

Summary	
Meeting	Education Committee
Date	08 February 2022
Title	Education Committee Minutes of the meeting held on 16 November 2021
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Decisions required	To note
Attachments	Classified Appendix
Author	Britta Crawford b.crawford@rcvs.org.uk / 020 7202 0777

Classifications		
Document	Classification¹	Rationales²
Paper	Unclassified	
Classified appendix		1

Minutes of the meeting held on 16 November 2021

Members:	Dr Niall Connell	
	Ms Linda Ford	- Lay member
	*Professor Tim Parkin	
	Mrs Susan Howarth	
	Dr Susan (Sue) Paterson	- Chair
	Professor Chris Proudman	
	Professor Stuart Reid	
	Professor Susan Rhind	
	Dr Colin Whiting	
	*Ms Anna Bradbury	- Student representative
Ms Kate Dakin	- Student representative	
By invitation:	Dr Melissa Donald	- CertAVP Subcommittee Chair
	Mr Danny Chambers	- Adv Practitioner Panel Chair
	Dr Joanne Dyer	- PQSC Chair
	Dr Mandisa Greene	- VetGDP subcommittee Chair
	*Professor Nigel Gibbens	- Chair of Accreditation Review Group
In attendance:	Mr Duncan Ash	- Senior Education Officer
	Dr Jude Bradbury	- Examinations Manager
	Dr Linda Prescott-Clements	- Director of Education
	Mrs Britta Crawford	- Senior Education Officer
	Mr Jordan Nicholls	- Lead for Undergraduate Education
	Ms Beckie Smith	- Education Assistant
	Ms Abigail Sims	- Education Assistant
	Ms Jenny Soreskog-Turp	- Lead for Postgraduate Education
	Mr Kieran Thakrar	- Education Assistant
	Mrs Kirsty Williams	- Quality Assurance Manager
	Ms Lizzie Lockett	- CEO
	Dr Kate Richards	- Officer Team Observer

Apologies for absence and welcome

1. Apologies were sent from Tim Parkin, Chris Proudman, Anna Bradbury and Nigel Gibbens.

Declarations of interest

2. There were no declarations of interest.
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Minutes

3. The minutes of the meeting held on 14 September 2021 were agreed as an accurate record.

Matters arising

4. The Committee heard that the actions from the minutes had been completed or were included in the agenda.
5. There was a question raised about whether or not Education Committee could reverse any of the reductions to the temporary EMS requirements. The question was specifically relating to the recent Taskforce decision to reduce the class of 2023's clinical EMS requirement to 13 weeks, in that given this decision was taken nearly two years before the students would be graduating, there may be a chance that students could achieve more EMS weeks in that time. It was also reported anecdotally that some students were being questioned by their peers as to why they were doing more than the reduced requirement.
6. It was clarified that these requirements had been communicated as a minimum requirement, and RCVS had been widely encouraging students to do more EMS if they could, once they had met the reduced requirement. There were also other anecdotal reports that students were happy to do more EMS, but some were finding it difficult to find placements as a result of the pandemic.
7. It was agreed that any previous reductions to the EMS requirement would not be reversed, or any current temporary requirements increased, as this would be unfair on the students.

Education Department update

8. The Director of Education, Dr Linda Prescott-Clements, gave an oral update on the work of the Education Department. The Committee heard that the department was running lunchtime and evening drop-in sessions via zoom for graduates and advisers with questions about the VetGDP. These sessions had been variable in terms of participation, but the participants in the most recent session had been fully engaged and it was a useful event.
 9. The department attended the virtual EAEVE general assembly and there had been an informative discussion on how different establishments had dealt with the impact of Covid-19 and the similarities of experiences. EAEVE would also be looking at their accreditation standard operating procedures next year.
 10. The new standards policy had been agreed at Council last week with a little more work to do to make sure that everything is operational in time for implementation. There will also be a recruitment drive for new accreditation panel members and a programme of training will be developed. The department was asked to make sure references to health and safety requirements in the EMS policy encompassed international placements as well as UK-based ones and that correct references were made to Scottish agencies where appropriate. It was also suggested that the term 'exotics' was checked to see if it was the most appropriate terminology.
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Action: Review document to check references to H&S, EMS and terminology of 'exotics'

11. The CPD administration fee approved at the previous Education Committee meeting will be discussed at Finance and Resource Committee at their first meeting in the next year.
12. The Committee noted that Dr Joanne Ireland had received her Fellowship for the thesis "*Randomised controlled trial of Clostridium botulinum type C vaccination for the prevention of Equine Grass Sickness.*"

Primary Qualifications Sub-Committee (PQSC)

Report of the sub-committee held on 11 October 2021.

13. Minutes from the PQSC meeting held on 11 October 2021 were received and noted. Two items were highlighted which did not form part of the Education Committee agenda: the substantive change to the programme delivered by St George's University (SGU) and the guidance regarding the teaching of core UK species on overseas programmes.

Massey Visitation and Sydney Visitation

14. See Appendix 1

EMS

Stakeholder Event

15. It was noted that a stakeholder event would be taking place on 22 November to consider the future implementation of EMS. Up to 80 different stakeholders would be attending with representation from vet students, new graduates, all UK vet schools, major employers and vet societies, along with RCVS Committee representation including some members of Education Committee.
16. It was explained that the aim of the day was to look to the future and consider potential new ways of delivering EMS, noting that there are challenges with the current system and it is likely that in the longer-term future there will be increased demand as a result of increasing student numbers, alongside a threat of reduced availability of placements following the pandemic and other workplace priorities. A report and feedback from the event would be put to Education Committee at its next meeting.

