



PSS Rules

Effective from 1st January 2024

The RCVS Practice Standards Scheme (“the Scheme”) has been in effect since 1 January 2005. It provides a mechanism for accreditation for different types of veterinary practices.

What Standards apply?

1. The Standards to be met are set out in the *RCVS Practice Standards Modules Documents*. There is a separate document for each species type. Full details of this are available on the RCVS website <http://www.rcvs.org.uk/practice-standards-scheme/>. For any additional information please contact Practice Standards, RCVS, 38 Chancery Lane, London WC2A 1EN. Tel 020 7202 0767 / 020 7202 0796; Email pss@rcvs.org.uk
2. Practices may apply for accreditation in the following categories:

Core Standards

These standards are relevant to all veterinary practices and reflect mainly legal requirements which must be met in running a veterinary practice, together with guidance as set out in the *RCVS Code for Professional Conduct*.

General Practice

Applies to Small Animal, Equine and Farm Animal. For Small Animal and Equine practices the standards reflect the requirements of a primary care practice which aims to facilitate the achievement of high standards of clinical care, and encompasses many of the facilities required for veterinary nurse Training Practice (TP) standards. For Farm Animal General Practices, the standards reflect both the requirements of a primary care practice which promotes the achievement of high standards of clinical care, and also a proactive approach to management, through the use of health planning, client training and communication.

Equine Ambulatory GP

This recognises there are equine practices that provide a GP level service, albeit they do not have stabling facilities or premises where horses are treated.

Equine Emergency Service Clinic (ESC)

For Equine Emergency Service Clinics, the standards reflect the work of a practice that can deal with emergency cases in the field, and that provides a dedicated Out of Hours (OOH) service to other practices. An Equine Emergency Service Clinic must fulfil the applicable requirements at Equine Core Standards level, as well as additional ESC standards.

Small Animal Emergency Service Clinic (ESC)

For Small Animal Emergency Service Clinics, the standards reflect the work of a practice that can deal with emergency and critical care cases without an appointment, and that offers a dedicated Out of Hours (OOH) service. A Small Animal Emergency Service Clinic must fulfil the requirements for a Small Animal General Practice as well as additional ESC standards.

Hospital / Veterinary Hospital

Small Animal and Equine. For Small Animal and Equine Veterinary Hospitals, the standards reflect the requirements of a General Practice (above) allied with additional facilities and protocols for the investigation and treatment of more complex cases.

3. General Practice and Veterinary Hospital accreditation are cumulative. For General Practice accreditation, Core Standards are mandatory. For Veterinary Hospital accreditation, Core Standards and General Practice standards are mandatory.
4. The Scheme requires that all practice premises open to members of the public to bring animals for veterinary treatment and care, or from which ambulatory services are provided, must be assessed and comply with at least Core Standards for all species treated.
5. At Core Standards, requirements only apply if they are undertaken at the premises. If for example the premises does not undertake surgery, the Surgery module would not be applicable.
6. Different premises within a practice may apply for different categories of accreditation (e.g. a Main premises could be a Small Animal Veterinary Hospital with its branch an Equine General Practice). Also one premises may apply for multiple accreditations (e.g. as an Equine Veterinary Hospital and a Small Animal General Practice).
7. A full list of the modules can be found in the PSS handbook on the PSS website www.rcvs.org.uk/practicestandards

Veterinary nursing Training Practices (TPs)

8. General Practice accreditation includes many of the requirements under the TP Scheme. It should be noted however that additional resources are also required in order to meet TP criteria and that inspection of these resources and the training capabilities of a practice will be carried out by the

relevant veterinary nursing approved Centre. The current list of Centres (with contact numbers) is available on the RCVS website <http://awardingbody.rcvs.org.uk/centres/what-is-an-rcvs-centre/> or via the Veterinary Nursing Department vetnursing@rcvs.org.uk

Awards

9. Voluntary awards are available for each practice premises which are over and above the accreditations levels of Core, General Practice, Equine Ambulatory GP, Emergency Service Clinic and Veterinary Hospital. Requirements are set out in the Awards section of each module.
10. Practices can choose if they want to be assessed for none, for some, or for all of the Awards.
11. Awards are available at either 'Good' or 'Outstanding'. Awards have been specifically tailored to take into account the differences between Small Animal, Equine and Farm Animal practices. A full list of the Awards available can be found in the PSS handbook.

