11. Outcome Assessment and Quality Assurance
11.1. Factual information
11.1.1. Description of the global strategy of the Establishment for outcome assessment and Quality Assurance (QA), in order to demonstrate that the Establishment:

Mission statement:

The Faculty of Veterinary Medicine at the ULPGC is an Establishment of Higher Education, unique in the Canarian Archipelago and which is committed to teaching quality and veterinary training. The Faculty aims to offer adequate response to the demands of Canarian society in matters reefing to animal medicine, animal health, public health, the food production sector, animal production in arid zones, and aquaculture and marine environment, all in collaboration with other institutions, and as a mark of respect for nature and the animal world through the training of qualified professionals, research programs, and offering the most up to date services and quality.

Vision Statement:

The Faculty of Veterinary Medicine at the ULPGC would like to be recognised in the future as a platform for veterinary training beyond the Canarian archipelago, which is a southerly border for the European Union and a bridge between Africa, Europe and Latin America. We aim to be an Establishment which is a reference point in terms of teaching and research, as well as by offering veterinary services in the Archipelago, recognised within and beyond the Canary Islands for the professional excellence of our graduates and excellence in competitive lines of research.

The general policy of the Faculty of Veterinary Medicine at the ULPGC is focused on providing the best organization of its teaching-learning activities and, also, its administrative and managing processes in order to meet the required needs and provide the sufficient resources for teaching and research, as included in the Quality Assurance System (QAS).

For these purposes the Veterinary Faculty:
- Ensures that the QAS remains effective, monitored and reviewed on a regular basis.
- Promotes the continuous cyclic improvement in every services and procedures through the formulation of specific objectives and their periodic review through the analysis of the results and proposing, as well as carrying out, the corrective and preventive actions that may be necessary.

Values:

The Faculty of Veterinary Medicine identifies with the institutional values of the ULPGC such as democratic participation, transparency in management, and the fundamental right of equality between women and men, as well as non-discrimination among its members for reason of origin, race, religion, opinion or any other condition or personal or social circumstance.

As specific values of the Faculty of Veterinary Medicine we can highlight our ethical commitment along with our interest in and respect for animal welfare and nature.

The Governments bodies of the Faculty of Veterinary Medicine have acquired the commitment to guarantee the quality of the Faculty, basing its actions on the analysis of the needs and expectations of all its stakeholders.

Our Quality Policy pursues the following general objectives:

1. To provide training aimed at excellence, guaranteeing an academic program offer in accordance with the needs and expectations of stakeholders (our users and society in general).
2. To improve the development and management of practical training, with special emphasis on the organization of extramural practical training and the Day-One Competences of the EAEVE.
3. To achieve maximum coordination for the academic activities.
4. To promote the updating of Academic and Support Staff and improve, as far as possible, the availability of resources for the performance of their activities.
5. To enhance the quality of mobility program for students, as well as Academic and Support Staff at other national and foreign higher education institutions.
6. To obtain and maintain, the 'Accredited' status in the EAEVE.
7. To encourage the culture of quality assurance and the involvement of all stakeholders in the Faculty by continuously improving the communication of the QAS and its results.

-) has a culture of QA and continued enhancement of quality;

A Quality Assurance System is mandatory for the University Studies in Spain. An external evaluation process of the *curriculum* (called VERIFICA) must be undertaken by the ANECA in order to obtain official approval from the Ministry of Science, Innovation and Universities (formerly the Ministry of Education). Chapter 9 of the VERIFICA process is focuses on the QAS. The QAS is designed following EHEA standards and the ANECA protocols for QAS design.

As mentioned in Chapter 3, the first external curriculum evaluation took place in 2010, the first follow-up was in 2013, and the QAS was fully externally audited in 2017. A minor modification was completed in 2018.

In relation with the QAS; the first design was externally evaluated by the ANECA in October 2008. The QAS started to run in 2010 and has been audited internally (the ULPGC Quality Assurance Office in 2016 - link) and externally by the ANECA. The adequate implementation of the QAS was certified by the ANECA in May 2018 (link).
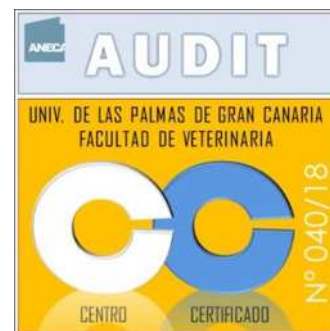
-) operates *ad hoc*, cyclical, sustainable and transparent outcome assessment, QA and quality enhancement mechanisms;

Every QAS procedure is revised at least every two years. The person responsible for the procedure must present a revision report to the Quality Assurance Committee. The revision includes strengths, weakness and proposals for improvement. If approved by the Quality Assurance Committee, the procedure is subsequently proposed for modification to the Faculty Board. All the previous modifications have to be traced and must be detailed in a table of modifications which is provided for in every procedure (see page 1). The obsolete QAS procedure is archived, and the new one is published on the Faculty Website. After any new edition of any QAS procedure, the main changes are communicated to stakeholders.