Day 1 Competences

17. The Veterinary Nursing (VN) Day One Competences, Skills and Professional Behaviours for Veterinary Nurse (D1C's) and the Veterinary Surgery Day One Competences (D1Cs) are generally drafted to be in alignment. The VN D1Cs had recently been reviewed by the Mind Matters team at RCVS, and they had made an update to the competence around situational
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awareness. As such, it was then also recommended to review the corresponding veterinary D1C on situational awareness.

18. Education Committee was asked to consider that this D1C (number 9) was updated from:

“Demonstrate situational awareness through navigating and responding to the economic and emotional context in which the veterinary surgeon operates.”, to:

“Demonstrate situational awareness through navigating, responding and reflecting on the economic and emotional context in which the veterinary surgeon operates.”

19. Education Committee agreed to approve the update.

Action: update D1C document and add to website

Statutory Membership Exam (SME)

SME Guidance

20. The committee was asked to review the SME Guidance proposed for 2022 which included new sections on support for refugees and the wearing of religious items during examinations. It was noted that additional benefits were now available to refugees that were not present when the document was initially drafted. The following benefits were recommended to be added to the guidance:

- Financial support for English language testing
- Financial support for the SME fee
- Free membership to various veterinary professional organisations
 - British Cattle Veterinary Association
 - British Equine Veterinary Association
 - British Small Animal Veterinary Association
 - British Veterinary Association
 - RCVS Knowledge
 - Veterinary Management Group

21. It was noted that section 6.5 of the guidance did not account for the changes made regarding the wearing of religious, cultural or medical items now included in section 6.8.4. The committee requested alterations to be made to ensure there was consensus throughout the document.

22. A query was raised regarding exam length for section 6.7.1. See Appendix 1.

23. The committee approved the SME Guidance 2022 for publication subject to the aforementioned alterations.

Action: relevant updates to be made, and guidance to be published on RCVS website

Veterinary Council of Ireland (VCI) proposal update

24. The VCI has asked the RCVS if their Statutory Membership Examination candidates could take the RCVS written papers. This would typically involve the addition of 4-10 candidates per year. The VCI will continue to run their own practical component of the examination. The committee was asked to review the proposal outlining the provision and costings between the RCVS and VCI for this purpose.
25. A query was raised as to whether this model could be used for other countries to enable mutual recognition. The RCVS advised that valid practical examinations would also be required in that country making things more challenging although not impossible.
26. The committee approved the proposal for implementation.

Recognition of EAEVE accredited programmes (policy on back dating)

27. The Committee heard that Council had agreed that, when considering applications for registration from EU graduates from EAEVE approved/accredited vet schools, the RCVS would no longer follow EAEVE's policy of backdating an establishments accreditation status by two years when they had been awarded 'non-accreditation' status and had subsequently had a successful revisit two years later. Moving forward, the RCVS would keep their own records and honour the accreditation from the date of award. The Committee was reassured that very few people would be affected.

Veterinary Graduate Development Programme (VetGDP) Update

28. The committee received and noted an update on the work of the VetGDP including engagement statistics. The Education department and Communications team were praised for their effective collaboration to engage the profession with the programme.

Minutes from the VetGDP subcommittee held on 30 September 2021

29. The Chair of the VetGDP subcommittee gave an overview of the discussions at the first meeting of the subcommittee. The Committee noted that the VetGDP subcommittee had agreed that applications for exemptions for the VetGDP should come to the subcommittee with a recommendation for action from the Education Department. The subcommittee had also considered proposed changes and additions to EPAs and agreed a direction of travel for the peer review of the e-portfolios. The chair thanked the Education department for their hard work and the phenomenal gains made in a short period of time.

QA/Referral Process

30. Education Committee received a proposal for the referral process for those stakeholders (graduates, VetGDP Adviser and Appointed Senior Veterinary Surgeons) who are not engaging
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appropriately with the VetGDP programme. The proposal is aligned to the current CPD referral process and is cognisant of the need to fully investigate the situation with all parties and assess where support can be given, before referring to the Professional Conduct department. The committee agreed the proposal.

EMS

31. As part of the on-going three-monthly reviews of the temporary EMS requirement, Education Committee was asked to consider EMS completion data submitted from schools in November, in addition to the current landscape around placement availability. Three possible options for a way forward were provided. One option was to make no further amendments to the EMS policy at this time, with a further review at the February meeting of Education Committee, the second was to make no further amendments at this time with a further review at Education Committee in May, and a third option was to reduce the clinical EMS requirement for Year 3 (class of 2024) by a further three weeks.
32. The situation was discussed in detail, and it was agreed to go with option A – ‘no further amendments to be made at this time’ with a further review at the February meeting of Education Committee. It was felt that, based on the completion data provided by each vet school, all cohorts were either on track to meet their requirements, or had just commenced the programme, and therefore no immediate change in the requirements was necessary. The decision would be communicated to students via a letter from the president which would be circulated to the Heads of Schools for onward distribution.
33. The letter from the president would also let students know that the reviews were ongoing and would emphasise that despite the reductions made to the EMS requirement, students should be encouraged to carry out as many EMS weeks as they could, even if they have already reached a requirement that may have been reduced.

Action: Letter from RCVS president to be shared with Schools for distribution

Review of temporary amendments to education policy made during the Covid-19 pandemic

34. With Council agreeing that Covid-19 related business be handed back to parent committees, Education Committee was asked to revisit the temporary amendments to policy which had been made during the pandemic and decide on whether any could revert to pre-pandemic requirements, or whether any were required to remain in place.

