Coventry University Accreditation

Warwickshire College Group

24-26 April 2023

Report to the Veterinary Nurses Council of the Royal College of Veterinary Surgeons (RCVS)

Contents

List of Panel Members

Victoria Hedges RVN, RCVS Examinations Manager

Gemma Irwin-Porter RVN, Educator Representative

Kathy Kissick RVN, Chair

Aislin O'Raw RVN, Employer Representative

Tori Page RVN, RCVS Qualifications Assessor (Observer)

Florrie Sage, Student Representative

Key Staff met

Amr Bayoumy, Lecturer in Biosciences - School of Life Sciences Coventry University

Sue Bluteau, Director of Finance - Warwickshire College

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Guy Thomas, Dean of Higher Education, Warwickshire College

Suzanne Wildman RVN, Head of Centre, Warwickshire College

Summary of the Panel's findings

- Coventry University, in conjunction with Warwickshire College Group (WCG), was visited between 24 and 26 April 2023. The following programmes were under accreditation review:

  FdSc Veterinary Nursing
  BSc (Hons) Veterinary Nursing

- WCG delivers the veterinary nursing degrees from two of its delivery sites. The FdSc is delivered at the Pershore College campus, and the BSc (Hons) is delivered at the Moreton Morrell College campus.

- The accreditation event took place at the Moreton Morrell College campus. An RCVS Qualifications Assessor visited the Pershore College Campus on 17 April 2023. The panel met with the reviewer and received a written report of their findings.

- During the event the panel met with four year 1 and five year 4 students enrolled for the BSc (Hons) at Moreton Morrell. No students were met who attended the FdSc at Pershore.

- The RCVS Panel received a warm welcome from the team and are grateful to all those who were responsible for preparing the visit, arranging the schedule and providing supplementary information when requested. The enthusiasm, commitment and pride of the team in what they do made it an interesting and enjoyable visit.

The team found the following:

Coventry University is to be **commended** for the following:

- Interprofessional links with an international Veterinary Nursing School
- Integration of the RCVS Code of Professional Conduct for Veterinary Nurses into many of the teaching sessions
- Mechanisms in place to develop reflective learners
- Quality and quantity of feedback from written assessments

Areas for further review included:

- The programme design including the module content, learning outcomes and assessment methods
- Updating student facing documents to detail the correct information, including reference to Professional Behaviours being a requirement of the course
- Providing a policy to ensure there are sufficient Training Practices for all students

- Updating records regarding client information regarding the right to withdraw consent to students being involved in the care of their animals
- Review of programme marketing and recruitment to include recruitment materials
- Review of Fitness to Practise procedures

The findings in this report are based on the RCVS panel's review. The panel are not the decision makers, and their commendations, suggestions and actions may be subject to amendment during the committee process.

Programme details

Requirements	Details
Name of organisation awarding the licence to practise qualification	Coventry University
Main address and contact details for the above organisation	Priory St Coventry CV1 5FB
Name of Principal or Chief Executive Officer	Dr Douglas Howat
Name of Programme Lead	Sarah Pointer RVN
Proposed programme titles:	FdSc Veterinary Nursing BSc (Hons) Veterinary Nursing
Address and contact details of proposed site/s for delivery of licence to practise qualification	Moreton Morrell College Moreton Morrell Warwick CV35 9BL Pershore College Avonbank Pershore WR10 3JP
Pattern of delivery	FdSc delivered by block release. BSc (Hons) is delivered using an embedded model (2 days in university three days in placement throughout the programme).
Intakes and student numbers	One intake per year with 32 students across both programmes.

Standard 1 – Learning culture

The learning culture prioritises the safety of people, including clients, students and educators, and animals enabling the values of the Code of Professional Conduct to be upheld.

Education and training is valued and promoted in all learning environments, with diversity and inclusion at the forefront.

	Standard met		
	Accredited Education Institutions, together with Centres and Training Practices, must:		
	Requirements	**Met**	**Not Met**
1.1	Demonstrate that the safety of people and animals is a primary consideration in all learning environments. *Evidence reviewed:* *Health and safety policy* *Staff induction policy* *Standard Operating Procedures* *Risk assessments* *e-safety policy* *Safeguarding policies and procedures* *Student inductions* *Policy of onsite animals* *Fire safety protocol* *RPA reports* *Compliance with IRR 2017* *Campus tour* During the campus tours it was evident that aspects of the Health and Safety policy were implemented, including fire safety. Risk assessments were visible in most teaching areas, although there are areas for improvement regarding risk assessments, trip hazards, hazard signs and the storage of oxygen cylinders in the clinical skills room. The risk assessments did not include the use, handling and storage of prescription only medicines (POM-Vs) or the handling of biological substances such as blood and faeces. During the tour it was noted that the POM-Vs were not stored safely. Two new anaesthetic machines have been recently purchased which will be advantageous for practical skills delivery. There were no service records provided for the old anaesthetic machines which were still on the premises. Pershore campus has an autoclave, however, no service records were available, nor was it communicated that this equipment was currently in use.		✓

	There is an excellent traffic light system to ensure safe animal handling; unfortunately, however, the use of this was inconsistent and not evident on all animal accommodation. The student induction includes the relevant safety policies, and updates regarding safety are disseminated. The X-ray machine PAT test was current, however, no signage was visible to notify staff or students that it was decommissioned. The laboratory facilities are fit for purpose; however, the centrifuges are overdue for PAT testing in the laboratory and clinical skills room.		
1.2	Prioritise the wellbeing of people. *Evidence reviewed:* *Peer reviews* *Continued Professional Development (CPD) documents/policies* *Staff inductions* *Staff reviews* *Nominated staff member for wellbeing* *Pastoral support* *Staff Code of Conduct* *Wellbeing policy* *Wellbeing displays (physical and online)* *Wellbeing initiatives* *Mental Health First Aider Training* *Mental health support procedures* *Pershore tour report* *Campus tour* *Student interviews* The wellbeing of people is considered and evidenced through visual aids, such as posters, throughout both campuses and online via the intranet. Mental health first aiders are available for students and staff across both campuses. Free sanitary products are available in the bathrooms. Pastoral support is available, and students communicated that they felt well supported. It was suggested to the delivery team and clinical placement managers (CPM) that implementing mental health first aid training into the clinical supervisor (CS) training and standardisation events could be beneficial to ensure students' welfare whilst on clinical placement (CP).	✓	
1.3	Ensure that facilities and physical resources, including those used for clinical learning, comply with all relevant legislation including UK animal care and welfare standards. *Evidence reviewed:* *Training practice (TP)/Auxiliary Training Practices (aTP) lists with risk assessments*		✓

	VMD Registration *Policy for storage and disposal of POM-VS* *Standard Operating Procedures* *Policy for onsite animals* *Facility audits* *List of locations where qualifications are delivered* *Schedule of quality monitoring activity* *Inventory of clinical equipment and consumables* *Resource statement* *Student feedback* *Campus tour* *Pershore tour report* *Delivery team feedback* Training Practices (TP) are risk assessed and annually reviewed to ensure facilities and resources are adequately meeting legislative requirements. Currently, the only prescription only medicines - veterinary (POM-V) held on campus are intravenous fluid bags, so registration with the Veterinary Medicines Directorate (VMD) is not required, in accordance with the guidance provided by the VMD at the time of writing. The policy for onsite animal use was not provided and whilst canine and feline species are utilised for clinical learning, documentation in relation to their use was not made available.		
1.4	Ensure clients have the opportunity to give, and if required withdraw, their informed consent to students being involved in the care of their animals. *Evidence reviewed:* *Standard Operating Procedures* *Poster regarding consent* *Consent guidance within pre-operative paperwork* *Website content* *Consent forms* *TP/aTP approval forms* *Student feedback* *TP visit* It is not clear if clients are giving informed consent for student involvement in their animal's care. Following the RCVS TP visits and student feedback there is a lack of monitoring from the AEI. TP/aTP approval paperwork suggests informed consent is questioned, however, how this is being achieved is not transparent and the programme team were unaware of their responsibility regarding this.		✓

1.5	Promote client, public and animal safety and welfare and maintaining confidentiality. *Evidence reviewed:* *Job descriptions* *Student feedback* *Lesson observations* *General Data Protection Regulation policy* *Student observations* *TP/aTP approval forms* *TP/aTP risk assessments* *Social media policy* The evidence reviewed confirms that client confidentiality is protected and maintained. Faculty and student inductions include GDPR, social media guidelines and data protection.	✓	
1.6	Ensure students and educators understand how to raise concerns or complaints and are encouraged and supported to do so in line with local and national policies without fear of adverse consequences. *Evidence reviewed:* *Student meetings* *Student representative meetings* *Staff and student handbooks* *Induction policy and timetables for students and staff* *Complaints procedure* *Whistle Blowing Policy* *Social Media Policy* *Safeguarding Policy* *Wellbeing Policy* *Student feedback* *Delivery team feedback* The complaints procedure is supported by student and faculty feedback which indicated they felt confident in how to raise a concern or complaint. Student feedback highlighted a lack of interest from students to take on a student representative role for Course Consultative Committees meetings. Currently students are selected by the Programme Lead (PL) to take part and it would be encouraging to see more students take an interest in this developmental role.	✓	
1.7	Ensure any concerns or complaints are investigated and dealt with effectively, ensuring the wellbeing of people and animals is prioritised. *Evidence reviewed:* *Complaints review board* *Complaints procedure*		✓