-) collect, analyse and use relevant information from internal and external sources for the effective management of their programmes and activities;

Several QA processes are related to the collection and analysis of information. The QAS PAC07 procedure related to the measurement of the survey results and accountability towards society includes surveys about the satisfaction of students with the teaching and assessment activities.

Members of the Academic Staff and Support Staff are also included in the Quality Assurance surveys, with specific questionnaires focusing on their relevant working areas. The design and validation of the questionnaires is made by the ULPGC Quality Assurance Assessment Office, attached to the Vice-Rectorate of Quality Assurance; this is an institutional procedure (PI07) called 'Institutional procedure for assessing the quality of teaching activity'

All the reports and publications prepared by the ULPGC Quality Assurance Assessment Office is published on the Website (link). The reports of the DOCENTIA procedure (the survey for the teaching planning and execution of teaching activities) are particularly relevant, and they are published in this website (direct link).

-) informs regularly staff, students and stakeholders and involves them in the QA processes;

After a thorough study of the available data, including both internal and external reports; the Faculty Annual Reports of Results are written by the Faculty Governing Body, then approved by the QA Committee and later presented for approval by the Faculty Board.

The reports are available in free access because they are published on the Quality Website (link)

The last approved Annual reports are the following (In Spanish):
Academic year 2016-2017 (link) – Minutes of the Faculty Board meeting on 23 March 2018.
Academic year 2015-2016 (link) – Minutes of the Faculty Board meeting on 25 July 2017
Academic year 2014-2015 (link) – Minutes of the Faculty Board meeting on 10 June 2016
Academic year 2013-2014 (link) – Minutes of the Faculty Board meeting on 9 April 2015

Furthermore, the Annual report is communicated to stakeholders. The report is sent by e-mail to students, academic staff, support staff and external stakeholders, as well as also mailed to the Official Veterinary Colleges (a Professional Body, and member of FVE) and the Official Veterinary Authorities (Agricultural and Public Health Departments).

-) closes the loop of the QA Plan-Do-Check-Act (PDCA) cycle;

Every year ,the Faculty Board revises the Quality Assurance Policy and the main objectives of the Faculty. For every main objective, specific objectives are also defined. Every year, an annual report is presented by the Faculty Governing Body to the Quality Assurance Committee and, after its revision, correction and addenda are presented to the Faculty Board for their final approval. By means of the Annual report, the specific objectives of the following years are revised and redefined in a cyclical process of improvement.

The Annual Reports and the Annual Objectives are available on the Website, and also in the minutes of the Faculty Board meetings and its Committees (a password will be provided for the visiting Team Experts).

-) is compliant with ESG Standards.

The Spanish Accreditation Body (ANECA) and the Autonomous Community Agencies (in our case, the ACCUEE) have defined their Standard for the Accreditation of the Quality Assurance Systems of the Faculties and Schools in accordance with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG-EHEA). The ANECA references as criteria and guidelines are published on the Website of ENQA (link).

11.1.2. **Description of the form by which the strategy, policy and procedures are made formal and are publicly available**

In relation to the Strategic Plan, several sessions were scheduled. This activity, which adopted a similar format to a workshop, was organized in order to promote the maximum participation of stakeholders. After this active participation session, the proposal for strategic actions were compiled by the Faculty Governing Body and a proposed strategic plan was presented to the Faculty Board. After its approval, the different actions proposed has been incorporated in the Annual Specific Objectives.