Temporary EMS policy

35. Following discussion, it was agreed that the EMS policy should revert to pre-pandemic AHEMS requirements for new students starting in 2021 going forward, as well pre-pandemic clinical EMS requirements for year 3 cohorts (class of 2024), and that the situation would continue to be monitored so that timely adjustments could be made if necessary in future. It was clarified that all currently agreed reductions would remain in place.
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Virtual abattoir resources

36. With most pandemic-related restrictions being removed around the country, it was asked whether the temporary agreement to allow virtual abattoir resources in place of an in-person experience was still necessary.
37. Members commented that the pandemic was not over yet and that some schools appeared to still be having difficulties in accessing abattoir placements for students, particularly in Scotland.
38. It was agreed to keep this temporary amendment in place for the time being and to monitor again at the next meeting. It was also considered whether RCVS could assist schools by contacting the Food Standards Agency (FSA) and Food Standards Scotland (FSS) to encourage more abattoirs to open their doors to student teaching.

Action: RCVS to explore communications with the FSA and FSS

Temporary amendment to accreditation standards

39. It was agreed that the temporary policy put in place regarding PSS accreditation and accreditation standard 3.7 would be reverted to pre-pandemic requirements, following the recommencement of in-person PSS accreditation visits.

Action: Education Department to communicate the decision to the schools

Temporary extension of accreditation periods

40. It was agreed that the temporary extending of accreditation periods was no longer necessary as face-to-face visitations had recommenced, and processes were in place to host accreditation visits virtually if required. This temporary amendment would therefore be removed.

Requirements for online/remote assessments of veterinary and veterinary nurse students

41. In order to ensure the reliability and integrity of assessments, a policy had been drafted and approved by the Covid Taskforce, for vet schools and providers for VN education, describing the requirements they need to have in place to ensure the reliability and integrity of remote assessments, and that student achievement remained in line with RCVS standards.
42. Some committee members commented that this policy should be kept under review, in order to protect the mental health of students required to undertake proctored online assessments, and it was agreed to seek the views of the Association of Veterinary Students (AVS) at their next meeting with RCVS in January.

Secretaries note: This will be raised, however RCVS policy does not insist that proctoring is in place.

43. Since most vet schools had now indicated that some form of blended approach to learning would be used permanently, moving forward, others felt that this policy should be retained and applied wherever remote or online assessment of students was used.
44. It was agreed to keep the policy in place for now and review again at the next meeting.

Action: RCVS to discuss policy with AVS at next meeting.

Vet school quarterly Covid-19 plans (temporary amendments to programmes)

45. Whilst initial discussion favoured ending the quarterly updates from Schools now that most pandemic restrictions had lifted, it was commented that the UK was entering a turbulent period over the winter and that it would be wise to keep these updates ongoing, and it was agreed to keep requesting them until at least the end of the current academic year.

Statutory Membership Examination (SME)

46. Candidates entering the SME had previously been required to pass an English language test before being allowed to sit the written component of the examination. With English language testing availability severely limited for long periods of 2020, candidates for the 2021 diet had been offered the opportunity to enter the exam without taking the IELTS or OET.
47. Candidates who went on to pass the 2021 exam were required to provide valid IELTS/OET test results no later than one year after receiving their exam results, prior to registration.
48. Education Committee was asked to consider whether this policy should remain going forward. It was highlighted that more candidates had entered the examination this year, and that the pass rate had dropped, with English language competence potentially being one of the factors affecting this.
49. With this in mind, members felt that it was unfair to allow a candidate to pay for and undertake an exam where they could be less likely to pass without sufficient English language comprehension. Therefore, it was agreed that the temporary policy would revert to the original of requiring a successful English language test result before being permitted to sit the examination.

ACTION: Amend the Stat exam policy in re the English language and notify potential candidates

Review of subcommittees and working parties which report to Education Committee

50. The Committee received a paper detailing the Terms of Reference (ToR) and membership for each of the subcommittees reporting to Education Committee. The committee agreed to the updates proposed, specifically for the PQSC ToR to remove references to the EMS Coordinators Liaison Group and for the CertAVP ToR, to be updated to reflect current RCVS committee structures. The committee asked that all subcommittee documents were standardised to include consistency of membership; meeting frequency and number of members present needed to be quorate.

ACTION: Documents to be updated and brought back to Education Committee for review

Certificate in Advanced Veterinary Practice (CertAVP)

Synoptic Exams Review

51. The committee received and noted the Synoptic Examinations Review Report. The committee heard that the review was undertaken to ensure that the exam was consistent and valid. The review found that there were some differences in guidance and format, but that the main difference across providers was in the marking scheme. It was suggested that we share this review with the providers and work with them to update the exam in order to ensure that all providers are assessing the same knowledge and skills.
52. There was some discussion about whether the objective was to standardise the approach to learning and teaching as there are benefits to having different formats for candidates to choose from. The committee was reassured that the standardisation didn't mean that all providers needed to provide the same format of teaching but that it is important to ensure that the standards to which the candidates are being assessed are consistent.
53. The committee agreed with the suggestions to clarify any anomalies in the running of the examination and to work with the providers to update the synoptic examination and guidance.

Action: Share synoptic exam review with providers and collate feedback

PDP

Annual Statistics

54. The PDP Annual Statistics Paper was noted and the committee was presented with highlights from the report. There was a question about the annual cohort chase and why some graduates were removed from the PDP and it was explained that this was due to a variety of reasons such as a career change or the graduate moving overseas. Two of the current PDP deans will step down from next year but the committee was reassured that the other deans have agreed to support the remaining graduates affected.