	Fitness to Practise Policy *Safeguarding Policy* *Wellbeing Policy* There are currently no complaints or concerns to be evidenced. During the panel's enquiry, faculty members had a poor understanding of the various policies and processes. The verbal explanation and the documentation did not marry up. It was not clear who was the responsible Investigating Officer. It was discussed with the team that personnel from Coventry University could be utilised in an impartial investigating officer capacity.		9	
1.8	Ensure mistakes and incidents are fully investigated and learning reflections and actions are recorded and disseminated. *Evidence reviewed:* *Accident recording / reporting* *Clinical audit reports* *Complaints procedure* *Disciplinary Policy* *Risk assessment and policy reviews* *Accident records* *Evidence of outcomes/actions and dissemination* Mistakes and incidents on campus are reported through an online platform. It was not clear how accidents are reported whilst on CP; discussion with the team highlighted that the TP would report to the CPM. It is suggested that this process should be documented.	✓		
1.9	Ensure students are supported and supervised in being open and honest in accordance with the RCVS Codes of Professional Conduct. *Evidence reviewed:* *Fitness to practise procedure* *Student feedback* *Module/unit handbook* *Lesson plans referencing RCVS CoPC* *Lesson observation feedback* *Day One Skills Recording Tool* *Learning logs* *Reflective diaries* *Tutorial records* *Learner reviews* *Clinical placement handbook* *Student feedback* The Code of Professional Conduct (CoPC) is embedded throughout the programme and introduced to students early in the programmes of study. Students are assessed via the Nursing Progress Log (NPL) during CP.	✓		

	Student feedback supported the evidence provided regarding the CoPC and that Fitness to Practise was understood. The WCG Fitness to Practise procedure requires amendment to the five principles of practice as 'Independence and Impartiality' is not present; additionally, the word competence should be competency, and the word confidence should be confidentiality.			
1.10	Ensure the learning culture is fair, impartial, transparent, fosters good relations between individuals and diverse groups, and is compliant with equalities and human rights legislation. *Evidence reviewed:* *Lesson observations records* *Staff training records* *CPD records* *Self-Assessment Reports* *Student feedback* *External examiner reports* *Equality, Diversity and Inclusion Policy* *Reasonable adjustment policy* *Conflict of interest forms for OSCEs* *Complaints procedure* *Campus tour* The policies for Equality, Diversity and Inclusion (EDI) are supported through quarterly EDI committee meetings; all higher education committees at CU/WCG have EDI embedded throughout. Conflict of interest forms are being implemented for the 2023 OSCE Assessments.	✓	
1.11	Advance equality of opportunity through effective use of information and data. *Evidence reviewed:* *Self-Assessment Reports* *External Examiner reports* *Access and Participation* *National student survey data* *Office for Students data, access and participation plans* The *WCG Access and Participation plan* includes all courses available at Warwickshire College Group and includes the development of specialist provision to meet the needs of local and regional students. The cohort sizes are currently too small to participate in the *National Student survey data.* EE reports are reviewed and any resulting actions are responded to and acted upon.	✓	

1.12	Work to promote inter-professional education and inter-professional practice and support opportunities for research collaboration. *Evidence reviewed:* *Programme level intended learning outcomes* *Module/unit handbooks* *Secondment policy and timetables* *Guest (expert) speaker timetables* *Group project work* *Delivery team feedback* Guest speakers are utilised across the VN programmes, including during VN Futures week and across modules. Delivery team feedback revealed that some team members have published articles and contributed to chapters of VN textbooks. Opportunities for interprofessional education are also advanced through an established arrangement where students from the Netherlands spend up to three months at the Pershore campus. Whilst there are currently no ongoing research collaborations involving VN students specifically, there is a potential future opportunity for VN students to be involved in research with physiotherapy at Cotswold wildlife park.	✓	
1.13	Promote evidenced-based improvement in education and veterinary nursing practice. *Evidence reviewed:* *Programme level intended learning outcomes* *Module/unit handbooks* *CPD policy* *Secondment Policy and timetables* *Guest (expert) speaker timetables* *Clinical audits* *Clinical governance* *Quality improvement policies and procedures.* *Delivery team feedback* The course team pride themselves in teaching best practice for clinical skills, however, through discussion the panel concluded that the clinical skills being delivered were in relation to the Objective Structured Clinical Examination (OSCE). There is a reliance on clinical placements teaching other clinical skills, which could result in fewer evidence-based methods being delivered. This is discussed further within Standards 2 and 5. WCG minimum CPD hours is set at 30 hours, although the evidence provided for the VN team shows inconsistencies in the hours being met.		✓

Conclusion:

This standard has been met.

Coventry University and Warwickshire College Group have evidenced the overall importance of the learning culture across their delivery sites. There are comprehensive policies and procedures for both people and animals regarding safety and welfare. There were some concerns with the non-compliance of specific policies regarding health and safety which are evidenced in the required actions.

Wellbeing was well evidenced across both campuses and feedback confirmed that staff and students had an awareness of various initiatives and resources. Confidentiality is a key theme throughout the programme and the Equality, Diversity and Inclusion committee strives to improve standards across all areas.

There is currently a lack of clarity regarding monitoring of clients' awareness that they have the right to withdraw consent to students being involved in the care of their animals or how this is publicised.

The CoPC is well embedded throughout the programme, however, some amendments are needed in the Fitness to Practise procedure document, as detailed in the required actions.

Suggestions:
a. Include Mental health first aid training for clinical supervisors (CS) during training and standardisation events.
b. Encourage students to take part in feedback initiatives.
c. Amendments to be made to the RCVS Five Principles of Practice within the Fitness to Practise procedure document. Missing one of the principles, Independence and Impartiality from the document. Competence should be competency and confidence should be confidentiality.
d. Implement signage to communicate that the X-ray machine is decommissioned.
e. Create Posters to disseminate across all TP/aTPs to ensure clients have the right to withdraw consent to student involvement in the care of their animals.
f. Implement a process of reporting and documentation to record accidents on clinical placement to the CPM team.

Actions:
a. Ensure all clinical learning environments have visible risk assessments and provide evidence that these have been implemented.
b. Provide service records for the old anaesthetic machine at Moreton Morrell.
c. Provide service records for the autoclave at Pershore, and / or provide evidence that the autoclave has been removed from student access.
d. Ensure the traffic light system is in use across all animals utilised for handling.
e. Amend, update and display risk assessments to include handling, storage and disposal of intravenous fluids and blood products.
f. Improve Oxygen storage and ensure all equipment is PAT tested.
g. Update and amend complaints procedure to ensure impartiality is maintained.

h. Update and amend TP/aTP monitoring paperwork to record how the clients are aware that they have the right to withdraw consent to students being involved in the care of their animals at any time and that this is well publicised.

i. Provide the policy for the use of onsite animals.

j. Produce evidence to verify that all delivery personnel are meeting the minimum CPD requirements as mandated by WCG and that these are audited to ensure relevance to evidence-based practice.

Standard 2 – Governance and quality

There are effective governance systems that ensure compliance with all legal, regulatory, professional and educational requirements and clear lines of responsibility and accountability for meeting those requirements.

All learning environments optimise safety and quality, taking account of the diverse needs of, and working in partnership with, students and all other stakeholders.

	Standard not met			
	Accredited Education Institutions, together with Centres and Training Practices, must:			
	Requirements		**Met**	**Not Met**
2.1	Comply with all relevant legal, regulatory, professional and educational requirements. *Evidence reviewed:* *Office for Students report and action plans* *RCVS quality monitoring report and action plans* *External examiners reports and action plans* *Minutes of validation/accreditation event* *RCVS pre-accreditation support* The documents that were made available were comprehensive, however, the proposed programme has not yet been validated by Coventry University. The University will consider the contents of the RCVS Accreditation report during its usual validation process. This activity is planned for May 2023.			✓
2.2	Provide all information and evidence required by regulators in a timely manner i.e. within published timescales. *Evidence reviewed:* *Completed action plans from regulatory, professional and legal bodies* *Feedback from the RCVS Qualifications Assessor* General communications with the RCVS have been executed in a timely manner, however, during the planning of the TP visits as part of the accreditation, a concern was noted. Written communications, via email, were not responded to in a timely manner and ultimately the RCVS made its own arrangements directly with the practices.			✓
2.3	Ensure programmes are designed to meet RCVS Day One Competences and Skills for Veterinary Nurses, QAA Veterinary Nursing Benchmarks and outcomes relevant to the programme.			✓

	Evidence reviewed: *Curriculum mapping documents to meet RCVS Day One Competences/RCVS Day One Skills* *Curriculum mapping document to QAA Veterinary Nursing Benchmarks (HEIs)* Although the modules have been designed to cover the RCVS Day One Competences (DOC) and Day One Skills (DOS), there is a lack of equipment to facilitate the teaching of the DOS within the clinical skills classroom.		
2.4	Comply with the RCVS Code of Professional Conduct for Veterinary Nurses. *Evidence reviewed:* *Module/unit documentation* *Programme Curriculum* *Lesson observation records* *Schemes of Work* *Lesson planning documentation* *Student and Clinical Supervisor handbooks* *Student interviews* All of the documents viewed demonstrated compliance with the CoPC. The students interviewed during the accreditation event clearly understood the CoPC and its relevance to their programme and the role of the student veterinary nurse. The students also confirmed that the CoPC is integrated into the theoretical components of the curriculum.	✓	
2.5	Comply with the RCVS Veterinary Nursing Registration Rules. *Evidence reviewed:* *Adequate placement provision/employment* *Programme specification* *Qualification Handbook* *Student interviews* The Veterinary Nursing Registration Rules are not referred to within programme documentation. Aspects of the registration rules are mentioned within documentation but could be mistaken as a requirement for registration only and not something which is included in the module requirements. The programme design includes the requirement for students to meet a minimum of 1,800 hours of clinical experience within a TP. Students who choose not to complete the clinical placement, or the assessment of the DOS, are offered the alternative awards of BSc Animal Health Studies or FdSc Animal Health Studies.		✓