The QAS is organized in four types of procedures:

1. **Institutional Procedures (16)** depending on the Rectorate Team and published on the Website of the ULPGC Vice-Rectorate of Quality Assurance (link). For every procedure, there is a description of the person responsible for the procedure and the documentation file.
   - PI01 - Definition, Implementation and Monitoring of the Strategic Plan
   - PI03 - Recruitment and Selection of Academic Staff
   - PI04 - Recruitment and Selection of Support Staff
   - PI05 - Training of Academic Staff
   - PI06 - Training of Support Staff
   - PI07 - Assessment of the Quality of the Teaching Activity and the Academic Staff
   - PI08 - Material Resources Management
   - PI09 - General and Social Services
   - PI10 - Selection, Admission and Enrolment of Students
   - PI11 - Management and Processing of the Official *Curriculum* Offer
   - PI12 - Management of Complaints, Suggestions and Congratulations
   - PI13 - Monitoring of Access to the Labour Market
   - PI14 - Design or Modification of the Official *Curriculum* Offer
   - PI15 - Design of ULPGC Degrees (non-officials programmes)
   - PI16 – Surveys and Measurement of the Satisfaction
   - PI17 - Institutional Audit
2. **Strategic Procedure (PEC01)** the Dean is responsible for, and which is related to the definition of the Quality Assurance policy and objectives.
   - PEC01 - Preparation and Revision of the Quality p Assurance olicy.
3. **Key procedures (8)** the Dean and Vice-Deans are responsible for:
   - PCC01 - Definition of Student's Recruitment and Enrolment Profile.
   - PCC02 - Planning of Academic Activities
   - PCC03 - Student Orientation
   - PCC04 - Student Exchange Programs (mobility)
   - PCC05 - Development of Teaching Activities and Assessment of Students
   - PCC06 - Management of the Final Degree Project
   - PCC07 - Management of External Practical Training (EPT)
   - PCC08 - Public information
4. **Support procedures (9)** which the Dean, Vice-Deans and Faculty Administrator are responsible for
   - PAC01 - Management of QAS documents
   - PAC02 - Material Resources Management
   - PAC03 - Management of Services
   - PAC04 - Management of Extinction of the *Curriculum*
   - PAC05 - Selection and Admission of Students (only postgraduate programs)
   - PAC06 - Management of Academic Incidents
   - PAC07 - Measurement of Satisfaction, Expectations and Needs

- PAC08 - Analysis of Results and Accountability
- PAC09 - Management of Non-Conformities

The official documents and the evidence documents are filed using Cloud-Computing (One-Drive) and published on the Website (link), also located in ANNEX XI (English version). Only the documents defined in every procedure for publication are found on the website. Therefore, not all the evidence documents are published on the website.

11.1.3 Description of the regular publication of up to date, impartial and objective information, both quantitative and qualitative, about the educational programmes and awards the Establishment is offering.

After the writing up of the minutes of every Committee meeting, they are immediately published on the website of each Committee (link). Also, the related documents are linked or attached to the document or the website.

In particular, the QAS procedure documents and minutes are published on the Website of each Committee (link) and on the Quality Assurance Website (link).

With regards to the *curriculum*, the public information catalogue is published on the *curriculum* website (link). This catalogue includes the following item of information, among others:

- ULPGC Institutional Curriculum website
- Justification
- Competences and objectives
- List of essential competences or Day-One Skills of the EAEVE updated in the SOP of Uppsala May 2016. (EAEVE Web)
- Access and admission
- Profile of the Students (before) and Graduated (after)
- Administrative information (link to the Administration Web of the Faculty)
- Access and registration information (link to www.ulpgcparati.es)
- Regulation for the Academic Progress and Permanence (link)
- Scholarship information (link)
- Planning of the Academic Activities
- Tutorial Action Plan and Student Orientation
- Tutorial schedule of the Academic Staff
- Material resources and services
- Link to the Administration Web of the Establishment (Structure and units)
- Expected results
- Quality Assurance System
- Implementation schedule of the Degree

The (PCC08) procedure of the QAS is related to the public information. Every year the Quality Committee has approves a document/evidence which includes the planning for sharing information (link).

11.1.4. Description of the QA processes not yet described in the other 10 Standards

QAS Key Procedures:
The QAS procedure PCC04 is defined as the management of the Student Exchange Programs (mobility programs). Although the Vice-Dean of Students, External Practical Training and Exchange Program, is the person responsible for the procedure, and completes most of the corresponding activity; the procedure is also carried out in collaboration with the International Relationships Office, under the responsibility of the Vice-Rector of Internationalization (link).

QAS Support Procedures:
The QAS is managed using several files named '**QAS documents**' that describe the procedures and templates. Similarly, the '**QAS evidence documents'** are those files arising from the different procedures, such as meeting minutes, reports, external reports, etc. For the management of these files, the QAS procedure PAC01 is defined as describing how to manage the QAS documents (procedures and templates) and QAS evidence documents. These files are managed using Cloud Computing (OneDrive^TM)

For different reasons a Degree could be eliminated from the official offer of the ULPGC; i.e. reduction in the number of incoming students. In that case, the QAS PAC04 procedure is used to guarantee the progressive elimination of the corresponding academic activities and the legal rights of the students during the extinction period. This procedure was used for last modification of the Veterinary Degree (2009-2010) and recently for the extinction of the Master's in Veterinary Clinic and Therapeutic Research.