RCVS Review of Vet School Covid-19 plans

55. The Committee noted the plans which had been previously reviewed by PQSC.

Advanced Practitioner Status

List of approved Advanced Practitioners

56. The list of approved Advanced Practitioners was noted.

Advanced Practitioner (AP) Evaluation

57. At the last meeting Education Committee agreed to form two Task and Finish groups, one to clarify what it meant to be an Advanced Practitioner and another to explore career pathways. The committee was presented with the terms of reference for the first group to clarify what it means to be an AP and when that work has been completed the next task group will be set up.
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58. A project plan for next phase of the AP review will be presented to Education Committee at the next meeting which will include a timeline for the task and finish groups.

Action: AP Review Project Plan to be presented to EC in February

59. The committee agreed the terms of reference and the composition of the Task and Finish groups

Fellowship subcommittee

60. The minutes from the Fellowship Sub-Committee meeting held on 8 September 2021 were received and noted.

61. I was also noted that there were 4 final candidates who remained enrolled on the Diploma of Fellowship by Thesis, and that their deadline for submission was August 2022.

Risk Register

62. The committee reviewed the reports and based on the discussions at the meeting thought it would be useful to add a risk around Liverpool as the main provider of the CertAVP synoptic exam.

Action: Education Department to update Risk register

Any other business

EMS Communications

63. Further to the earlier agreement to write to vet students about the temporary EMS policy review and how the required weeks were a minimum and more weeks should be encouraged if possible, it was also suggested that RCVS communicate with providers with the aim of encouraging them to take on more students. However, it was agreed to wait at this stage as there would be communications going to the profession about EMS following the up-coming stakeholder event, and instead the message could be tied into those communications.

Date of Next Meeting

8 February 2022

Britta Crawford

November 2021

b.crawford@rcvs.org.uk

Summary	
Meeting	Education Committee
Date	08 February 2022
Title	Conflict of Interest Changes
Summary	<p>In order to ensure that all matters relating to the evaluation process for veterinary schools are conducted in a fair and objective manner, the RCVS applies its conflict of interest policy ('policy on managing potential conflicts of interest for visitation team members'). Nominated visitors are provided with a copy of the policy and asked to sign and return a declaration concerning any potential conflicts of interest in advance of each visit to be undertaken.</p> <p>The policy has been updated to clarify what constitutes a conflict of interest, by adding details already stated in the policy, into the declaration.</p> <p>The changes to the policy are highlighted in yellow in Annex A</p>
Decisions required	Education Committee are asked to approve the updated visitor's declaration.
Attachments	Annex A – Policy on managing potential conflicts of interest for visitation team members
Author	Kirsty Williams Education Quality Improvement Manager k.williams@rcvs.org.uk / 02079651105

Classifications		
Document	Classification¹	Rationales²
Paper	Unclassified	

Annex A	Unclassified	
Annex B	Unclassified	

¹Classifications explained

Unclassified	Papers will be published on the internet and recipients may share them and discuss them freely with anyone. This may include papers marked 'Draft'.
Confidential	Temporarily available only to Council Members, non-Council members of the relevant committee, sub-committee, working party or Board and not for dissemination outside that group unless and until the relevant committee or Council has given approval for public discussion, consultation or publication.
Private	The paper includes personal data which should not be disclosed at any time or for any reason, unless the data subject has agreed otherwise. The Chair may, however, indicate after discussion that there are general issues which can be disclosed, for example in reports to committees and Council.

²Classification rationales

Confidential	<ol style="list-style-type: none"> 1. To allow the Committee or Council to come to a view itself, before presenting to and/or consulting with others 2. To maintain the confidence of another organisation 3. To protect commercially sensitive information 4. To maintain public confidence in and/or uphold the reputation of the veterinary professions and/or the RCVS
Private	<ol style="list-style-type: none"> 5. To protect information which may contain personal data, special category data, and/or criminal offence data, as listed under the General Data Protection Regulation

ANNEX A – Policy on Managing potential conflicts of interest for visitation team members

In order to ensure that all matters relating to the approval of veterinary degrees by the RCVS are conducted in an objective manner, it is important that any potential conflicts of interest (on the part of visitors and committee members called to consider visitation reports) are avoided as far as possible, or carefully managed where complete avoidance is not practicable. Visitors reports are first considered by the Primary Qualifications Sub-Committee (PQSC) which makes recommendations to Education Policy & Specialisation Committee (EPSC), which in turn makes its final recommendation to Council. This statement therefore covers not only visitors, but also members of those committees called upon to consider visitation reports.

Criteria used when selecting visitors

1. When forming its visitation panels, RCVS needs to appoint visitors who, between them, have the necessary combined expertise to form an objective and informed judgement about the standard of veterinary education and training at a university. When the team is appointed, a number of variables are taken into account: there must be an appropriate balance of expertise covering pre-clinical and para-clinical subjects, animal husbandry and production, food hygiene and public health, small and large animal clinical studies; one or more visitors must have experience at a senior level (preferably as a Dean) of managing a veterinary school; at least one member must be a clinical practitioner, and at least one of the team must have an appreciation of veterinary research. Two members of the team are normally nominated by the European Association of Establishments of Veterinary Education (EAEVE). Most members of the team must have had previous experience as a visitor, either in the UK or elsewhere. Furthermore, visitors need to be available to devote at least 5 continuous days to the visit, in addition to further time spent preparing for the visit and contributing to the subsequent report.