	The requirement to complete a programme of veterinary nurse education lasting at least 2,990 hours is achieved by graduates but there is no mention of this aspect within student facing documents. It was highlighted by students and staff during the accreditation event that contrary to the information within the student handbook, students are expected to source their own CP. Students enrolled on the BSc (Hons) programme commence CP within weeks of starting on the programme. Where students are unable to source a placement, they are consequently unable to engage in placement requirements. At the time of the accreditation event there were seven students who had not secured a placement. It is the University's responsibility to ensure that all students are provided with a CP, and this was previously highlighted within the 2017 accreditation report. Student facing documentation details the requirement to enrol with the RCVS but there is no indication about when and how this will take place.		
2.6	Adopt a partnership approach, with shared responsibility, evidenced by a Memorandum of Understanding between the Accredited Education Institution and the delivery site and between the delivery site and the Training Practice. This must be regularly reviewed and clearly stipulate the roles, responsibilities, and regulatory requirements. *Evidence reviewed:* *Memoranda of Understanding* *Quality Assurance Procedures* *Risk assessments* *Review meeting minutes* *Clinical placement information for TP/aTP* *Delivery Site approval documents* *TP/aTP secondment documents* Memoranda of Understanding (MoU) are clear and comprehensive; however, these could be strengthened to include more detailed reference to the roles and responsibilities of educators and assessor. There are also MoUs in place for non-affiliated TPs. Training practices are audited annually, and associated paperwork is completed and kept on file*.*	✓	
2.7	Ensure that recruitment, selection and retention of students is open, fair and transparent and includes measures to understand and address underrepresentation. *Evidence reviewed:* *Selection criteria for admission* *Copies of student certificates*		✓

	Accredited Prior Learning (APL)/Recognised Prior Learning (RPL) policy *Equality of opportunity policy* *Interview records* *Self-Assessment Reports* *Widening participation policy* *Student interviews* There are clear criteria for admission, however the University and its delivery site must ensure that all students meet the admission criteria. It was noted that a student entered the programme without the work experience criteria being fulfilled, then subsequently withdrew from the programme as they did not want to become a veterinary nurse, although this is accepted that this was impacted by the Covid-19 pandemic. With the current workforce crisis, it may be difficult for students to gain work experience and therefore the University may want to consider alternatives to this aspect of the entry criteria, whilst still ensuring prospective students know and understand the nature of the programme and the role of a veterinary nurse. There is a clear APL/RPL policy in place that could be applied but has not had to be used to date. The student interview record states that prospective students must secure two weeks work experience within a veterinary environment prior to applying for a programme, however, this requirement was not documented within the prospectus. The procedure for procurement of clinical placement is not transparent to prospective students or students in the early stages of their programme.		✓
2.8	Have entry criteria for the programme that includes evidence that the student has capability in numeracy, literacy and science, written and spoken English and mathematics to meet the programme outcomes. *Evidence reviewed:* *Programme specification* *Prospectus* *Website* *Equivalence consideration* The majority of the entry criteria are transparent and documented within marketing material and checked upon entry, however, the work experience requirement is not clear, as detailed above.		✓
2.9	Provide students with the information and support to enable them to demonstrate fitness to practise including the disclosure of any criminal	✓	

	convictions that may affect registration with the RCVS as qualified veterinary nurses. *Evidence reviewed:* *Fitness to practise policy* *Induction procedure* *Timetables* *Personal tutorial timetables* *Recruitment policy* *Student interviews* *Student handbook* *RCVS registration guidance within documentation* The students stated that they are aware of fitness to practise expectations, and this is provided as a yearly reminder. From the reviewed paperwork it is clear that students are required to disclose criminal convictions during their programme and how important this is in relation to registration with the RCVS upon successful completion of the programme.		
2.10	Demonstrate a robust process for recognition of prior learning (RPL). *Evidence reviewed:* *RPL/APL Policy* *RPL/APL documentation* *RPL/APL decision recording* *RPL/APL guidance on website* The evidence provided shows a clear process for recognition of prior learning, which appeared to be fit for purpose.	✓	
2.11	Provide students with the information and support they require in all learning environments to enable them to understand and comply with the relevant governance processes and policies. *Evidence reviewed:* *Student handbook* *Programme handbook* *TP/aTP handbook* *Fitness to practise policy* *RCVS enrolment guidance* *RCVS Registration guidance* *Clinical supervisor handbook* *RCVS CoPC references within relevant documentation* *Student interviews*	✓	

	The evidence provided a comprehensive overview of student information which is easily accessible by all students. The documentation includes both Coventry University and WCG specific policies and procedures.			
2.12	Have robust, effective, fair, impartial and lawful fitness to practise procedures to swiftly address concerns, and where appropriate notify the RCVS, as Regulator, about the conduct of students that might compromise public and animal safety and protection. *Evidence reviewed:* *Fitness to practise policy* *Fitness to study policy* *Appeals procedure and policy* *Academic malpractice policy* *Student Code of Conduct* The documentation provides an overview of the Fitness to Practise policy, however, the programme team lacked knowledge around the formal process for investigating fitness to practise concerns. In particular, they were unable to identify who the investigating officers would be and any training they would receive to undertake this role.			✓
2.13	Confirm that students meet the required programme outcomes in full and are eligible for academic and professional award. *Evidence reviewed:* *Board of Examiners meeting minutes* *Student progression meeting minutes* *Exit award details* The evidence provided, and panel discussions, confirmed that students are awarded either their full award or the exit award, and this process and outcome is confirmed by the Board of Examiners.	✓		
2.14	Regularly review all learning environments and provide assurance that they are safe, effective and fit for purpose. *Evidence reviewed:* *Course Reviews* *Student feedback* *TP/aTP quality monitoring paperwork* *Risk assessments* *Health and Safety Policy* *Centre Sampling Policy* *Memorandum of Understanding* *External Examiner reports* *External Quality Assurance reports* *Standard operating procedures* *e-safety policy*			✓

	Student training regarding online safety *Student interviews* The evidence confirmed that there are a range of effective student safety policies in place. The student interviews highlighted that during Year 4 of the BSc programme, students are continuing to work in veterinary practice as an employed student veterinary nurse but do not have monitoring visits or placement support during this time.			
2.15	Appoint appropriately qualified and experienced people for programme development and delivery. *Evidence reviewed:* *Staff lists* *Staff development plan* *Staff in-house training records* *Job descriptions* *Staff time allocation* *Recruitment policy* *External Examiner/Adviser recruitment policy* There is a robust recruitment policy in place to ensure that all delivery personnel are Registered Veterinary Nurses (RVN) with a minimum of a level 5 qualification. More recent members of the teaching team are contractually obliged to complete an internal teaching qualification and are supported, including financial support, to apply for a fellowship of Advance HE. There is a clear policy in place for the recruitment of External Examiners (EE). The policy is deliberately vague as it '*normally*' employs people of experience who are respected in their subject area. The University representatives confirmed that, for the proposed programme, an RVN or MRCVS would always be employed in this role.	✓	
2.16	Where an Accredited Education Institution is not yet fully accredited, or at the discretion of Veterinary Nurse Education Committee, facilitate the attendance of the RCVS at the trial/mock OSCE/practical assessment at least one year in advance of the final summative assessment taking place for the relevant cohort of students. *Evidence reviewed:* *None* Coventry University is currently fully accredited.	N/A	

2.17	Where an Accredited Education Institution plans to make any changes to its provision, including assessment, the RCVS must approve all changes prior to implementation. *Evidence reviewed:* *Correspondence with RCVS regarding proposed changes* The University has mechanisms in place to inform the RCVS of changes to the programme.	✓	
2.18	Provide evidence that adequate market demand and finances are in place and are sufficient to sustain and develop the programme and have been approved by the Higher Education Institution or Awarding Organisation. *Evidence reviewed:* *Budget* *Self-Assessment Reports* *Institution's annual report containing audited accounts* *Evidence of demand for the programme (the market)* *Marketing activities* Adequate evidence has been provided demonstrating that the programmes are currently financially stable. However, consideration must be given to the low numbers that the delivery sites have overall and the consequences this may have to the programme sustainability if these numbers were to drop.	✓	

Conclusion:

This standard has not yet been met.

There are some effective governance systems to ensure compliance with legal, regulatory, professional and educational requirements however the programme has not yet been validated by Coventry University. It is important that all personnel are familiar with the governance systems in place.

All learning environments take into account the diverse needs of students; however, suitable resources are not available to provide adequate practical teaching.

Suggestions:
a. Consider strengthening the MoU to include detailed reference to the roles and responsibilities of educators and assessors.
b. Consider an additional, alternative option, to the two weeks' work experience applicants are expected to gain to ensure that prospective students can explore the role of a veterinary nurse in the absence of work experience.
c. Implement some innovative marketing approaches for student recruitment.
d. Consider widening participation specific to veterinary nursing recruitment.