The QAS procedure PAC05 related to the selection and admission of students is only used for the selection of students for the Master's degree. Undergraduate students selection and admission for the Veterinary Degree is managed using the Institutional QAS procedure PI10.

Additionally, the QAS procedure PAC06, related to Academic Incidences is defined. Any stakeholder can write to the Dean's Office in order to communicate any kind of incident related to academic activities. The Dean must answer and monitor the solution of the communicated academic incident. A list of academic incidents is filed in the Dean's Office and this information is used when writing the Annual Report of the Faculty in order to solve those repeated incidents. For this purpose, the Faculty uses QAS procedures, such as the definition of a specific objective for the following academic year, or for the revision of the procedures of the QAS in a cyclically based system of improvement.

The QAS procedure PAC09 is defined by the management of non-conformities resulting from external assessment, such as by the ACCUEE, ANECA or ESEVT agencies. In the event of non-favourable or major deficiencies (non-compliance in the ESEVT) being reported, the Faculty must initiate this procedure in order to solve the cited problems. A plan of action, a person in charge and a timeframe must be proposed. The Faculty must monitor the plan of action until the deficiency is solved. In the following external assessment, the final report recommendations are monitored.

11.1.5. Description of how and by who the QA strategy of the Establishment is decided, communicated to staff, students and stakeholders, implemented, assessed and revised

The first version of the QAS was originally a template taken from the Spanish Network of Quality Assurance Agencies (REACU in Spanish). Experts from ANECA and 8 Spanish Autonomous Communities are included in this network which has produced the standards and protocols for the different Spanish Quality Assessment Programs (AUDIT, VERIFICA, DOCENTIA, ACADEMICA, etc). ANECA is a full member of the European Association for Quality

Assurance in Higher Education (ENQA). The ANECA/REACU protocol was used in a pilot program run in two ULPGC Faculties: he Faculty of Translation and Interpreting and the Faculty of Veterinary Medicine.

The General Quality Assurance Policy, the General Quality Assurance Objectives and the Annual Specific Quality Assurance Objectives are proposed by the Faculty Governing Body to the Quality Assurance Committee for their approval. Later, this Quality Assurance Policy, and both General and Specific Objectives for the forthcoming academic year are presented and approved by the Faculty Board. These documents are communicated to stakeholders by e-mail and published on the Website (link).

This activity is described in the (PEC01) procedure related to the preparation and revision of the Quality Assurance policy.

11.2. Comments

Although the design of the QAS was before the last visitation, the implementation and development of the QAS was completed later. Therefore, this is an important change occurred in the Veterinary Faculty. The culture of the QAS have transversally affects every process in our activities and stakeholders know the QAS and the procedures; as referenced in the last external report.

For the design, implementation and monitoring the QAS, the Faculty has had the technical support of the ULPGC Institutional Assessment Cabinet. Therefore, we would like to emphasise the high standard of professionalism and commitment of these Support Staff members in their technical advice.

11.3. Suggestions for improvement

Although the external Quality Agencies have positively valued the high number of participants (students) in the surveys related to the assessment of the academic staff, which are mandatory evidence in the external evaluation processes and must be performed ensuring representativeness, the procedure is time consuming. In particular, students have complained about the high number of surveys which need to be completed for every subject. In the past years, they were conducted on-line but the results were not useful because of their low representativeness. On the other hand, academic staff demand this feedback and complain about the lack of survey results when they don't get it. The results of these surveys are relevant to have access to university teaching bodies since they are taken into account by ANECA in the teaching staff accreditation (ACADEMIA program).

Cloud computing is used as a repository for the evidence documents and other documents of the QAS. The introduction of web-based management of the QAS would reduce the bureaucracy of the system and would facilitate the management of documents, evidence documents and notifications. The ULPGC acquired a web-based management application a few years ago which was worth 70,000 euros and which was not only too complex to be used but also implied a large amount of extra work on the part of its users. As a result of these drawbacks, the application was never implemented. However, it must be noted that, over the years, the Vice-Rector of Quality Assurance has directly supported all the work that has to be done by the people responsible for the QASs in the different Faculties, Schools and Research Institutes either by providing personal counselling and guidance or by designing specific model documents that facilitate the task of elaborating the various evidence documents and reports that need to be written in the different evaluation processes.