate with collegiality, integrity, and confidentiality and will strive to continuously improve the accreditation process.

Integrity

To encourage ongoing confidence in the specialized accreditation process, both the college and the COE must be assured that functions assigned to each entity are clearly understood. The following are some of the areas where special efforts must be made to ensure integrity of the process:

The Council must conform to the AVMA Conflict of Interest Policy at all times, not just during site visits.

During the evaluation process, the Council must evaluate the college only on the Standard Requirements for Accreditation. Application of the standard requirements to all college programs must be unbiased.

The site visit and deliberation toward the assignment of accreditation status must be conducted with the highest ethical standards and confidentiality.

All materials, discussions, and decisions of the Council regarding accreditation must be confidential. In addition to the conflicts of interest listed in the AVMA Conflict of Interest Policy, no Council member will participate in site visits, discussions of interim reports, or discussions of reports of evaluation of any institution about which the member has made comments publicly, verbal or written, for or against the accreditation of that institution.

The Council must recognize college and program diversity when making accreditation decisions.

The Council must inform all appropriate federal, state, university, and college officials of matters related to accreditation in a timely manner.
Confidentiality
To ensure that all matters dealing with accreditation of colleges of veterinary medicine are conducted with integrity and objectivity, the COE has adopted a confidentiality policy. Those who participate in COE activities, including but not limited to elected COE members, non-COE site team members, and appropriate AVMA staff, must maintain the confidentiality of all non-public information relating to accreditation and veterinary education.

In order to provide colleges, accrediting and state agencies, and the public with the most accurate information possible, the COE has adopted specific policies and procedures governing all COE communications. Communications that are not consistent with the COE’s policies and procedures and that have not been approved and issued by the COE are strictly prohibited. All discussions, observations, and documents associated with site visits and accreditation decisions are confidential to the COE and should not be discussed with anyone other than elected COE members, appropriate AVMA staff, the Association of American Veterinary Medical Colleges (AAVMC) observer of the COE, and non-COE site team members when necessary. Information regarding accreditation decisions cannot be shared with any individual or group other than: 1) the university and college through the official report of evaluation, 2) reports to accrediting and state agencies, and 3) the public through official announcements and communications made by the COE chair. Any inquiries made to COE members regarding the accreditation process or about specific programs should be referred to the COE Chair and appropriate AVMA staff.

It is the policy of the COE to ensure that its accreditation decisions are independent and are not subject to interference from any organization or individual. Appropriate AVMA staff and the designated AVMA COE observers may attend COE meetings and provide assistance to the COE as necessary, and shall maintain the confidentiality of all non-public information regarding accreditation decisions. The COE Chair and appropriate AVMA staff may share non-public information regarding accreditation decisions with appropriate AVMA officials in the course of litigation and pursuant to the attorney-client privilege. Should the need arise to consult with other AVMA-affiliated individuals, outside experts, or other consultants, the COE Chair and appropriate AVMA staff shall be consulted beforehand.

In accordance with AVMA policy, all information related to the Council on Education (COE) accreditation of a veterinary medical college is strictly confidential. This includes, but is not limited to, reports of evaluation, letters, self-evaluation and accreditation materials, interim/annual reports, correspondence, and the content of any discussion related to the veterinary medical college or its accreditation. All requests for information related to a specific institution and/or veterinary medical college must be referred to AVMA staff or the respective institution.

Freedom of Information Acts, which may be applicable in a given state, province, or country do not apply to AVMA confidential information related to the accreditation of veterinary medical colleges. Information requested through such acts may be obtained through due process from the respective institution or state/province/country office.

Conduct during COE Meetings
No member of the COE who has an identified conflict of interest shall participate in any way in accrediting decisions. The individual shall leave the room when the report in question is being discussed. In cases where the existence of a conflict of interest is less obvious, it is the responsibility of any Council member who feels a potential conflict of interest exists to consult the COE chair prior to the discussion. The COE chair shall discuss the matter with the Executive Committee, and advise the COE member
whether the conflict is of a nature to warrant that the member recuse himself/herself from the discussion. In addition, any COE member may bring forth concerns to the COE Chair that another member may have a conflict of interest. The Chair and the Executive Committee will discuss the matter with the member for whom there is a perceived conflict, and the Chair will advise the member if it is warranted that the member recuse himself/herself from the discussion. The conflict of interest policy shall be limited to decisions regarding accreditation and shall not infer conflict with other decision-making responsibilities.