How does the Scheme work?

Who is eligible to join?

12. Eligible organisations are those running veterinary practices from premises that are open to members of the public to bring animals for veterinary treatment and care, or where the veterinary treatment and care of animals is provided to members of the public via ambulatory services. All premises within the organisation must achieve Core accreditation within one year, following assessment by an RCVS assessor. A premises must be accredited to at least Core Standards for all species treated.

PSS IT system

13. The Practice Standards Scheme is administered from a bespoke IT System which takes practices through the assessment process. Practices are required to upload pre-assessment documents which will be checked by their allocated assessor before a date for the visit is agreed. Practices are required to use this system in order to gain accreditation and the optional Awards.
14. In exceptional circumstances where particular IT difficulties arise, a paper based process may be permitted, subject to the payment of an administration charge.

Who makes the application?

15. The application to join must be made by the legal entity running the veterinary practice (e.g. partnership, limited company or sole trader).
16. Where the individual with authority to sign on behalf of the legal entity is not a MRCVS, the practice must state the name of the veterinary surgeon nominated to have overall responsibility for veterinary matters in the practice. Each premises or premises group must nominate a veterinary surgeon who will have responsibility for that group and will be present during the visit by the allocated assessor.
17. The practice must also provide details of the person responsible for coordinating Practice Standards at the practice if this is different to the Veterinary Surgeon who has overall responsibility at the practice.

Main and Branch practice premises

18. A practice must nominate one Principal practice premises. It may then have one or more Main practice premises associated with the Principal practice premises and also have any number of Branch practice premises associated with either the Principal or Main practice premises. Where a practice has administration offices at a separate location to its other practice premises please notify the RCVS PSS Team. Categorisation of practice premises will ultimately be at the discretion of the RCVS. Reasonable distances, shared out of hours provision, shared staff and shared and local clinical governance will all be considered and taken into account.

The assessment visit

19. Practices will be assessed at least every four years for their accreditations and optional Awards. Any practice premises may be subject to interim 'spot checks'. These may be without prior warning and could include candidate premises which have not yet been accredited.
20. All new premises currently not PSS accredited must have at least a medicines check within the first 12 months after acquisition, and where applicable, be subsumed into the next routine visit to the Group. Pending accreditation, the additional premises may not use the logo of the Scheme, or otherwise be promoted as an accredited premises. Where a practice has already received accreditation and, before its four yearly assessment is due, wishes to apply for accreditation for another category/species, an assessment fee will be payable.
21. Where possible, the routine and initial assessment of a Principal or Main practice premises and its branches will be completed within one day. The RCVS reserves the right to levy an additional fee in the event that more than one day is required.
22. Practices can request to have an award assessment at any time and will be charged based upon assessor time, which will be charged at a minimum in half-day blocks plus travel time and expenses. The awards duration will be for four years and will be independent of the routine assessment cycle.
23. In the course of their visit, assessors will expect to speak to a cross section of team members involved in the normal activities of an operational day. The purpose of such discussions is so that assessors can be satisfied that actions and practice policies are not only in place but are understood by relevant staff and are applied in the day to day operation of the practice, and to encourage better practice. Assessors will also wish to discuss levels of expertise and training for roles undertaken. Assessors will record the number of veterinary surgeons, veterinary nurses and other members of staff spoken to in the course of an assessment. Assessors may also wish to assess practice vehicles. When assessing Awards, assessors will expect where relevant, to observe the normal activities taking place in the practice. Depending on the nature of the Award this may include observation of a surgical procedure, anaesthesia, consultation, inpatient care and waiting room/reception interaction with clients.
24. Some Modules contribute to more than one Award. If a practice has already achieved an award and wishes to apply for another Award which includes overlapping modules, as long as the second Award is being assessed within six months of the previous Award, then the overlapping Modules would not be reassessed. If, however, the subsequent Award is being assessed more than six months after the previous Award, then all the Modules would need to be reassessed. Moreover, if in the process one of the Modules was found to be of a lower standard than at the

previous assessment, all relevant Awards would be affected. Thus a practice may have its earlier Award downgraded or removed.