Actions:
a. Provide confirmation of the validation of the programmes from Coventry University.

b.   Provide a documented process for responses to RCVS requests to ensure actions and communications can be carried out in a timely manner.

c.   Provide an updated inventory which confirms resources are available at both delivery sites to ensure effective teaching of the RCVS DOS.

d.   Provide amended documents which reference the RCVS Veterinary Nursing Registration Rules, including student facing documentation which must reference that student veterinary nurses must complete a mandatory minimum of 2,990 hours of training.

e.   Provide a documented process which ensures all students are provided with a clinical placement.

f.   Ensure that procurement of a clinical placement is transparent to prospective students and those in the early stages of their programme.

g.   Ensure that all members of the team are familiar with the Fitness to Practise Policy and amend documentation to clarify the names of the investigating officers and the training they will receive.

h.   Providence evidence that Year 4 BSc students continue to receive support from the clinical placement managers should they choose to continue clinical placement.

i.   Provide students with details about how and when they need to enrol with the RCVS.

Standard 3 – Student empowerment

Students are provided with a variety of learning opportunities and appropriate resources which enable them to achieve the RCVS Day One Competences and Skills for Veterinary Nurses and programme outcomes and be capable of demonstrating the professional behaviours in the RCVS Code of Professional Conduct for Veterinary Nurses.

Students are empowered and supported to become resilient, caring, reflective and lifelong learners who are capable of working in inter-professional teams.

	Standard met		
	Accredited Education Institutions, together with Centres and Training Practices, must ensure that all students:		
	Requirements	**Met**	**Not Met**
3.1	Are well prepared for learning in theory and practice having received relevant inductions. *Evidence reviewed:* *Induction handbooks* *Induction timetables* *Induction materials for DOS recording platform* *Student Interviews* *Student Placement Handbook* The students have both centralised and veterinary nursing specific inductions during their first week. The students have access to all relevant course handbooks on the Google classroom platform. All students are given a tour of the delivery site, including the library, teaching rooms and labs. The students interviewed during the accreditation event felt the induction process was good, with plenty of sessions run by the veterinary nursing team, including a trip during the first week to allow the cohort to integrate. Coventry University hosts a fresher's week; however, the veterinary nursing students usually do not attend this due to the course starting earlier than most of the other university courses.	✓	
3.2	Have access to the resources they need to achieve the RCVS Day One Competences and Skills for Veterinary Nurses, QAA HE Benchmarks, and programme outcomes required for their professional role. *Evidence reviewed:* *Induction handbooks* *Library resources*		✓

	ILT resources *Timetabled resources* *TP/aTP risk assessments* *Campus Tour* *Student Interviews* *Inventory of clinical equipment* *Pershore visit report* The library has textbooks, e-books and provides access to human and veterinary nursing journals. When meeting with students during the accreditation, they were clear on how to use the library and thought resources available were good. Access to Coventry University library is also available for students. The clinical skills area was lacking essential equipment, for example, mannequins for intubation, the placing of intravenous catheters and collection of samples. When the students were interviewed during the event, they raised concerns over the lack of equipment and indicated that they did not feel prepared for some skills, such as taking blood samples. As reported elsewhere, some of the first-year cohort do not currently have a placement. At present, these students do not have access to the resources they need to achieve the DOS. This is actioned in Standard 2.		24
3.3	Are provided with timely and accurate information about curriculum, teaching, supervision, assessment, practice placements and other information relevant to the programme. *Evidence reviewed:* *Programme handbooks* *Student handbooks* *Timetables* *Schemes of work* *Module descriptors and guides* *Clinical Placement Handbook* *Placement correspondence* *Student Interviews* *Google classrooms* The evidence provided shows clear communication channels between staff and students via emails, tutorials and google classroom discussions. Students are provided with a range of useful information within the course handbook; timely and accurate information is relayed primarily though the google classroom feed. The University confirmed that student facing documents, including the programme specifications, Course / student handbooks and module		✓

	documentation had been checked by a subject matter expert. The panel found that there were a number of inaccuracies which need to be corrected. These are detailed in Appendix A.			
3.4	To work with and learn from a range of people in practice placements, preparing them to provide care to a range of animals with diverse needs. *Evidence reviewed:* *Practice rotas* *TP/aTP Approval forms* *Clinical Placement Handbook* *Clinical Supervisor training* *VN Futures Week* The documentation demonstrates that guest speakers are embedded throughout the course, with particular focus during VN Futures week, encouraging interprofessional learning. Witness statements are used in placement and uploaded to the students NPL.	✓	
3.5	Are enabled to learn and are assessed using a range of methods, including technology enhanced and simulation-based learning appropriate for their programme as necessary for safe and effective practice. *Evidence reviewed:* *Programme handbooks* *TP handbooks* *Assessment plans* *Module/Unit descriptors* *Clinical supervisor handbook* *List of clinical skills resources* *Campus Tour* *Student Interviews* Students have access to a clinical skills lab at the delivery sites; this is used in groups no larger than 12 students to enable a more interactive teaching approach. The University policy is that students cannot log experience within the DOS recording tool (NPL) within the college environment, i.e., whilst they are practising skills on campus. The programme team were not aware that this was an option and there was a suggestion that it could be used to provide evidence of competency for skills harder to achieve in practice.	✓	
3.6	Are supervised and supported in clinical placement learning in accordance with RCVS Standards Framework for Veterinary Nurse Education and Training.	✓	

	Evidence reviewed: *TP/aTP staffing lists* *TP/aTP student timetabled hours/rotas* *Clinical placement audits* *Training Practice handbook* *Audit strategy for clinical placement tutorials* *Clinical placement visit strategy* *Clinical placement handbook* *NPL Student 1* *NPL Student 2* *Student Interviews* The CPM supports students on placement and risk bands all practices appropriately. All students in placement have an allocated CS to provide support and supervision for completion of the NPL. Students on placement are visited at least every 6 months, with an increased number of visits for higher risk practices.		
3.7	Are supervised according to their individual learning needs, proficiency and confidence. *Evidence reviewed:* *Individual learning plans* *TP/aTP student reports* *Reasonable adjustment policy* *Student support services* *Special Educational Needs support* *Clinical placement tutorial records* The evidence demonstrates that teaching and support is provided according to a student's individual need whilst on campus. The individual learning plans and Reasonable Adjustment Policy (RAP) clearly showed what adjustments and measures are in place for students. Currently, the students are finding their own placements, therefore, discussions over specific learning needs are less likely to take place, unless the student declares this to the practice themselves, which does not demonstrate a robust approach for this requirement.	✓	
3.8	Are allocated and can make use of supported learning time including blended learning and recording completion of RCVS Day One Skills for Veterinary Nursing when in practice. *Evidence reviewed:* *Timetables* *Audit of Day One Skills recording tool* *Practice rotas*	✓	

| | | Memoranda of Understanding *
TP handbook *
Clinical supervisor handbook *

Students are allocated three hours per week to log on their NPL and to work towards achievement of the DOS. Blended learning is not routinely used, however, students have access to a wealth of resources on Google classroom, with some self-directed tasks seen. | | 27 |
|---|---|---|---|
| 3.9 | Are assigned and have access to a nominated academic tutor/lead for each part of the education programme.
Evidence reviewed:
Group tutorial records
Student feedback
Programme specification
Student handbook
Personal tutor allocations
Personal tutor timetables
Learner reviews
Learner tutorials
Student Interviews

The evidence shows that each student is allocated an Academic Tutor (AT) throughout the course. When interviewed, students felt well supported and were all aware who their AT was for the programme. They were confident with the process for contacting them if required and felt able to do so easily.

It was noted during the visit that there are two ATs for the programme; this raised some concern over the number of students each AT must oversee. | ✓ | |
| 3.10 | Have the necessary support and information to manage any interruptions to the study of programmes for any reason.
Evidence reviewed:
Student handbook
Programme handbook
Institutional regulations
Fitness to Practise policy

The students have information provided to them on the process for interruption to study and how to request and apply for this process. The VN programme team stated that they will make email contact with students who have suspended their studies a few times during the year. Contact will be made in April or May to ensure the student is still on track to return the next academic year. There is no set process for returning to study; this is organised between the student and the programme team on | ✓ | |

		a case-by-case basis. A fitness to study certificate is required if they suspended due to medical reasons.		
3.11		Have their diverse needs respected and considered across all learning environments. *Evidence reviewed:* *Equality and diversity policy* *Reasonable adjustment policy* *Fitness to Practise* *Fitness to study policy* The evidence documents a suitable RAP in place for students at the delivery sites, which considers individual needs and circumstances. There are support mechanisms in place including a Pastoral Tutor (PT) who the students contact with any wellbeing concerns.	✓	
3.12		Are provided with support and adjustments in accordance with equalities and human rights legislation and good practice. *Evidence reviewed:* *Equality and Diversity policy* *Reasonable adjustments policy* *Special considerations policy* *Student feedback* *Safeguarding policy* *Clinical placement handbook* There is an *'inclusion team'* whereby students are encouraged to disclose any potential reasonable adjustments requirements prior to starting the programme. There is currently no policy for disclosure to the practice placements; if the student does not want to disclose this to the TP, the VN team consider their ability to work safely in practice. The team confirmed there was a procedure/form to complete but were not able explain the process in detail. The RCVS Panel suggested developing Health and Safety passports, which students can then give to their placements with their reasonable adjustment documented, allowing for adequate support whilst on placement.	✓	
3.13		Are protected from discrimination, harassment and other behaviour that undermines their performance or confidence. *Evidence reviewed:* *Equality and Diversity policy* *Bullying and Harassment policy* *Complaints Policies and reports* *Student feedback*	✓	