Impartiality

2. In appointing visitors to particular teams, RCVS places a strong emphasis on the need for impartiality, and expects all its visitors to act objectively and professionally at all times. Guidance to this effect is included within the notes provided to visitors. However, the need to demonstrate independence and impartiality must be balanced against the equal need for particular expertise within the team. This can sometimes present difficulties for a small profession such as the veterinary profession, and especially so for academics who network widely with fellow experts on a national and international basis.

Conflicts of interest

3. With many factors to be taken into account as described above, it is not always possible to avoid the appointment of visitors with no previous history of involvement with a particular university. In putting teams of visitors together, RCVS seeks to minimise the possibility of individual conflicts of interests or any perception of bias, to ensure that the team as a whole can be seen to reach a fair and impartial view of degree standards.

4. The person specification for visitors is published on the RCVS website with an open invitation for Members to apply to join the list. New appointments to the list of visitors are considered by the chairman of PQSC together with the Head of Education and must meet all the essential criteria in the person specification. All new visitors receive training in the purpose and conduct of visitations. Briefing meetings for visiting teams are held before each visit to ensure that the visit is only focussed on the published accreditation criteria and not on any other wider extraneous matters. Visitors are initially selected from the list by the Chairman of PQSC in consultation with RCVS staff, taking all the many variables into account. Appointments to a particular team are confirmed by PQSC. Visitors are only appointed for an individual visit but, subject to satisfactory performance, may stay on the list to be available for future visits.

5. Those with a very close and/or recent association with a university being visited would be ruled out as visitors. In other more marginal cases, where there is potential for a conflict of interest whether actual or perceived (see below), visitors must declare their interest or possible interest in advance. They must complete a Declaration (section B of attached form) and send it to the Head of Education who will in the first instance consult with the Chairman of PQSC and the Registrar in the event of any relevant interest becoming apparent. They may be asked to step down from the team or alternatively the Chairman of the Visiting team will be asked to ensure that any actual or potential conflict is made known to the other visitors, so that this can be taken into account during visitors' meetings. The membership of a visiting team is made known to the university being visited at least 6 months before the visit takes place.

6. Depending on the nature of the interest, a visitor may be asked during the visit to step back from taking part in some meetings with university staff (eg. if they have an association with a faculty member) or from reporting on particular topics (eg. on research, if their involvement has been research related). In this way, any potential conflicts of interest are disclosed and managed during the visit and in the drafting of the subsequent report. In addition, it should be noted that all RCVS Council Members complete a standard 'declaration of interest' form which is held by the College and updated annually¹.

¹ **Extract from Guide for Council and Committee Members, Nov 2007 issue:**

"Council Members must declare any professional, personal or business interests that may conflict with their responsibilities as Council Members. For some years now the College has maintained a Register of Interests: Council Members are asked once a year to complete and return the Form included in the Council Members' Information Pack, and to keep the College informed of any changes to the information supplied. The Register of Interests is available on request and is not otherwise made public.

Relevant interests may concern employment or practice; membership, fellowships and offices held in professional bodies; links with local, national and community organisations; consultancies and directorships; membership of the freemasons or a political party directorships; appointments, e.g. as advisors to pet insurers; and personal relationships.

Where any conflict of interest may be relevant to any Council or committee debate the Council Member concerned should declare it before speaking or voting or at the beginning of the debate. There may be circumstances when it would be appropriate not to vote, not to participate in the debate or even to leave the room and such circumstances should be discussed with the President or the Committee Chairman in advance, to avoid any embarrassment for the College or the individual."

7. Committee members with a close and/or recent association with a university under consideration will need to declare their interest to the Chairman of the meeting, and may be asked to withdraw from discussions on the visitation report. Representatives of the university concerned will always be asked to withdraw from the meeting when their report is being discussed. They may, however, be present for part of the meeting if the committee requests clarification on points of fact.
8. Potential conflicts of interest involve official, professional, or personal relationships which may, or could reasonably be viewed as influencing or impairing the visitors' judgements. These may include, but are not limited to:
- recent collaborative research, teaching or service interests with a key administrator or faculty members of the university being visited;
 - graduated from, or been employed full time by the school being evaluated during the last 10 years;
 - having been employed by, or having recently applied for employment with the university being visited;
 - having provided consultancy advice on accreditation matters for the university being visited – either voluntarily or for a fee;
 - having published statements or opinion which could be perceived as evidence of bias
 - having a close family or personal relationship with a key member of the university being visited;
 - having a financial or other personal or business interest in the outcome of the visitation.

If a member of the proposed visiting team has reason to believe that a conflict of interest might exist, he/she should seek the advice of the Education Department at the RCVS.

Declaration

9. All visitors are asked to complete and sign the attached form, either confirming that they have no conflicts of interest, or alternatively declaring any they believe to be relevant, and return it to the Director of Education at RCVS.

Confirmed at EPS Committee, May 2008

VISITORS DECLARATION

Name of visitor: _____

University to be visited: _____

Year of visit: _____

Please complete either section A, or section B as appropriate:

A

I confirm that, to the best of my knowledge and belief, I have no current conflict of interest that would, or could be perceived to affect my duties as a visitor

Signature: _____

Date: _____

B

I wish to declare the following interests which I understand will be discussed with the Chairman of PQSC before my appointment as a visitor is confirmed. *(Continue on a separate sheet if necessary)*

Signature: _____

Date: _____

Summary	
Meeting	Education Committee
Date	8 February 2022
Title	Amendments to the Accreditation of Veterinary Programmes Appeal Procedure
Summary	<p>Following a review of appeal procedures across the College by the Legal Services team at the RCVS, some amends have been proposed within the accreditation of veterinary programme appeal procedure.</p> <p>Education Committee is invited to consider the proposed changes tracked in this paper, and to approve this appeal procedure as final.</p>
Decisions required	To review the amendments and agree as final draft.
Attachments	RCVS Accreditation of Veterinary Programme appeal procedure.
Author	Jordan Nicholls Lead for Undergraduate Education j.nicholls@rcvs.org.uk / 020 7202 0704

Classifications		
Document	Classification¹	Rationales²
Paper	Unclassified	N/A

¹Classifications explained	
Unclassified	Papers will be published on the internet and recipients may share them and discuss them freely with anyone. This may include papers marked 'Draft'.