Meetings will be conducted according to Roberts Rules of Order as practiced by the AVMA and outlined in the COE Policies and Procedures manual. Council members should feel free to discuss matters openly, but only after being recognized by the Chair. Discussions should be conducted in a collegial fashion, allowing all members to voice their opinions on the matters being discussed.

**Conduct during COE Site Visits**

COE members will be cognizant of any possible conflict of interest, either real or perceived, when being considered as a possible member of a site visit team. Members of the Council, public members, or AVMA staff are not eligible to participate in the site visit if a conflict of interest is identified. The chair of the site visit team appoints a vice-chair, and has the authority to dismiss any member of the team who has a conflict of interest or who becomes disruptive or unmanageable during any phase of the evaluation. Should a conflict of interest or disruption occur with the chair, the vice-chair can assume leadership of the site team with unanimous consent of the remaining members of the team. If the conflict is identified during the site visit and is not covered by the Policies and Procedures manual, neutral members of the team, plus an equal number of members from the college appointed by the dean, will resolve the issue. If the issue is not resolved by the team, the person is dismissed by the chair.

Following a site visit, the dean is asked to inform each faculty member, student, and administrator information how to access an on-line evaluation form. The SRG conducts an analysis of the survey according to frequency and distribution of response, and prepares a report to the COE. The COE Committee on Evaluation studies the report and makes recommendations to the Council regarding changes to be made in the site visit process. During its fall meeting, the COE reviews the recommendation and initiates necessary changes to improve the site visit to ensure that the standards are applied in a consistent and reliable manner.

Site team members are required to conduct themselves professionally, courteously, and with the utmost respect for faculty, students, and other representatives of the college educational program visited as well as fellow site visit team members.

Site team members must:

- Remember that the objectives of accreditation include verifying that an institution or program meets established standards, assisting prospective students in identifying acceptable institutions, creating goals for self-improvement of weaker programs and stimulating a general raising of standards among educational institutions, and involving the faculty and appropriate staff comprehensively in institutional evaluation and planning;
- Keep a positive attitude and not offer negative feedback or other criticism during the site visit;
- Remember that all materials, discussions, deliberations, and reports of the site visit are confidential;
- Refrain from discussing the “state of a college” with anyone other than site team members and appropriate AVMA staff;
• Remain open-minded throughout the evaluation process;
• Carefully study the materials contained in the college self-study to acquire a basic understanding of the college and its operation;
• Be prepared for four and a half days of intense work with long evenings;
• Participate in the discussions, both with college administration and personnel, and in the team deliberations;
• Focus on and uphold the Standards of Accreditation;
• Evaluate the institution regarding its compliance with the Standards of Accreditation, not as compared to other institutions;
• Be alert at all times using all senses;
• Be on time for all functions;
• Be involved in all functions of the site visit;
• Refer all requests for information to the site team chair;
• Enter into discussions by asking good questions, but do not enter involved discussions except for clarification of unclear points;
• Be a good listener, and record observations, and plan on being present during all discussions as appropriate to the schedule;
• Dress in corporate/professional attire for all site visit activities (men are asked to wear suits or coats and ties, and women are asked to wear suits or dresses); and
• Wear AVMA-COE identification badges at all times.

Site team members must not:
• Bring any preconceived ideas about the college to the site visit;
• Have a personal agenda regarding the college, its programs, or people;
• Become separated from the team for any reason unless so assigned by the site team chair;
• Become involved in a confrontation involving any issue of the visit;
• Compare colleges or programs, since each college and its program will be unique and the Council is not attempting to diminish diversity among programs or to hinder or impede innovation;
• Offer judgments on solutions to problems during the course of the visit; these activities are to be reserved for the exit interviews with the college dean and university president;
• Ask questions during about issues not related to the standards.
• Tell “war stories”.

Remember at all times, the site team is a guest of the college and is there to assist the college in meeting its mission and goals.

There is no place in accreditation for adversarial relationships. The college and the Council should proceed with the premise that both parties are dedicated to the common goal of quality in veterinary education. Only through full and open communication and cooperative efforts to correct deficiencies can educational excellence be attained.