	Safeguarding policy *Campus tour* There were many posters displayed around the centre relating to bullying, harassment and discrimination. These were in prominent locations, some with QR codes so students could quickly access more information should they wish. The policies provided also evidenced a clear aim to protect students from discrimination, harassment and undermining behaviours.		29
3.14	Are provided with information and support which encourages them to take responsibility for their own mental and physical health and wellbeing. *Evidence reviewed:* *Student handbook* *Programme handbook* *Personal tutoring system* *Personal tutorial timetables and records* *Student Support Policy* *Student feedback* *Wellbeing lectures/sessions* *Induction timetable* *Online resources* *Clinical supervisor training* *Clinical placement handbook* *Mental Health Posters* *Campus Tour* The evidence demonstrates that students are provided with support in the form of a PT and many mental health support posters around the delivery sites. When asked during the visit, students stated that they felt well supported regarding mental health and wellbeing and all information is clear and readily available to them. The students were all aware of Vetlife and the Mind Matters Initiative (MMI); this is embedded throughout lectures and on the Google classroom platform. This could be further strengthened if similar information was also provided to CSs in placement. Posters were readily displayed around the delivery sites on the tours, some with QR codes giving students quick access to more information as required.	✓	
3.15	Are provided with the learning and pastoral support necessary to empower them to prepare for independent, reflective professional practice. *Evidence reviewed:* *Tutorial Policy* *Personal tutorial records* *Evidence-based professional practice procedures*	✓	

	Module/Unit descriptors *Programme Handbook* *Student feedback* *Assessment examples* *Guidance provided regarding the RCVS DOS* *Professional Behaviour Evaluation policy* *Mental Health Posters* *Campus Tour* *NPL Guide* *Clinical Placement Handbook* Reflection is introduced early in the students' first year in the *Academic Study Skills, Employability and T-Shaped (ASSET)* module. Students are encouraged to reflect when providing course feedback, with a specific reflection section on the form. During the visit, both staff and students said that there was a lack of engagement with providing feedback, however, feedback that was provided was actioned. The panel noted that there is only one PT for the VN programme, who also covers three other land-based programmes. The programme team did not know how many students this PT oversees, but estimates it to be around one hundred.		
3.16	Have opportunities throughout their programme to collaborate and learn with and from other professionals, to learn with and from peers, and to develop supervision and leadership skills. *Evidence reviewed:* *Peer assessment* *TP/aTP handbook* *Student representative meetings* *Reflective logs* *Professional behavioural tool* *Guest (expert) lecturer timetables* *Mentor programmes* *Assessment examples* *Documentation detailing guidance regarding expert witnesses* Feedback mechanisms are in place, with a student representative in each cohort who passes feedback to the teaching team. There is a buddy system in place where 4th year students assist with the 1st year practical sessions. The programme team expressed that this had been challenging this year due to many of the 4th year students being employed in practice, however, it is something they would like to expand. The RCVS panel agreed that this initiative would likely be beneficial.	✓	

3.17	Receive constructive feedback throughout the programme to promote and encourage reflective learning.	✓	
	Evidence reviewed:		
	Feedback policy/procedures		
	Clinical Supervisor records		
	Feedback records		
	Evidence-based professional practice procedures		
	Course Handbook		
	Assessment examples		
	Formative assessment procedures		
	Clinical placement tutorial records		
	Learner reviews		
	Professional Behaviour Evaluations		
	DOS sampling plans		
	Student feedback		
	Students receive timely and constructive feedback throughout the programme. Reflective learning is encouraged after all coursework assignments, where students reflect on their work. This is not routinely done after exams, due to the exam scripts not being released, but if a student is below the pass mark, extra support will be given with an emphasis on reflection with an aim for improvement.		
3.18	Have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice.	✓	
	Evidence reviewed:		
	Student surveys		
	Student representative meetings		
	Clinical placement evaluations		
	Personal tutor records		
	Student interviews		
	Students have opportunities to provide feedback via course reps and student surveys. The reps provide feedback through committee meetings three times a year. The students felt that feedback was listened to and acted upon. The main barrier for feedback was the confidence of students in raising suggestions and comments to their rep, however, this seemed to differ across cohorts. All students have the opportunity to give feedback if they wish. Minutes from student meetings were provided, detailing suggestions and actions.		
3.19	Are empowered to develop their professional behaviours in line with the RCVS Professional Behaviour Evaluation.		✓
	Evidence reviewed:		
	Completed Professional Behaviour Evaluations		

	Professional behaviour guidance to students		
	Professional behaviour guidance to Clinical Supervisors		
	IQA sampling policy		
	Course Handbook		
	Programme Specification		
	NPL Student 1		
	NPL Student 2		
	The evidence reviewed detailed that Professional Behaviour (PB) tutorials take place encouraging students to reflect on their performance. However, it was not clear that PB evaluation was a mandatory requirement for the course. There are currently no formal peer discussion sessions regarding PBs in an online forum, at present any peer discussion is only organised via the students themselves.		

Conclusion:

This standard has been met.

Students have a range of teaching resources available to them and feel well supported within their learning environments. The students have many support systems in place, and they are aware of how to access these both when on campus and whilst on clinical placement. They can achieve the RCVS DOC/DOS for Veterinary Nurses, and by completion of the course they can demonstrate the PBs and compliance with the RCVS Code of Professional Conduct.

The strengthening of resources will improve students learning experiences, and updating the student facing documentation will help to ensure all information is accurate and clear.

Suggestions:
a. Consider developing a form to enable simulation-based learning and demonstration of DOS for students whilst on campus, to aid their learning.
b. A tripartite agreement with the required information about the reasonable adjustments required for students when in placement may be beneficial.
c. Develop CS training and standardisation documents to include mental health training, specifically with links and information about Vetlife and MMI.
d. Consider the use of Health and Safety passports on placement. The student can give this to their placement with their reasonable adjustment documented, allowing for more reasonable adjustments to be put in place to support students.
e. Consider creating a peer discussion forum relating to PBs so students can engage with each other and reflect on their practice.

Actions:
a. Provide evidence to demonstrate that the clinical skills area has adequate equipment for students to develop their skills whilst not in practice.

b.	Update the student facing documents including student handbooks, programme specification and placement handbooks to ensure that all terminology is current and correct. These documents must be submitted to the RCVS with tracked changes. See Appendix 1 for the full details.
c.	Update the student facing documents to ensure that PBs are detailed as a required component of the course.

Standard 4 – Educators and assessors

Theory and clinical learning, and assessment are facilitated effectively and objectively by appropriately qualified and experienced professionals with necessary expertise for their educational and assessor roles.

	Standard met		
	Accredited Education Institutions, together with Centres and Training Practices, must ensure that all educators and assessors:		
	Requirements	**Met**	**Not Met**
4.1	Are appropriately qualified and experienced and always act as professional role models. *Evidence reviewed:* *CV and CPD records* *Professional development plans* *Student feedback* *Lesson observations, walk through and teaching reviews* *Staff Codes of Conduct* *RCVS registration status of personnel (where required)* *Staff interviews* The majority of teaching staff are RVNs with a minimum of a Level 5 qualification in a relevant subject area. The programme team are given protected time and funding to undertake CPD and meet the current RCVS requirement, however the AEI's own policy is 30hrs and this is not being consistently being met by all staff (See standard 1). Personnel leading practical teaching are currently working in clinical practice alongside their role within the centre.	✓	
4.2	Receive relevant induction, ongoing support, education and training which includes training in equality and diversity. *Evidence reviewed:* *CPD records* *CPD policy* *Professional development plans*	✓	

	Annual appraisal process *Induction procedures* *Evidence of Clinical Supervisor training* *Evidence of Clinical Supervisor standardisation* *Completed reviews of Clinical Supervisor suitability (CV, CPD, registration checks)* *Mental health first aid training* *Examiner training and standardisation procedures* *Staff interviews* The delivery team reported that they have received comprehensive staff inductions and have been supported by the teaching observation team. All delivery personnel are encouraged to undertake additional qualifications and external duties to support their own development and educational roles. Compulsory staff training is undertaken in relation to equality and diversity.		
4.3	Have their diverse needs respected and considered and are provided with support and adjustments in accordance with equalities and human rights legislation and good practice. *Evidence reviewed:* *Staff induction policy* *Equality and diversity policy* *Recruitment policy* *Staff support services* *Disability policy* *Health and safety policy* *Staff interviews* There are comprehensive policies in place to support the diverse needs of educators and assessors. Evidence of reasonable adjustments for students has been viewed and is complimented by assistance from the inclusion team.	✓	
4.4	Have supported time and resources to enable them to fulfil their roles in addition to their other professional responsibilities. *Evidence reviewed:* *Staff timetables* *Clinical placement rota* *Job descriptions* *Staffing allocations* *Memoranda of Understanding* *Tutorial records* *Staff interviews*	✓	