Confidential	Temporarily available only to Council Members, non-Council members of the relevant committee, sub-committee, working party or Board and not for dissemination outside that group unless and until the relevant committee or Council has given approval for public discussion, consultation or publication.
Private	The paper includes personal data which should not be disclosed at any time or for any reason, unless the data subject has agreed otherwise. The Chair may, however, indicate after discussion that there are general issues which can be disclosed, for example in reports to committees and Council.

2Classification rationales

Confidential	<ol style="list-style-type: none"> 1. To allow the Committee or Council to come to a view itself, before presenting to and/or consulting with others 2. To maintain the confidence of another organisation 3. To protect commercially sensitive information 4. To maintain public confidence in and/or uphold the reputation of the veterinary professions and/or the RCVS
Private	<ol style="list-style-type: none"> 5. To protect information which may contain personal data, special category data, and/or criminal offence data, as listed under the General Data Protection Regulation

RCVS Accreditation of Veterinary Programmes appeal procedure

Scope of Appeals

1. This appeals procedure applies where an institution questions the formal outcomes of the accreditation process, where it can:
 - demonstrate that the outcome is not based on sound evidence, **and/or**
 - that published standards have not been correctly applied **and/or**
 - that published processes have not been consistently implemented.
2. No appeal will be entertained in respect of the individual comment(s) made by the visiting team and contained within the visitation report.

Definition of terms

3. In these rules:
 - "appeals panel" means a panel of the Committee constituted to hear an appeal;
 - "College" means the Royal College of Veterinary Surgeons;
 - "Committee" means the Education Committee;
 - "lay person" means a person who is not a veterinary surgeon or a registered veterinary nurse and has never been entitled to be registered as such;
 - "registrar" means the registrar of the College;
 - "the Council" means the Council of the College;
 - "formal outcome of the accreditation process" means the category of accreditation into which the institution has been placed **and/or** the period of accreditation that has been granted
 - "published standards" means the standards contained within the version of the "RCVS standards and procedures for the accreditation of veterinary degrees" that applies to the accreditation event in question
 - "published processes" means the processes contained within the version of the "RCVS standards and procedures for the accreditation of veterinary degrees" that applies to the accreditation event in question

- “accreditation of veterinary programme appeals panel” means the panel appointed by the Registrar to consider accreditation decision appeals.

-

Lodging of an appeal

4. An institution must inform the registrar of its intention to appeal not later than two weeks from receipt of the letter confirming the formal outcome of the accreditation process. The appeal must then be made in writing by the Dean or Head of School no later than six weeks from receipt of the letter confirming the formal outcome of the accreditation process.

Initial consideration of appeals

5. The first stage of the appeal process will involve a review of the process that had been followed by RCVS in reaching its accreditation decision, together with the argued basis for the appeal, by PQSC at their next scheduled meeting. The Chair of the relevant accreditation panel may be asked to participate in the review process. The outcome of this review will be to either proceed with or dismiss the appeal. If accepted, PQSE will refer the matter back to the Education Committee which will review its original decision and may decide to uphold or amend it. If the decision is amended, then the appeal need not proceed any further. It should be noted that acceptance of the appeal may not necessarily result in a change to the original decision.
6. An appeal will only be dismissed on one or more of the following grounds:
 - It relates to the individual comments made by the accreditation panel
 - It gives insufficient information to enable any judgement to be made
 - It is frivolous, vexatious or relates to a minor irregularity in the conduct of the accreditation process
 - It is unnecessary because deficiencies in the accreditation process have already been acknowledged and appropriate action taken
7. If the appeal is dismissed on any of the grounds mentioned, the institution may nevertheless elect to have the appeal considered by the Accreditation of veterinary programme appeals panel within six weeks of receipt of the letter confirming the decision of the Education Committee. The institution must pay a fee of £5000, but this will be refunded if the appeal is upheld.

Accreditation of Veterinary Programme Appeals Panel

8. The appointment of the panel is coordinated by the Registrar. One member should be appointed from the Council officer team (e.g. current President or Vice-President), one member from Council and one lay member [should be nominated from the list of RCVS visitors]. The meeting will normally be held within two months of receipt of the request by the appellant institution for consideration of the appeal by an appeals panel.