Interactions between the Council and the colleges should have a collegial tone, and be based on mutual trust and a desire to arrive at a full understanding of the current status of the educational program of the college. The dean and other administrative officers should be knowledgeable in the definitions of the various levels of accreditation status and the impact of the failure to meet one or more of the standards.
Accreditation decisions made by the COE can have far-reaching consequences for the College. Careful and thoughtful site visit activities and accreditation decision activities must reflect the integrity of the process.

As the days pass, site team members will develop a clear sense of the college’s ability to comply with the standards and its ability to sustain the program within the resources identified. Many of your thoughts will be condensed and entered into the draft of the evaluation report executive sessions of the site team. During the last team executive sessions, the chair will begin to formulate recommendations to be verbally presented to the dean of the college (and his/her designated group) and the president of the university (and his/her designated group). It is important that there is site team consensus with these recommendations. At these two final meetings the site team chair will verbally present the finding of the team. Other team members should not speak until the report is complete, or unless the chair, dean, or president asks for additional information wherein a team member might make a substantial contribution.
Council on Education Code of Conduct

I agree that I have read and understand the above Council on Education Code of Conduct and I agree to comply with all policies and rules contained therein.

Name (printed) ____________________________

Signature _________________________________

Date _________________________________
21.11 Appendix K – AVMA-COE Emergency Conditions Policy

The provisions in the policy only apply under Emergency Conditions, as designated by the AVMA-COE. Emergency Conditions are defined as situations where, in the view of the AVMA-COE, the usual AVMA-COE site visit operations cannot be reasonably undertaken. The first of these emergency conditions occurred in March of 2020, where COVID-19 caused the need for the AVMA-COE to conduct site visits that are audio and/or audiovisual in whole or in part (“virtual site visits”). For the purposes of this policy, examples of emergency conditions include, but are not limited to, pandemics, large scale natural disasters, and military conflicts.

The AVMA-COE, at its discretion, may designate the Emergency Conditions Policy to apply globally, to an individual country, or to a particular region within a country.

The Council will notify communities of interest when the Emergency Conditions Policy is in effect. The Council will reevaluate the plan on an as-needed basis, but no later than at each biannual Council meeting until the policy is no longer in effect.

The Accreditation Policies and Procedures Manual of the AVMA Council on Education remains the primary source document for policies and procedures of the AVMA-COE. The following policy modifications are designed for use in Emergency Conditions only. All other aspects of the AVMA-COE Policies and Procedures Manual continue to apply.

Assignment of an Accreditation Risk Category

Under Emergency Conditions, Colleges will be divided into risk categories, based on the following Accreditation Risk Categories Definitions:

<table>
<thead>
<tr>
<th>Risk Category</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk Category 1</td>
<td>New colleges on the AVMA-COE pathway to receipt of a Letter of Reasonable Assurance.</td>
</tr>
</tbody>
</table>
| Risk Category 2: | Colleges on Provisional Accreditation  
| | Colleges on Probationary Accreditation  
| | Colleges Accredited with Minor Deficiencies  
| | Colleges on Terminal Accreditation  
| | Colleges with focused site visits scheduled by the AVMA-COE |
| Risk Category 3 | Accredited Colleges |
| Risk Category 4 | Colleges outside of the US and Canada seeking accreditation. |

The AVMA-COE will use the assigned risk category under emergency conditions for risk-based contingency planning.

Site Visits

Upon authorization of AVMA Council on Education, a site visit may occur through audio and/or audiovisual means, in whole or part.

The functions of the virtual comprehensive site visit and the virtual focused site visit are the same as those of the comprehensive site visit and the focused site visit. Although the conduct of the virtual site visit is similar to that of the non-virtual site visit, it differs in adjustment to its modalities.
In the case where a virtual site visit is conducted, an in-person site visit will occur at the College within a period not to exceed 18 months.

If site visits are to be conducted virtually, AVMA-COE staff, the Chair of the Site Visit team, and the College will work collaboratively to determine the most appropriate modalities and Site Visit schedule to facilitate the visit.