	The programme lead is given 360 hours of teaching remission in respect of their programme lead role and in line with the delivery sites' work-load model. However, there is still a large number of teaching hours per week, for the VN programmes as well as other animal care programmes, in addition to line manager responsibilities, which may need reviewing.			
4.5	Respond effectively to the learning needs of individuals. *Evidence reviewed:* *Student Feedback* *Student representative meeting minutes* *Personal tutorial timetables / minute* *Clinical placement records* *Reasonable adjustments records* *Lesson observations* *Student support services* *Special educational needs support* *Student interviews* The programme team work very closely with the inclusion team and pastoral team to ensure that all learning needs are supported, and reasonable adjustments are implemented where necessary. Students reported that they felt well supported.	✓	
4.6	Are supportive and objective in their approach to student supervision, assessment and progression and appropriately share and use evidence to make decisions on student assessment and progression. *Evidence reviewed:* *Qualification assessment strategy* *Schedule of planned assessment* *Clear evidenced-based rationale for calculation of pass mark / cut score in assessment* *Clinical placement records/action plans* *Day One Skills recording tool* *Review Documents* *Day One Skills IQA strategy* *Self-assessment report* *Tutorial records* *Student interviews* The evidence highlighted that students are well supported both on campus and in placement. University regulations are transparent and allow for robust decisions in relation to progression.	✓	
4.7	Liaise, collaborate and action constructive feedback generated by colleagues, students and stakeholders to enhance their teaching assessment and to share effective practice.		✓

	Evidence reviewed: *Policy for recruitment and training of assessment staff / moderators* *Practice Principal meeting minutes* *Standardisation meeting minutes* *External Examiner reports* *Individual learning plans* *Practice Principal meetings* *Teaching observations* *Student feedback* *Stakeholder feedback* *Meeting minutes with actions and dissemination plans* *RCVS or internal action plans and responses* *Virtual Google classroom tour* *Staff interviews* *Student interviews* Evidence was provided detailing student and colleague feedback in relation to teaching and assessment, however, there was no evidence of feedback from industry stakeholders. In addition, there is no evidence of sharing effective practice between each delivery site, which was specifically highlighted within teaching materials. It was evident that both sites have differing session learning outcomes and therefore the content being delivered is different despite both cohorts engaging with the same modules and summative assessments.		
4.8	Are expected to respond effectively to concerns and complaints about public protection, animal welfare and student performance in learning environments and are supported in doing so. *Evidence reviewed:* *Complaints procedure* *Fitness to practise policy* *Retention records* *TP/aTP Risk register* *Minutes of meetings, action plans and responses* There are comprehensive procedures in place to ensure that concerns and complaints can be raised and considered, however, the programme team was not able to provide an overview of this. This has also been discussed in Standard 2 where there is an associated action.		✓
4.9	Ensure the programme lead is a Registered Veterinary Nurse (RVN) who has substantial experience of veterinary nurse education and training at a suitable level for the qualification(s) being delivered and holds a recognised teaching qualification. *Evidence reviewed:* *CV and CPD records*	✓	

Programme lead interview		
The programme lead is an RVN with suitable qualifications and experience within education, however, they have only been in post since June 2022. They are currently being supported by the senior management team and this entails ongoing support. The external examiner report suggested that the programme lead is supported by a specific Veterinary Nursing mentor, which the University and centre agreed would be beneficial.		37

Conclusion:

This standard has been met.

The programme is delivered by qualified educators and assessors who provide theory and clinical learning with processes in place to ensure robust decisions on student progression. The University and its delivery sites are able to respond effectively to the learning needs of individuals, providing effective staff training and support in an inclusive environment.

Suggestions:
a. Consider reviewing the workload allocation for the programme lead to ensure that they have time to develop their own skills as a new programme lead, as well as being able to further develop the programmes.
b. Identify a VN specific mentor to support the new programme lead, as suggested within the EE report.
c. Ensure that there is parity between session learning outcomes and/or module content between both programmes.

Actions:
a. Ensure that there is a process in place to obtain industry feedback for future programme/module changes.

Standard 5 – Curricula and assessment

Curricula and assessments are designed, developed, delivered, evaluated and validated to ensure that students achieve the RCVS Day One Competences and Skills for Veterinary Nurses, QAA HE Benchmarks for Veterinary Nurses (for HE) and outcomes for their approved programme.

	Standard not met		
	Accredited Education Institutions, together with Centres and Training Practices, must ensure:		
	Requirements	**Met**	**Not Met**
5.1	Curricula are mapped and fulfil the RCVS Day One Competences and Skills for Veterinary Nurses, QAA HE Benchmarks for Veterinary Nurses and programme outcomes. *Evidence reviewed:* *Programme specification* *Programme handbook* *Programme level mapping documents* *RCVS DOS/DOC Mapping 2023 validation/accreditation* A mapping document was provided showing how each DOC/DOS is being covered in each of the modules. Further mapping was provided against each learning outcome with the module descriptor. The panel found that there are differences in the mapping between these documents. Some of the DOC/DOS have been mapped inaccurately and some have not been mapped at all. Further information is contained in Appendix A in order to support the programme team to rectify this issue.		✓
5.2	Programmes are designed, developed, delivered, evaluated and improved based upon stakeholder feedback. *Evidence reviewed:* *Self-assessment reports* *Annual programme reviews* *Periodic programme reviews* *Regulatory reports* *Programme Feedback* *Quality and Standards meetings* *Stakeholder meeting minutes* *Action plans following stakeholder meetings* *Evidence of implementation of feedback* There was clear evidence to show that the delivery team had been consulted on the development of the proposed programme. The final year		✓

	BSc (Hons) students confirmed that they had been consulted about the proposed programme structure and modules and confirmed that they liked the new programme design. The University confirmed that feedback on the proposed programme had been provided by the External Examiner and this had been actioned, although evidence of this was not provided to the panel. Members of the course team who also work in veterinary practice had provided feedback, but this lacked independence and the modules would benefit from feedback from current and future employers.		
5.3	Curricula remain relevant in respect of contemporary veterinary nursing practice. *Evidence reviewed:* *Curriculum meeting minutes* *External Examiner reports* *Stakeholder feedback* *Module/unit documents* The programme team reviewed the existing module design and integrated Anatomy and Physiology throughout the modules. A new module, *'Introductory Veterinary Nursing',* has been developed. In addition, the Clinical placement, NPL Completion and OSCE assessment has been moved to a Zero credit module called '*Veterinary Nursing Skills and Competencies'.* When questioned, the university personnel and delivery team confirmed that prior to submission to the RCVS, the following had been checked within the programme documentation and modules: • Accurate DOC/DOS mapping. • Appropriate use of command verbs within the learning outcomes to distinguish between the different academic levels. • Appropriate use of assessments to fully assess the learning outcomes. • All learning outcomes are included in the assessment strategy. • Indicative content had been included. • All DOC are sampled within an unseen/closed book assessment. The panel, however, identified inaccuracies in the documentation, which therefore raised a concern regarding the effectiveness of the university process. There are extensive issues across a number of modules and, as a result, these require a full review. Full details have been provided in Appendix A.		✓

	Level 4 and 5 modules are delivered by separate teams across both delivery sites. The panel viewed examples of teaching material and found significant differences between the sites. Whilst it is agreed that individual tutors' teaching style can be reflected in the teaching material, it was felt that there needed to be a standardised approach with session Indicative Learning Outcomes. In addition, it was felt that that using a collaborative / standardised approach to teaching material across delivery sites should be explored.		
5.4	Curricula and assessments weigh theory and practice learning appropriately to the programme. *Evidence reviewed:* *Programme specifications* *Mapping to RCVS Veterinary Nursing Registration Rules* *Module/unit documents* *Timetables* *Assessment matrices* During the panel discussion, it became evident that the programme team primarily teach / practically demonstrate the clinical skills that are assessed within the OSCE. This was further evidenced by a lack of clinical equipment and models available at the delivery sites. The programme team frequently gave examples about teaching the 'gold standard OSCE way', distinguishing this from what may be happening within the clinical environment, but left responsibility of teaching many of the clinical skills to the placement teams.		✓
5.5	Curricula provide appropriate structure and sequencing that integrates theory and practice at increasing levels of complexity. *Evidence reviewed:* *Timetables* *Assessment strategies* *Curriculum map (include vertical and horizontal integration)* *Programme handbooks* *Module/unit documents* The panel viewed the learning outcomes against the sample assessments provided and concluded that there was a lack of constructive alignment. In particular, there was a lack of congruence between the command verbs used, or the wording of the learning outcome, and those used within the assessment. It is appreciated that the assessments viewed did not necessarily relate to the proposed programme, but the panel checked this for the current programme and the findings were the same. The team presentation showed how they structured the programme to ensure increasing levels of complexity. This included the types of		✓

	assessment used for each of the academic levels. There is preparation for students completing the BSc (Hons) to complete a module on research design and analysis at level 5. It was not evident within the modules that the unseen closed book assessment increased in complexity throughout the programme. The assessments are largely written reports and case studies, with very little oral or presentation skills at level 5 to prepare students for this aspect of assessment within level 6 modules.		
5.6	Curricula and assessments are structured and sequenced to enable students to manage their theory and practice learning experience effectively, with progression determined at appropriate points. *Evidence reviewed:* *Timetables* *Clinical placement plans* *Assessment matrix/ overview* *DOC/DOS Mapping* *Student progress reports* *Student handbook* *Assessment plans* *Board of Examiners/progression meeting minutes* The panel was unable to confirm that this requirement is met; the modules reviewed contain inaccuracies that need to be addressed. Further information is detailed in Appendix A.		✓
5.7	A range of appropriate assessments are delivered, within the educational setting, to accurately measure the knowledge, skills and understanding outlined in the programme. At least one summative assessment must be in the form of an Objective Structured Clinical Examination (OSCE) or similarly robust, objective and evidenced-based form of practical examination to test the safe and effective acquisition of a broad range of skills and competences outlined in the RCVS Day One Competences and Skills for Veterinary Nurses. *Evidence reviewed:* *Student feedback* *Moderation meeting minutes* *Exam Board minutes* *Examination rules* *Examination Policy and procedure documents* *Examples of assessment material for each different assessment methodology* *Assessment blueprint* *Assessment strategy* *Assessment rationale* *Examiner handbook* *Student handbook* *Security policies*	✓	

