

Report
about the revisit of the ENV Toulouse (October, 27th, 2014),
after correction of the category I deficiencies
listed in the evaluation report December 2010,
(adopted by the ECOVE in 2011).

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1. Introduction

1.1 Documents available for the re-visit of the ENV Toulouse

After the last full visitation, the ECOVE gave only conditional approval following a single category 1 deficiency.

An interim report was sent in June 2014, to inform the ECOVE about the changes done and the new situation.

The ECOVE named Dr. Olivier Glardon (chairman of the expert team in 2010) and Prof. Marina Spinu (ECOVE member) to revisit the ENV Toulouse.

With the schedule of the visitation, a “*report on equine surgery facilities and equipment at the institut national polytechnique - École nationale vétérinaire de Toulouse (France)*” was sent preliminary to the visit.

After the visitation, the head of the equine clinic and the director of the ENV provided the experts with numbers and figures about the case mix and skill mix of the last months

1.2 Changes in the curriculum and the vet school

To fulfil the recommendations of EAEVE-FVE, a program has been developed between mid-2011 and 2013 to re-qualify and adapt the equine clinics of INP-ENVT, including the rebuilding of an equine (large animal) surgery unit, with anesthesia and recovery box, an operating suite allowing proper sterility and safety measures, a system to move and transport anesthetized horses and all proper equipment devoted to orthopaedic and soft tissue surgery. The new clinic has been inaugurated in June 2013.

Also, the structure of the equine team was deeply modified. With the reinforcement of the teaching team and the new equine area, a new organisation of the clinical science in equine has been set up.

1.3 Agenda of the visit

The ENVT was revisited on October 27th, 2014, from 09:00 and 13:30.

The expert met first the direction of the school and the CoPil (comité de pilotage pour la réorganisation de la Clinique equine), and afterwards the head of the equine clinic.

During the following visitation of the infrastructures (new clinic and isolation stable) with the equine team and the CoPil, the new clinic was shown in detail and the curriculum in equine medicine and surgery was discussed. The experts had the opportunity to discuss with students learning in the clinic (practicals of the 4th and 5th year), interns and clinicians.

During the lunch, all remaining questions could be discussed and the perspectives of the school direction and CoPil for the further development of the equine medicine and surgery at the ENV Toulouse were presented.

2. Deficiencies concerning the equine clinic.

2.1. Suggestions of the experts listed in the 2010 report.

Category 1 deficiency:

The lack of appropriate equine surgery facilities and equipment constituted a Category 1 deficiency.

Comments in the final report;

Inacceptable, however, is the lack of proper surgery facilities, including inexistence of equipment for performing aseptic equine surgery in general anaesthesia with a lack of tools for up-to-date diagnostics and monitoring. Any correction of this insufficiency (recommendation for category 1 deficiency) will be linked to the employment of senior teaching staff in equine surgery. Pre-requisite to ensure minimum standards will be the construction or appropriate adaptation of equine (large animal) surgery facilities. The large animal isolation unit should then be moved closer to the clinical facilities.

2.2. Changes made since 2010.

The detail of the changes and the program developed to re-qualify and adapt the equine clinic can be found in the report of the ENVT. Only the most important changes are listed here:

Equine clinic:

- large investments to rebuild the equine clinic, in particular with five hospitalisation boxes, a large examination room and a specific dark examination room,
- an other part of the clinic can be devoted to isolation of infectious horses after clear separation of the rest of the buildings. This area of the clinic is fully equipped with one examination room and 6 boxes.
- modern surgery unit with anesthesia and recovery box,
- operation suite allowing proper sterility and safety measures,
- proper equipment devoted to orthopaedic and soft tissue surgery,
- equipment for diagnostic imaging (digital X-ray, echography, endoscopy)

Team:

After different personal changes in the team, that impacted the organisation of the clinic, a good and dedicated clinical staff is set in place, and will be reinforced in the next months. In January 2015 (already almost completely implemented by now), the equine's team will be composed of:

- two equine surgeons, one of whom is in Spain for his three years residency
- two equine internal medicine specialists, one of whom at 20% of working time
- an assistant, clinician in charge of the general application of the curriculum organization
- a groom and a secretary.

Teaching:

The presentation of the teaching can be found in the report of the ENV. After discussion with the staff and some of the students, it appears that the new organisation of the clinical teaching in equine medicine and surgery is implemented as described.

The clinical exposure of the students in the 4th and 5th year is good, as far as the number of cases allows it. To overcome the actual low patient and case numbers, mostly due to the buildings and staff problems that the school had to face in the last years, an agreement has been signed between the ENV and two private practices in the area.

At the present moment, there is no 24-hours emergency service in the equine clinic. The training of the interns and students in this topic is done in the private clinics under contract with the school.

3. Propositions of the expert

In conclusion, after careful consideration of the documents provided by the ENVT, based on the discussions with the staff, the teachers and the head of the school, and the findings collected during the revisit of the school on October 27th, 2014, the experts mandated by the EAEVE fully agree with the conclusions of the school in its report:

The ENVT made substantial efforts to modernize the equine clinic in accordance with EAEVE recommendations. A new surgery unit, fully equipped, is now available. Despite several difficulties, the clinician staff was strengthened, with the recruitment of an associate professor in internal medicine and a surgeon, diplomate of the ECVS. A new training system was built-up to improve the competencies and autonomy of students. The positive consequences in the number of cases could not be observed during the transition period but we are expecting a progressive and constant increase in the number of consultations, which could confirm that the category I deficiency listed in 2010 is quantitatively and qualitatively corrected.

Considering that the corrections are sufficient to fulfil the requirements stated in the SOP and the indicators for the teaching in equine medicine and surgery, the expert recommend to the ECOVE the suppression of the category I deficiency and the inclusion of the ENV Toulouse in the positive list of the EAEVE / FVE.

This topic should be placed on the agenda of the next possible ECOVE meeting (December 2014).

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