<table>
<thead>
<tr>
<th>Risk Category</th>
<th>Site Visit</th>
</tr>
</thead>
</table>
| Risk category 1 | The AVMA-COE will work individually with the College to address accreditation issues. Options include:  
  • Delay of the scheduled site visit  
  • Virtual site visit to be followed by an in-person site visit within 18 months  
  The AVMA-COE will discuss the options with the College and decide how to proceed. |
| Risk category 2 | Options are:  
  • Delay of the scheduled site visit  
  • Virtual site visit to be followed by an in-person site visit within 18 months  
  The AVMA-COE will discuss the options with the College and decide how to proceed. |
| Risk category 3 | Options are:  
  • Delay of the scheduled site visit  
  • Virtual site visit to be followed by an in-person site visit within 18 months  
  The AVMA-COE will discuss the options with the College and decide how to proceed. |
| Risk category 4 | Colleges in Risk Categories 1, 2, and 3 will have scheduling preference over Colleges in Risk Category 4. Options are:  
  • Delay of the scheduled site visit |

**Accreditation Interval**

For Colleges in Risk Categories 2 and 3, the Council may grant a temporary Emergency Conditions extension of the accreditation interval by a period not to exceed 18 months. Where a temporary extension to the accreditation interval was granted to a college, the next re-accreditation interval may be, at the discretion of the Council, shortened by a period of time no longer than the extension granted.
Virtual Site Visit Verification Policy

The term ‘Virtual Site Visit Verification’ is used to satisfy the USDE requirement for an in-person site visit after a virtual site visit (“verification visit”). The verification visit may provide additional information to the AVMA-COE, at the discretion of the AVMA-COE, or as otherwise noted during the verification visit.

Verification Visit Team

The Verification Visit Team will consist of no less than two (2) AVMA-COE trained site visitors, with one (1) AVMA-COE Observer. The Verification Visit Team will be supported by one (1) staff member. Preferably, the Verification Visit Team would have also been members of the Virtual Visit Team, and ideally, the Chair of the Virtual Visit would Chair the Verification Visit.

To accomplish the agenda of the Verification Visit, the size of the Verification Visit Team for an individual visit may be increased by the Chair of the Evaluation Committee.

Verification Visit Agenda

The Council will determine the Verification Visit agenda. Noting, where appropriate, and linked to the Standards of Accreditation, specific areas of verification the Council is seeking.

The duration of the Verification Visit will depend on the agenda set by the Council.

An agenda template for the Verification Visit is included below.

<table>
<thead>
<tr>
<th>Agenda Item</th>
<th>Standards Addressed</th>
<th>Goal of the Meeting</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Required Items</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meeting: Dean +/- selected administration</td>
<td></td>
<td>Overview of the Verification Visit</td>
</tr>
<tr>
<td>Facilities Confirmation</td>
<td>Physical Facilities and Equipment</td>
<td>Confirm the presence of facilities viewed during the virtual site visit, which may include a visit to on-campus and/or off-campus facilities as directed by the Council.</td>
</tr>
<tr>
<td><strong>Optional Items as Directed by the Council</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meeting: DVM Students (If appropriate)</td>
<td>Students, Curriculum, Admissions, Organization, Physical Facilities and Equipment, Clinical Resources,</td>
<td>Provide an in-person opportunity to gather students’ impressions/concerns regarding all aspects of their experience in veterinary school. Pose specific questions (if any) requested by the Council.</td>
</tr>
<tr>
<td>Optional Additional Meetings</td>
<td>As directed by the Council</td>
<td>As directed by the Council</td>
</tr>
</tbody>
</table>
### Agenda Item

<table>
<thead>
<tr>
<th>Day 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Optional Visits to on- or off-campus sites</td>
</tr>
<tr>
<td>Meeting: Exit Interview with the Dean</td>
</tr>
<tr>
<td>Optional Meeting: Exit Interview with university administration</td>
</tr>
</tbody>
</table>

### Verification Visit Report

The Verification Visit Team will prepare a report to the Council, using the Verification Visit Rubric. The report will reference the agenda directed by the Council, and (1) confirm (or not) the presence of facilities viewed during the virtual site visit, and (2) provide additional comments, broken down by appropriate Standard, if directed by the Council, or as otherwise noted during the verification visit.

The draft of the Verification Visit Report will be sent to the Dean for correction of factual errors.

The Verification Visit Team will review the Dean’s comments, and amend the report, or provide comments, as appropriate, prior to submission of the report to the Council.

### Council Deliberations

The Council may make an accreditation decision based on a Virtual Site Visit preceding the Verification Visit. That accreditation decision is not contingent on the Verification Visit.

The Council will consider the report from the Verification Visit. The Verification Visit may or may not result in the Council making an accreditation decision.