Confirmation of compliance

25. Practices will be required to confirm annually that they remain compliant with the standards of their accreditation and Awards.
26. Practices will be required to notify any material change in circumstances which affects accreditation to the RCVS Practice Standards Scheme, for example; new species treated, major building works or refurbishment, or key personnel leaving.

Use of accreditation titles/Awards/logos/promotions

27. The titles 'Hospital' and 'Veterinary Hospital' on their own, or as part of any practice signage or practice advertising, may only be used by practices accredited as Veterinary Hospitals.
28. A practice shall only use the logo to promote practice premises accredited or the award achieved under the Scheme.
29. No amendment, alteration or addition may be made to the logo as supplied to members when used in promotional or other documents or materials generated by the practice or on its behalf.
30. The terms 'Good' and 'Outstanding' can only be used in conjunction with the Award name e.g. 'Good in In-patient Service'.
31. A practice cannot promote a module on its own e.g. 'Outstanding in Surgery'.
32. A practice may be required to cease any promotion considered to be inconsistent with the Scheme.
33. A practice should display their accreditation certificate and awards summary (excluding the annex) in a prominent public place of the practice, or make them available on request.
34. If a practice leaves the Scheme or its Accreditation is withdrawn then it must immediately cease to display the accreditation certificate and cease to use the logo or refer to the Scheme in all promotional activities. Where an Award is withdrawn the practice must also cease to display the award, the award summary or to refer to the award in all promotional activities.

Registration of premises under the Veterinary Medicines Regulations

35. The supply of veterinary medicinal products must be from premises registered with the RCVS as Veterinary Practice Premises.
36. Practices will be asked annually to confirm that the details of the Principal, Main and Branch premises held by the RCVS under the Scheme are correct and, as appropriate, agree that premises are included in the statutory Register of Veterinary Practice Premises. (See paragraph 45 below re fees.)

37. Practice premises that are not eligible for accreditation under the Scheme may need to be registered as Veterinary Practice Premises (and pay the statutory fee) under the Veterinary Medicines Regulations.
38. Further details of the requirements under the Veterinary Medicines Regulations can be found via the links to the RCVS and VMD websites below; <http://www.rcvs.org.uk/registration/register-of-veterinary-practice-premises/> <http://www.vmd.defra.gov.uk/vet/vpp.aspx>
39. When a practice opens new premises they must register them with the RCVS and pay the applicable fee. See the [Register of Veterinary Practice Premises area](#) on the website for further information.
40. When a premises is closed down or sold practices must notify the RCVS Registration Department in writing (registration@rcvs.org.uk).
41. As the statutory regulator of the Veterinary Medicines Regulations, the VMD reserve the right to attend any RCVS practice assessment under the Practice Standards Scheme to satisfy its own quality assurance requirements. Practices will be notified in advance by the RCVS if a VMD inspector is due to attend their PSS assessment. **NB:** the VMD maintains its right to enter any PSS and non-PSS veterinary practice at any time under its own powers of enforcement.
42. The RCVS may also share information relevant to a practice's PSS assessment with the VMD in order that it can fulfil its statutory functions.

Fees

Application Fee

43. An application/joining fee is payable for any Principal or Main practice premises and each branch practice premises. This is a non-refundable fee payable to cover initial assessment costs. The initial assessment must take place within six months of the RCVS receiving the initial application. If the assessment does not take place within six months the practice will need to re-apply to join the Scheme and pay the application fee again.
44. Where assessment of a Principal or Main practice premises and each branch practice premises cannot be concluded within one day, the RCVS reserves the right to levy an additional fee. If relevant, this may include an overnight fee.
45. In the event a premises requires a re-assessment an additional fee will apply.

Annual Fees

46. An annual fee is payable for every Principal or Main practice premises and each branch practice premises.
47. The annual fee is due each year for the period 1st April to 31st March. Invoices will be issued to indicate when the fee is due to be paid. Direct Debit forms are available from the RCVS Finance Department.
48. Fees are reviewed annually. Details are available on the RCVS website. The annual fee for each PSS premises accredited includes the fee due under the Veterinary Medicines Regulation for those premises which have been registered.