9. .
10. The panel will select its own Chair. All three members must sign a declaration confirming that they have no conflict of interest with the appellant institution and a statement to indicate that they will strictly adhere to the “*RCVS standards and procedures for the accreditation of veterinary degrees*” as well as the “*Policy on managing potential conflicts of interest for visitation team members*”.
11. The appellant institution will be provided with copies of any information, apart from legal advice, which is made available to the appeals panel and will be given a reasonable opportunity to comment and make any further representations before the panel considers the appeal.
12. The appellant institution has the right to nominate an observer to attend the meeting of the panel. An observer may respond to questions from the panel; however they will not have voting rights when it comes to decision making. The Chair of the accreditation panel may also be requested to attend the meeting as an observer to assist with any points of clarification.
13. An appeals panel will not include a person who has been involved in the initial assessment of the appeal, had any involvement in the accreditation event of the appellant institution or has any personal connection with the appellant institution which might bring that person’s independence or impartiality into question.
14. The proceedings of an appeals panel will take place in camera and will remain confidential after the conclusion of the appeal.
15. The appeals panel may:
 - a. uphold the appeal and direct Education Committee to overturn and reconsider its decision
 - b. uphold the appeal, but confirm that the decision should remain unchanged
 - c. dismiss the appeal
16. Once the panel has reached a decision, by majority vote, its Chair will inform the registrar of its decision by submitting an adjudicating statement, including its reasoning. The registrar will arrange for the outcomes of the appeal to be communicated to the appellant institution, PQSC and Education Committee.
17. The decision of the panel shall be conclusive for all purposes.
18. Until the end of the appeal process, the accreditation report will not be published and the appellant institution holds its current accreditation status.

Summary	
Meeting	Education Committee
Date	08 February 2022
Title	New Standards: further clarification
Summary	<p>At the Council meeting in November 2021, the final iteration of the RCVS accreditation standards and methodology for veterinary programmes were reviewed following the formal consultation that had taken place with the profession. Both the standards and methodology were approved for implementation in 2023</p> <p>Council requested that Education Committee provide further clarification on a few points, and this paper presents the additional clarification of the following points:</p> <ul style="list-style-type: none"> • Additional guidance to standard 6.4 <i>“The majority of clinical education delivered by the School must focus upon casework in the ‘general practice’ context, reflecting the reality of veterinary practice in society.”</i> • Revised definitions of clinical education, general practice, and casework • Addition of guidance to standard 6.6 <i>“Under all teaching situations students must be actively engaged in the case. In the majority of cases, students must be actively involved in the investigation and management of the patient (including practical aspects of diagnosis and treatment, as well as clinical reasoning and decision-making).”</i> • Further clarity on timing during the transition period for vet schools, to allow them to implement any changes necessary to ensure compliance with the standards.
Decisions required	Education Committee are asked to approve the further clarifications
Attachments	<p>Annex A – Additional guidance for standard 6.4</p> <p>Annex B – Definitions and Glossary (revised)</p> <p>Annex C – Additional guidance to standard 6.6</p> <p>Annex D – Further clarity on the transition period to the new standards</p>
Author	<p>Kirsty Williams</p> <p>Education Quality Improvement Manager</p> <p>k.williams@rcvs.org.uk / 02079651105</p>

Classifications		
Document	Classification¹	Rationales²
Paper	Unclassified	
Annex A	Unclassified	
Annex B	Unclassified	

¹Classifications explained	
Unclassified	Papers will be published on the internet and recipients may share them and discuss them freely with anyone. This may include papers marked 'Draft'.
Confidential	Temporarily available only to Council Members, non-Council members of the relevant committee, sub-committee, working party or Board and not for dissemination outside that group unless and until the relevant committee or Council has given approval for public discussion, consultation or publication.
Private	The paper includes personal data which should not be disclosed at any time or for any reason, unless the data subject has agreed otherwise. The Chair may, however, indicate after discussion that there are general issues which can be disclosed, for example in reports to committees and Council.
²Classification rationales	
Confidential	<ol style="list-style-type: none"> 1. To allow the Committee or Council to come to a view itself, before presenting to and/or consulting with others 2. To maintain the confidence of another organisation 3. To protect commercially sensitive information 4. To maintain public confidence in and/or uphold the reputation of the veterinary professions and/or the RCVS
Private	<ol style="list-style-type: none"> 5. To protect information which may contain personal data, special category data, and/or criminal offence data, as listed under the General Data Protection Regulation

ANNEX A – Additional Guidance for Standard 6.4



Standard 6.4 states:

6.4. The majority of clinical education delivered by the School must focus upon casework in the ‘general practice’ context, reflecting the reality of veterinary practice in society.

The additional guidance is currently:

- *Anything more than 70% constitutes a ‘majority’. (See separate definitions of ‘Clinical Education’, ‘general practice’ and ‘casework’.)*
- *Clinical Education delivered by the University includes all clinical teaching and training within the programme delivered by academic staff (and not EMS).*
- *It is recognised that some general practice teaching can be delivered within a specialist environment, however schools must demonstrate how students within these environments are taught reflecting a general practice context.*
- *The proportions of clinical education in different contexts (general practice, referral / specialist casework) must also be provided in Annual Monitoring data.*

Suggested additional guidance:

- See the definitions in the appendix of ‘Clinical Education’, ‘general practice’ and ‘casework’.
- Each practice area (companion animal, equine and production animal) must have 70% of their clinical education delivered in the ‘general practice’ context so that graduates are prepared for their first role within any type of clinical practice. 
- Although clinical education within ‘general practice’ context may take place in different working environments, it is important that students are educated within a range of different general practice settings so that they gain a comprehensive understanding of the full breadth of the primary care caseload, and the facilities and equipment that are readily available in general practice settings, in addition to those typically in veterinary hospitals or referral centres.
- In general, cases that present in a general practice context do not have a diagnosis, presenting, for  example, with a clinical sign such as a cough, lameness, diarrhoea, etc. However, in a referral context, the patient will often already have a diagnosis or context for further investigation, making the teaching for the student very different and not in a general practice context. Therefore, it is not possible to teach all elements of general practice within a referral practice setting.
- It is accepted that although primary care case material is best delivered in a general practice setting, there are elements of Day One material that can be delivered in a referral setting, such as history taking, imaging (including using imaging equipment such as radiography and ultrasound as well as image interpretation), diagnostics, anaesthesia, communication and teamwork with the veterinary team, and communication with clients.
- Clinical education should take place to also aid the development of professional skills as well as clinical / procedural skills.