	This requirement has been evidenced by the programme team. A range of assessment methodologies have been applied, including seen and unseen assessments. The majority of the modules referenced to the RCVS DOS contain two assessments (coursework and a written examination). The coursework is typically a written assignment in the form of either a report, literature review, case study, review or reflective essay. The closed book written examination typically includes short answer and a choice of long answer questions. Some modules contain multiple choice question examinations. More novel assessment methods could be considered, such as the development of client leaflets, posters and podcasts. In some modules, the assessment for the FdSc and BSc (Hons) students differed; this is an unusual approach given that both cohorts are completing the same module. For example, in the '*Applied Anaesthesia*' module the BSc (Hons) students are required to undertake a literature review and the FdSc students undertake a case study. There is an OSCE, as a summative assessment, included in the *Veterinary Nursing Skills and Competences*. There are plans to develop three new OSCE stations during this academic year. It is suggested that a plan is drawn up to identify gaps in the assessment of DOS via the OSCE and draw up a timeline for the planned development.		
5.8	Students are assessed practically across clinical placement settings and learning environments as required by their programme. *Evidence reviewed:* *Day One Skills recording tool* *Observation records* *Examination papers and mark sheets* *Student feedback records* *Sampling plan* Arrangements are in place for students who have secured a placement to be assessed against the DOS and PB within a clinical environment. The NPL is utilised to record progress. The programme team use the facilities at the Moreton Morrell site to deliver the OSCE. The programme team were unaware that they could also utilise the animal unit to log the opening and practising of DOS listed within the NPL, especially where these are not seen routinely within the students' clinical environment.	✓	

5.9	Processes are in place to establish a high degree of validity and robustness to support the decisions made based on the results of the assessment. *Evidence reviewed:* *Examination policy and procedure documents* *Rationale for the Design of examinations* *Moderation policies* *Assessment blueprint* *Marking schemes* *Training and standardisation of markers* *Test and item statistical analysis mechanisms* *Statistical analysis of item level and question level data such as analysis of question difficulty* *Standard setting documentation* *Mechanisms to detect plagiarism* *Assessment appeals policy* *Invigilation arrangements* *Assessment validation reports* The institution clearly has processes in place to establish validity and robustness to support assessment decisions. However, the use of blueprinting to align learning outcomes and support content validity is not supported by the University. This could lead to under or oversampling of the curriculum or course content.		✓
5.10	Moderation processes are in place and demonstrate that assessment is fair, reliable and valid. *Evidence reviewed:* *Student feedback* *Moderation meeting minutes* *Exam Board minutes* *Moderation protocol* *Internal verification meetings* *External examiner reports* *Responses to action plans* *Sampling strategy* *DOS sampling plans* Overarching moderation processes for written assessments and the OSCE are in place and demonstrate that assessment is fair, reliable, and valid.	✓	
5.11	Mechanisms are in place to minimise bias in all assessments. *Evidence reviewed:* *Examination Policies and Procedures* *Examiner handbook*	✓	

	Rationale for the design of the examination *Invigilation arrangements* *Assessment validation reports* *Examiner standardisation processes* *Moderation processes* Bias is clearly minimised for written work and the academic team have a clear mechanism to minimise bias for the OSCE.			
5.12	Adjustments are provided in accordance with relevant equalities and human rights legislation for assessments in theory and practice. *Evidence reviewed:* *Reasonable adjustment policy documentation* *Mitigating circumstances policy* *Records of reasonable adjustment* *Fitness to practise policy* This requirement has been well evidenced by the programme team. The institution has clear processes and procedures in place to provide adjustments. Students' diverse needs are carefully considered by the relevant members of the institution and adjustments are actioned in alignment with legislation and RCVS requirements.	✓	
5.13	Clinical placement assessment is facilitated and evidenced by observations and other appropriate methods. *Evidence reviewed:* *Moderation policy* *Day One Skills recording tool* *Schedule of activity* *Clinical Supervisor observation records* *DOS sampling plans* Visits to clinical placements are undertaken and documented on the visit form. The assessment of students in clinical placement is undertaken by CSs that are trained by the WCG placement team. The CSs are not directly observed by the CPMs whilst students are in placement. The CPMs said that this was something they are planning to implement but has not been actioned yet. Incorporating direct observations into practice visits should be implemented and documented to evidence this.		✓
5.14	Students' self-reflections contribute to, and are evidenced in, assessments.	✓	

	Evidence reviewed: *Student feedback forms* *Tutorial reports* *Clinical placement reports* *Reflective logs* *Example assessments* *Quality assurance reports* *Professional behaviour evaluations* Reflection is embedded into the assessment process, and it is clear that the University aims to develop reflective learners.		
5.15	There is no compensation between assessments that address the RCVS Day One Competences and Skills for Veterinary Nurses. *Evidence reviewed:* *Module specifications* *Candidate handbooks* *Student programme handbooks* The panel was satisfied that there was no compensation within or between modules referenced to the DOC/DOS and this had been detailed in university regulations.	✓	
5.16	Ensure modules/units that address the RCVS Day One Competences for Veterinary Nurses include unseen examination as an element of the assessment strategy. *Evidence reviewed:* *Module/unit mapping* *Assessment methods* *Assessment compensation policy* All modules mapped to the DOC include an unseen examination. The panel found that there were a number of DOC which are not mapped to an unseen / closed book element of the assessment including DOC 14, 19, 21, 22, 31, 33 and 34. Consideration should be made to including these were possible.	✓	

Conclusion:

This standard is not met.

The programme team undertook a review of the programme and as a result decided to integrate anatomy and physiology throughout the modules. A new module *'Introductory Veterinary Nursing'* was developed in its place. The panel were receptive to this change. The process for reviewing the modules prior to submission for the accreditation event was not fully effective, and the majority of the modules

require further work in relation to content, use of command verbs at the correct level as well as referencing to the DOC / DOS.

University wide policies in relation to assessments and moderation appear to be sound, but the lack of assessment blueprinting could result in poor alignment between the learning outcomes and the assessments.

Suggestions:
   a. Standardise the teaching material and session intended learning outcomes across delivery sites.
   b. Further develop the module assessments to enhance the requirement for increasing levels of complexity across the levels of the programme.
   c. Further explore alternative assessment approaches that are transferrable to industry and relevant to current practice.
   d. Consider using the facilities at the delivery sites for assessment opportunities.
   e. Consider the inclusion of DOC 14, 19, 21, 22, 31, 33 and 34 as an element within unseen / closed book examinations.

Actions:
   a. Check the mapping of the DOC / DOS to the modules is accurate in both content and context. Provide the revised mapping document to evidence that this has been completed.
   b. Provide revised curriculum review processes to include feedback from all stakeholders including employers and future employers.
   c. Provide evidence that the External Examiner commented on the revised modules and these comments were taken on board.
   d. Review the process for checking that modules meet both the University and RCVS requirements in relation to design and content.
   e. Undertake a full review of the modules to include module titles, learning outcomes, DOC/DOS mapping and assessments. The modules must be provided with tracked changes in the first instance, and a rationale provided for the changes being made.
   f. Embed the teaching and demonstration of the DOS within the delivery site and ensure that there is sufficient equipment available to undertake this.
   g. Ensure that the learning outcomes and assessments are aligned with the use of appropriate command verbs at the correct level.
   h. Develop blueprints for written assessments and examinations to evidence appropriate sampling of the curriculum.
   i. Implement direct observations of Clinical Supervisors while students are on placement and update visit paperwork to evidence this.

Standard 6 – Effective clinical learning

All students are provided with safe, effective and inclusive clinical learning experiences. Each clinical learning environment has the governance and resources needed to deliver education and training. Students actively participate in their own education, learning from a range of people across a variety of settings.