49. Non-payment of annual fees following one warning notification, will result in accreditation being withdrawn. Any application for re-instatement should be made to the RCVS, together with payment of the joining fee. The RCVS reserves the right to require re-assessment of the practice and the cost of re-assessment will be charged to the practice.
50. A practice may notify the RCVS at any time that it wishes to withdraw from the application process or membership of the Scheme. No refund of fees already paid will be made. Following withdrawal the RCVS will notify the Veterinary Medicines Directorate regarding medicines assessment.
51. Apart from in exceptional circumstances, the RCVS will charge a cancellation fee where an assessment is cancelled by the practice less than 14 days before the assessment date agreed by the practice. For assessments cancelled less than 28 days before the assessment date agreed by the practice, the RCVS reserves the right to charge a cancellation fee where appropriate.

Award Fees

52. Practices who apply for Awards assessments will be charged based upon assessor time, which will be charged at a minimum in half-day blocks plus travel time and expenses.
53. All fees must be paid before accreditation and/or Awards are granted and before the premises' entry on Find a Vet is updated to display the accreditations and/or Awards achieved

The assessors

Who are the assessors?

54. The criteria for appointment as an assessor are as follows:
 - a. To be at least five years qualified as an MRCVS or RVN;
 - b. To be in full or part-time veterinary practice (or to have been so within the previous five years);
 - c. To have been approved by the RCVS as having suitable experience for assessments to be undertaken.
55. There shall be no restriction either geographically or with regard to the number of occasions on which an individual assessor is chosen to assess practices.
56. Assessors will be expected to attend up to four annual training sessions as directed by the RCVS.
57. In order to assure quality and consistency in assessments, assessors will from time to time be subject to review by the Lead Assessor or another member of the Review Group who will monitor them in the course of an assessment visit. A copy of the report will be provided to the assessor which will advise the assessor of any follow-up recommendations.

The Lead Assessor

58. There will be a Lead Assessor appointed by the RCVS whose role will include the provision of support and guidance to the assessors. The Lead Assessor will consider all recommendations from assessors following assessments. He/she may approve such recommendations or refer them to the Review Group for decision. All decisions of the Lead Assessor will be recorded with reasons for such decisions.

Composition and role of the RCVS Practice Standards Group (PSG)

59. The PSG comprises eleven members, one to be nominated by each of the British Veterinary Association (BVA); the British Small Animal Veterinary Association (BSAVA); the British Veterinary Hospital Association (BVHA); the British Equine Veterinary Association (BEVA); the British Cattle Veterinary Association (BCVA); RCVS (who shall be the Chairman of the Group); the Society of Practising Veterinary Surgeons (SPVS); the Veterinary Practice Management Association (VPMA); the British Association of Veterinary Emergency Clinics (BAVEC); Veterinary Nurses Council; British Veterinary Nursing Association (BVNA) and a lay person.
60. The Chairman may co-opt individuals to the PSG on an ad-hoc basis. Such individuals will have no voting rights.
61. The PSG shall be responsible for the ongoing development of the Scheme and the Standards and shall report to RCVS Council through the Standards Committee (and through the Operational Board in respect of budgets and fees).

Composition and role of the Review Group

62. The composition of the Review Group will be approved by the Practice Standards Group. It will comprise up to five members including the Lead Assessor.
63. The Review Group will review any decision disputed by an applicant as set out in the Appeals Procedure.
64. The Review Group may direct that specific Standards are targeted as a result of (i) a practice's previous non-compliance; (ii) areas of common non-compliance identified through feedback from assessors; (iii) areas of non-compliance identified through the RCVS complaints procedure.
65. The Review Group may direct that specific RCVS or other relevant advice is discussed during an assessment to encourage compliance with professional responsibilities.
66. All decisions of the Review Group shall be recorded together with reasons for such decisions.
67. The Review Group may recommend to the Standards Committee possible changes to the Scheme.

Role of the RCVS Standards Committee in the context of the RCVS Practice Standards Scheme

68. To recommend to RCVS Council changes to the Scheme requiring authorisation by RCVS Council, following consideration by the PSG.
69. To act as an appeal body in relation to individual applications to the Scheme and complaints against individual practices, so far as they relate to complaints within the Scheme.
70. In considering any matter related to the Scheme, a quorum of Standards Committee shall be four members.