- Any routine or common treatments or conditions that are not seen in the referral context (for example, vaccinations, castrations, health checks), need to be taught separately in a relevant setting, which could, but not exclusively include charity clinics.
- The School will need to demonstrate how they meet the requirement for the majority of the clinical education to be in a 'general practice' context. During the accreditation event or annual monitoring, the RCVS may ask for detailed information as to how the standard is being met, for example by tracking individual students, or by tracking individual skills or Day One Competences. There is no prescribed methodology for how the Vet School may record this data.

Annex B - Definitions and Glossary (revised sections highlighted)

Definitions and Glossary

Clinical Education

“Clinical Education” is the teaching and training that students receive during their veterinary degree to prepare them for a career as a veterinary surgeon. Students will receive clinical education in all areas for each relevant career path; clinical; research; industry; government etc; but with a particular emphasis on clinical “general practice”, which is the most common career destination.

Clinical education involves both basic and clinical theory, modes of reasoning learned in the classroom and clinic, practical techniques developed in laboratories and the workplace, and competences in communication and team working and shared decision-making relevant to the provision of high-quality veterinary services.

The clinical teaching as part of clinical education is delivered by the universities during all parts of the curriculum, and also through Intra Mural Rotations (IMR).

The majority of clinical education (teaching and training) delivered by universities must focus upon casework in the “general practice” context. The delivery therefore may take place in a range of working environments, including veterinary hospitals or referral centres as well as general practice environments and first opinion practices, but a majority of the clinical education must focus upon casework typically carried out in general practice (i.e. primary care, not casework referred for specialist veterinary attention). Under such circumstances, students can gain an understanding about the level of advanced techniques that can occur in general practice, as well as learn to recognise techniques relevant to primary care that may occur in specialist centres.

Intra Mural Rotations (IMR)

Clinical education in IMR placements is the clinical workplace learning component of the educational programme. IMR is structured and mapped against formal learning outcomes and objectives and is the basis of the students’ knowledge of clinical skills and techniques, taught by university staff and appointed teachers. All clinical education within IMR must be driven by learning outcomes set against relevant areas of the curriculum. Students are assessed on all IMR rotations, both formative assessments as they take place and summative, which is likely to be sequential during rotations, as well as at their conclusion.

Although clinical education within IMR may take place in different working environments as indicated above, it is important that students are educated within a range of different practice settings so that they gain a comprehensive understanding of the full breadth of the primary care caseload, and the facilities and equipment that are readily available in general practice settings, in addition to those typically in veterinary hospitals or referral centres.

IMRs should also take place as far as possible directly within client-facing settings to aid the development of professional skills as well as clinical / procedural skills.

Extra Mural Studies

Extra Mural Studies (EMS) is also a part of students' overall clinical education, and placements are a vital part of the veterinary degree as they provide a unique opportunity for students to gain valuable experience and practice skills acquired during the veterinary programme, in a further range of 'real workplace learning' contexts. Students are encouraged to identify their own intended learning outcomes for EMS, and take up EMS placements which they feel will benefit them most.

Unlike IMR, there is no formal teaching or training delivered on EMS placements, but these are still valuable learning opportunities for students as they are able to augment the training they have already received with real life, hands-on experience that cannot necessarily be captured as part of the curriculum, to help them develop into capable and confident veterinary surgeons. It is also an opportunity to give students experience in decision making, team working and communication, as well as offer an insight into how finances work in practices away from an IMR setting.

EMS placements offer an important insight and introduction into the professional career of a veterinary surgeon, and give vital experience to undergraduates before they graduate. EMS also represents the beginning of a life-long cycle of continuing their own professional development outside of a traditional teaching context, which continues after graduation and throughout their career.

Students may inevitably acquire further knowledge and skills whilst on EMS placements. However, all Day One Competences must be covered by the clinical education delivered by the university, and EMS placements should not be used to address gaps within core clinical education.

Glossary of terms

Clinical workplace learning: This is that part of clinical education that allows the learner to further develop and apply the knowledge and skills introduced in earlier parts of the degree programme. It allows the highest level of Miller's pyramid to be observed and assessed, providing authenticity for both learning and assessment (G. E. Miller, 1990).

Casework: This is the name for all professional activity related to addressing client enquires and managing clinical cases. It is holistic in nature and covers all aspects of delivering a clinical service. Components include: the morbidity (or morbidities) affecting the animal; communication, working within the practice team, patient-focused care delivered in partnership with the owner and reflecting the context in which the case exists, and practice economics. Clinical cases are managed in the context of how clinical environment, vet and the owner-animal (patient) interact.

General practice: General practice is the term used for practices that receive a full range of cases for initial assessment, and depending on their facilities, further detailed investigation and treatment (May, 2015). The culture of these businesses embraces "generalism" (Royal College of General Practitioners, 2011) regarding all client problems as relevant for attention. All general practices receive "day one" cases; in addition, they will variably provide more specialised care depending on facilities and the expertise and experience of individual members of staff.

Generalism: "Generalist knowledge is characterised by a perspective on the whole rather than the parts, on relationships and processes rather than components and facts; and on judicious, context-

specific decisions on how and at what level (individual, family, system) to consider a problem” (Greenhalgh, 2007). The generalist approach allows “joining up” of all aspects of healthcare that become fragmented in the specialist arena. “Whole person individually tailored clinical decision-making is the expertise of the medical generalist” (Reeve, 2018). