

Notes from a 2-day (informal) visit 12 – 13 December 2018 to the FVM Belgrade

Prof. dr. Hans Henrik Dietz; Prof.dr. Wim Kremer

Start: We saw a faculty with huge power and possibilities! Many motivated teachers, professors and students. The big challenge is to catch all these opportunities. You do, but we also saw many additional possibilities.

1. The management (and subsequently the community of the faculty) should consider creating the story
 - The management should reflect carefully on a relevant mission and vision encompassing both the University strategy, the Faculty strategy and the national strategy for teaching/agriculture/research/societal outreach/ how we want to cooperate as a faculty community and why etc
 - “Why is it important that we are EAEVE-accredited?”
 - primary goal is benchmarking. Not being the best in the region....
 - Perform a SWOT-analysis for the whole Faculty and for the new structure
 - Involve Staff, students and stakeholder from the beginning
 - Make it a positive story. No complains or negative approach
2. You need a controllable strategy – must be able to answer the questions about “When do we know that we have reached the goal?” Do it in the way of a research proposal. Step by step.
3. Work together to facilitate the conceptual basis for the new hospital: Use the mission / vision / faculty story (see above) for it. The management is suggested to prepare carefully the whole procedure for constructing a new small animal hospital.
 - Establish a stakeholder group including **local practitioners, local influential politicians** and if possible also an **international person** with experience in building animal hospitals. Meeting twice a year to give advice to the management
 - Before applying for government money to finance the establishment of a new hospital the FVMB must prove that it can make the most of the already existing staff and infrastructure.
 - This will demand a smaller reorganization with focus on transversal activities like
 - 1 common anesthesiology service
 - 1 common diagnostic imaging service
 - 1 common surgical service including reproduction (SA & LA), soft tissue surgery and bone surgery (SA)
 - 1 common microbiology group/central laboratory group
 - 1 common 24/7-service (SA)
 - 1 common 24/7-service (LA)
 - Consider establishing 3 future expertise areas (SA)
 - Dermatology
 - Ophthalmology
 - Diagnostic imaging
 - Consider establishing 2 future expertise areas (LA)
 - Herd Health Management
 - Epidemiology

- If it includes a major reorganization of the whole department structure on a later time remember to make sure that “there is something in it for everybody”.
 - Less redundancies in the programs (students complain)
 - More direction on the program (try to reduce the huge number of subjects in the program and thus the workload for students)
 - Less meetings without any feasible result
 - More time for primary tasks (teaching, patient care, research)
 - Sharing lecture room, microscope and other equipment (more money for primary tasks)
- A reorganization of the faculty should be considered by the management and planned in different steps to make sure that all department heads and professors have time to accommodate to the new situation.

4. The FVM Belgrade should start working at the SER for the 2021 visitation ASAP

- You should be absolutely realistic in the descriptive sections of the SER
- Incorporate students in the work-up of the SER
- Include real self-critical comments in the SER together with your own suggestions for a way forward
- Check the Rubrics and indicator on regular basis with the whole group working on the SER. Make sure that all the 2014 deficiencies pointed out are addressed.
- Start now !!

5. Additional remarks

- Don't forget One Health
- Consider a faculty broad program for the use of lecture rooms and equipment. Not every department their own lecture rooms and equipment
- It is not the work or initiative of prof. Danijela Kirovski, but from the whole community of the FVMB
- Turn down the heaters ☺
- Consider a faculty broad initiative on e-learning and digital learning (digital microscopy)
- Do it in the Serbian way !!

6. The 2014 short visit pointed at the following issues to be rectified:

Make sure that you address all these issues before writing the new SER.

- Increase the insufficient caseload in the clinics, especially farm animals and horses
- Increase the insufficient caseload in pathology/necropsy
- Increase the insufficient numbers of cadavers in anatomy
- Invest in basic equipments like autoclave in surgery

- Enhance the collaboration and use of infrastructure between closely related departments like food hygiene, microbiology and infectious diseases
- Reduce the high workload for students by shunting unnecessary redundancies
- Improve textbooks by replacing outdated teaching material
- Optimize library services with regard to the number of textbook copies, seats and opening hours
- In conjunction with the modernization of textbooks and scripts in Serbian language, release of electronic versions of textbooks should also be considered
- Improve and modernize teaching facilities
- Improve quality of facilities and equipment in all departments
- Optimize the average study time until graduation. 9.7 years are unacceptable and the students cannot be blamed alone. FVMB has to take action
- Optimize curriculum to allow students entering clinical education earlier
- Students, graduates and alumni suggest a more intense, institutionalized hands-on training
- FVMB should negotiate a reduction of incoming students without a cut back in funding in order to improve the quality of education
- Enhance international contacts of students and teaching/research staff (Erasmus)
- Enhance collaboration with state owned Veterinary Institutes with regard to infectious diseases, food hygiene and necropsies
- Recruiting leading veterinarians of these institutions as part time teachers