Outcome of assessment

Accreditation (Core/GP/ESC/VH) assessments

71. Following accreditation assessments (i.e. Core/GP/ESC/VH) practice premises will be provided with a Requirements and Recommendations Report. Requirements highlight those areas where the practice needs to provide further evidence to demonstrate compliance with the Scheme. It is mandatory that a practice provides such evidence within a certain period in order to achieve accreditation. Recommendations are suggestions for best practice or improvement which go beyond the requirements of the Scheme. They are not mandatory.
72. In the event that evidence of compliance with Standards is required post-assessment, the requested evidence should be uploaded to the PSS IT system by the practice as soon as possible within the stipulated period of either two, four, 12 or 24 weeks from the date of receiving the outcome report. Within five days of the evidence being uploaded to the PSS IT System, assessors will review the evidence and notify the PSS Team of their comments. Where assessors are not satisfied that the evidence provided is sufficient, the PSS Team will notify the practice of reasons and the information that is required within five working days.
73. In some cases a re-assessment of the premises may be required. This may, for example, be due to the original visit highlighting a large number of issues or if the practice needs to undergo refurbishment/structural changes in order to comply with the Scheme requirements.
74. A re-assessment fee will be levied to cover the costs of the visit.
- 74A Should accreditation not be achieved after one year following assessment, the joining/ application fee and initial assessment fee will be levied again to re-start the process. Should a practice premises fail to achieve accreditation following a second attempt, the matter will be escalated to the Registrar as a serious concern and the matter may be referred to the Professional Conduct department.

Awards assessments

75. The Awards focus on behaviours and outcomes, as opposed to facilities and equipment. As such they are assessed in a different manner. The Award is based upon what assessors find on the day of assessment and practices cannot therefore provide post-assessment evidence of compliance. It is expected that the practice will be able to demonstrate that the behaviours required to achieve the Awards are a recognised part of the culture of the practice and have been in place and implemented over time. It is unlikely that an Award will be granted where behaviours have been implemented for less than three months and cannot be evidenced as part of the routine for the practice.

Appeals procedure

Disputing a decision of the Lead Assessor

76. In the event that a practice disputes a decision of the Lead Assessor, it should notify the RCVS in writing of the grounds of their dispute and submit any additional material it wishes considered within 21 days. This, together with all relevant documents, shall be submitted to the Review Group for a decision, which shall be notified to the practice within 21 days.

Disputing a decision of the Review Group

77. In the event that a practice disputes a decision of the Review Group, and wishes to lodge an appeal, it should notify the RCVS in writing of its intention to appeal, within 21 days of the date of the Review Group notifying it of the decision.
78. Upon receipt of notification of intention to appeal, the practice shall be supplied with any additional reasons for the decision recorded that have not already been provided.
79. If the practice wishes to pursue the appeal then it should submit in writing full details of the grounds of the appeal to the RCVS, together with any supporting documentary/photographic material it wishes to be considered. (This must be done within 21 days of receipt of any additional reasons for the decision.)
80. The assessor who carried out the assessment shall be given the opportunity to comment upon the grounds of appeal and supporting material, and any comments received shall be supplied to the practice for further comment thereon. (All comments from the assessor or the practice must be submitted within 21 days of receipt of the date of the letter from the RCVS inviting comment.)
81. As soon as practicable, the grounds of appeal, supporting material, assessor's comments and practice's comments, together with copies of the original decisions and all correspondence, shall be submitted to the Review Group, which shall review the application and either:
 - a. Confirm the earlier decision and refer the matter to the next available meeting of the Standards Committee;

Or

 - b. Issue an amended decision.
82. The result of the review by the Review Group, and a copy of its decision, shall be notified to the practice within 14 days.
83. In the event that the practice disputes the amended decision it shall notify the RCVS and the matter shall be referred to the next available meeting of Standards Committee.
84. The decision of Standards Committee shall be final as to (i) whether or not to accredit a practice under the Scheme (ii) the appropriate level of accreditation and any conditions to be imposed (iii) whether or not to grant an award and (iv) the appropriate level of the award.
85. Following consideration by either the Review Group or the Standards Committee, if conditions are required to be fulfilled, an accreditation certificate will not be issued until assessors have confirmed the practice has complied with all conditions.