		Standard not met		
		Accredited Education Institutions, together with Centres and Training Practices, must:		
	Requirements		**Met**	**Not Met**
6.1	Ensure clinical learning facilities are adequate to support and deliver the RCVS Day One Skills for Veterinary Nurses. *Evidence reviewed:* *TP/aTP list including RCVS TP number* *TP/aTP approval and monitoring documentation for UK practices* *TP/aTP approval and monitoring documentation for international practices* *Centre approval forms* *Consumable and equipment lists* *Memoranda of Understanding* *TP/aTP risk assessments* *Delivery team feedback* *Clinical placement manager team feedback* *Campus tour* *Student Interviews* The tour of the Moreton Morrell campus showed that the clinical skills area is lacking equipment to support and deliver the DOS. There was no kennel, to allow students to practise and demonstrate how to approach animals, no intravenous catheter models and no intubation mannequins. Student interviews conducted at the visit displayed that they feel there is some equipment missing, with no opportunities to practise blood sampling technique. TP/aTP documentation is in place and there is an appropriate risk monitoring strategy in place for practices. However, at present not all students have a placement.			✓
6.2	Ensure students are enrolled with the RCVS prior to undertaking clinical placement (in order to comply with legislation). *Evidence reviewed:* *Enrolment policies and procedures* *Delivery team feedback* *Clinical placement manager team feedback* *Clinical Placement Handbook*		✓	

				✓
	The evidence reviewed demonstrates that students are enrolled with the RCVS prior to undertaking clinical placement.			
6.3	Ensure students are actively learning and adequately supervised in all clinical learning environments. *Evidence reviewed:* *TP/aTP Rotas* *Programme timetables* *Clinical placement records* *Job descriptions for educators, assessors and support staff* *Student feedback* *Quality assurance reports* *Clinical placement evaluations* *Student placement handbook* *Delivery team feedback* *Clinical placement manager team feedback* Whilst students are on campus, they are encouraged to be active learners and they are supervised adequately by the delivery team. Following appraisal of the evidence provided, it was highlighted that not all students are actively learning during term time. This is due to the delay in some students obtaining a clinical placement. Whilst the CPMs ensure that CSs are registered professionals, their CVs are not checked, so adequate supervision is not ensured. During discussion with the CPMs it was ascertained that there is a verbal interview prior to CS training to discuss clinical expertise and suitability as a CS, however, this process should be formalised.		✓	
6.4	Ensure clinical learning environments are provided for every student, within a RCVS listed training practice or auxiliary training practice, for a minimum duration of hours as stipulated in the RCVS Veterinary Nurse Registration Rules. *Evidence reviewed:* *Clinical placement lists* *Memoranda of Understanding* *Registers* *Record of Employment* *Programme specification* *Timetables* *International clinical placement lists* *Self-Assessment Reports* *Delivery team feedback* *Clinical placement manager team feedback* *RCVS TP visits*		✓	

	Student feedback		49
	There are concerns regarding a significant number of students progressing through year 1 on both the FdSc and BSc VN course who have yet to be allocated a clinical placement position. The panel discussed this concern with the delivery team and CPMs who indicated that the main barriers to students finding placements are geographical and a lack of CSs in TPs.		
	The college has put measures in place to provide better transport links for students through the provision of alternative accommodation. It was also suggested that students without driving capabilities were at a disadvantage.		
	The programme specifications outline expectations from students and how the CPMs will support students in obtaining a placement. It is not clear in the documentation that the overall responsibility is with the AEI, which is a mandatory component of placement provision for RCVS accredited veterinary nursing programmes.		
	Feedback from staff and students differed throughout the accreditation event, which revealed a lack of transparency regarding who is responsible for ensuring all students gain a clinical placement. Students also felt that the communication regarding the importance of obtaining a TP agreement in a timely fashion was not clear.		
6.5	All students must have sufficient time within the programme to achieve the Veterinary Nurse Registration Rules hours requirement. *Evidence reviewed:* *Timetables* *Planned placement model* *Programme specification* *Individual learning plans* *UK clinical placement lists* *International clinical placement lists* *Delivery team feedback* *Clinical placement manager team feedback* *Student feedback* Although there are concerns with ensuring students obtain clinical placements in a timely manner, all students are provided sufficient time within the programme to achieve the RCVS VN Registration Rules hours requirements. Reasonable adjustments are made for students with extenuating circumstances and those delayed in obtaining clinical practice.	✓	

6.6	Ensure all students are allocated a clinical supervisor responsible for confirming competency of RCVS Day One Skills for Veterinary Nurses. All clinical supervisors must be RVN or MRCVS (UK practising), be experienced and able to demonstrate an experienced level of clinical skills and ongoing professional development. *Evidence reviewed:* *CVs* *Records of co-ordination and continuity of support and supervision* *Records of CPD to support role* *Job description* *TP/aTP approval forms* *Clinical Supervisor checks made by provider* *Delivery team feedback* *Clinical placement manager team feedback* The CPM Team ensure all CSs are RVN or MRCVS (UK Practising) by checking the register and requesting CPD records. Currently, an informal conversation will be held between the prospective CS and the CPM to discuss appropriateness of the CS for the role. It is suggested that the CPM request and review prospective CS's CVs prior to the initial training event.	✓	
6.7	Maintain accurate records of student clinical learning environment attendance and provide these to RCVS upon request. *Evidence reviewed:* *Registers* *Records of Employment* *Records of training* *Delivery team feedback* *Clinical placement manager team feedback* The documentation shows that accurate records are kept of students' clinical learning. For FdSc students the Record of Training (RoT) is checked after each 16-week placement block. For BSc students the RoT is checked annually. There is no set deadline for this, more a suggestion to the students. It may be beneficial for these to be checked at specific points within the placement, and therefore hours completion being checked more regularly.	✓	
6.8	There must be sufficient TP support available for all recruited students. *Evidence reviewed:* *TP/aTP lists* *MOUs* *Secondment agreements and records* *Evidence of communication with primary affiliated centres*		✓

	TP/aTP visit strategy *Delivery team feedback* *Clinical placement manager team feedback* Following student and delivery team feedback, there is significant concern regarding sufficiency of TP numbers. During discussion with delivery team, it was noted that the current cohort is larger than previous years, so the team feel this is a contributing factor. The panel commented, however, that for small cohort sizes there are also many students who have not obtained a clinical placement. Although there appeared to be a significant list of affilaited TPs shown in the evidence, numerous students were not provided with a suitable TP for clinical placement. A plan is required to provide sufficient TPs for all students as listed in the actions.		
6.9	Ensure that training practices either hold a primary affiliation with the Accredited Education Institution itself or its delivery site, or, where the training practice is to hold a secondary affiliation, that the training practice also holds a primary affiliation elsewhere and is an RCVS listed practice. *Evidence reviewed:* *TP Memorandum of Understanding* *aTP Memorandum of Understanding* *TP / aTP lists* *Student secondment records* The documentation reviewed provides evidence that the policies are followed. Risk assessment and banding is in place for practices to ensure adequate support and guidance is provided, although the existing MOU could be strengthened in this regard.	✓	
6.10	Ensure that where a secondary affiliated training practice is used there is a Memorandum of Understanding and robust communication between the Centre responsible for the secondary affiliated training practice and the Accredited Education Institution. *Evidence reviewed:* *Communication records* *Memoranda of Understanding* The evidence reviewed shows that policies are in place including MoUs for when a secondary aTP is used. These practices are also risk-banded as per the policies.	✓	
6.11	Be compliant with the RCVS standards framework for veterinary nursing education, including clinical requirements for all periods of learning	N/A	

	undertaken outside the UK and comply with all relevant legislation and UK animal care and welfare standards (including the Veterinary Surgeons Act 1966). *Evidence reviewed:* *International placement policies* *Approval and monitoring records* *International training practice lists* There are currently no international clinical placements utilised.			
6.12	Ensure clinical learning experiences are tailored to the student's stage of learning, competences and programme outcomes. *Evidence reviewed:* *Rotas* *Timetables* *Day One Skills recording tool audits* *Clinical placement records and action plans* *Individual learning plans* *Student handbooks* *Placement handbooks* *Clinical Supervisor training and standardisation* *Delivery team feedback* *Clinical placement manager team feedback* The delivery team utilise a standardised approach across both campuses with a holistic approach to ensure students' clinical learning experiences are tailored to individual stages of learning and competences. The CPMs carry out reviews with all students whilst on clinical placement to ensure CSs are tailoring the learning and utilisation of the NPL. This is also encouraged through the CS training and standardisation events.	✓	
6.13	The veterinary team contribute to learning in the clinical environment in accordance with the RCVS Codes of Professional Conduct. *Evidence reviewed:* *Clinical placement records* *Staff Codes of Conduct* *Staff rotas / timetables* *Witness statements* *Team meeting minutes* *TP/aTP approval and audit forms* *Memoranda of Understanding* *TP/aTP risk assessments* Whilst the CPMs check rotas during TP visits, there is a lack of evidence to ensure that the veterinary team are contributing to student learning in CP or formally discussing student progress. During discussion with the		✓

CPMs, it was noted that there is no formal communication with the delivery team to discuss students' progress on clinical placement.		

Conclusion:

This standard has not been met.

Not all clinical learning environments currently have adequate resources to deliver training, specifically the teaching facilities at the centre. In addition, students are not all currently provided with safe, effective, and inclusive clinical learning experiences. There is insufficient documentation to support students learning from a range of people, specifically whilst on placement.

Suggestions:
a. Have a policy in place for CPM team to review CVs for prospective CSs.
b. Consider implementing a formal process for interviewing prospective CSs.
c. Implement a procedure to ensure BSc students have placement acceptance prior to starting the course.
d. Consider increasing the frequency of RoT checks, specifically for the BSc students.
e. Consider strengthening the MoU to include roles and responsibilities of educators and assessors and include the requirement of allocated time for completion of the DOS.

Actions:
a. Provide an updated clinical inventory, with the teaching sites having adequate equipment to teach the DOS.
b. Amend and update student facing documentation to reflect the RCVS requirement for clinical placement allocation and provide evidence to demonstrate implementation.
c. Produce a plan for providing sufficient TPs for all recruited students.
d. Amend and update TP/aTP approval and audit forms to ensure the contribution of the veterinary team in the learning environment is considered.
e. Provide evidence of formal meetings between the delivery team and clinical placement managers to monitor students in clinical learning environments.
f. Provide evidence of additional support and learning opportunities for students who have not yet obtained a clinical placement.