Complaints

86. If a complaint is received alleging a practice has not complied with the Standards of the Scheme, the Review Group will consider it after the practice has had the opportunity to comment on the complaint.

87. If in the course of an assessment assessors have concerns relating to a possible breach, they reserve the right to bring the matter to the attention of the Review Group or, where concerns relate to issues of professional conduct, to the RCVS Professional Conduct Department.
88. Practices agree to respond promptly to all requests for information and in respect of any complaints relating to the Scheme.

Miscellaneous

89. If any matter arises regarding the operation of the Scheme that is not provided for under the Rules, it shall be decided upon by the Review Group.
90. Although the Health and Safety requirements (and other legal requirements) may be extensive, and as far as possible up to date, fulfilment of these at assessment does not constitute a guarantee that each and every Health and Safety requirement (or other legal requirement) has been met, and does not preclude the necessity for each practice to check with the Health and Safety Executive (or other relevant authority) regarding their individual requirements.

Feedback and improvements

91. The RCVS welcomes feedback on the application/assessment process. Practices are therefore required to complete the online feedback form following assessment.

Transitional arrangements for existing members

92. Practices will automatically migrate to the new Scheme (launched in 2015) at their current accreditation level, for example, General Practice – Small Animal.
93. Routine assessment dates will not change under the new Scheme and practices do not need to delay or bring forward their routine assessment in order to be assessed for Awards.
94. Practices may apply to be assessed for optional Awards at any time after accreditation.

Access to the PSS IT System, data security and privacy

IT system

95. The PSS IT system is made available to accredited members of the Scheme to hold practice related documents as required for accreditation by the Scheme, reports and other relevant documents. It is also open for non-accredited practices to use to assist in ensuring they are working to the equivalent of Core Standards.
96. The system has been developed by a software company (Skillwise; www.skillwise.net) under contract to the RCVS.
97. The information on the system is located on a remote server. All parties are bound by the principles of the General Data Protection Regulations (GDPR) 2018 and take data privacy very seriously. The GDPR is important because it increases the regulatory burden and obligations on organisations and strengthens the rights of individuals. Data from the system will not be made available to other external users without the permission of the data owners, except in the circumstances as provided for under the GDPR (e.g. may be passed to relevant enforcement agencies, including the Health and Safety Executive or Veterinary Medicines Directorate).

98. The following persons/entities have rights or may be granted rights to access the PSS IT system and the data it contains:
- a. Practices premises can access their own data and data in connection with their own branches.
 - b. Assessors appointed by the RCVS can view documents related to individual practices as directed by the PSS administration team for the purposes of carrying out an assessment. Practices are able to view assessor feedback to the practices.
 - c. The PSS team and Lead Assessor have full access to the system and the data it contains on members and non-members of the Scheme.
 - d. The Review Group may be granted access as required by the Lead Assessor or PSS administration team.
 - e. RCVS staff members or committee members appointed by the Head of Legal Service for the purposes of investigating concerns about a veterinary surgeon/practice or in connection with an application to become a VN Training Practice may be granted access and use information relating to a practice obtained or recorded in connection with the Scheme. Such information will not be made available to external users without the permission of the data users, except in circumstances as provided for under the Data Protection Act (e.g. may be passed to relevant enforcement agencies, including the Health and Safety Executive or Veterinary Medicines Directorate).
99. The system is provided to assist practices in connection with obtaining PSS accreditation. The system enables users to upload documents/files (including photographs). Users must not attempt to upload any files or enter data that could potentially harm the system.
100. In some circumstances it may be necessary to disclose PSS assessment and award accreditation reports if specifically requested by a member of the public. However, when disclosing reports, the RCVS would have in mind our duty of care to protect the personal data of our members and so would make any necessary redactions to the reports so that their data and privacy remain protected.
101. By becoming a member of the Scheme, the practice accepts that any of its data related to the RCVS Practice Standards Scheme may be shared with the parent practice, or, in the cases of larger businesses, the head office, or equivalent. Any matters deemed by the RCVS Registrar to be of public interest may be escalated to an appropriate external public body and the matter may be referred to the Professional Conduct department. The type of data shared may be anything from nature and dates of deadlines to information on practice deficiencies.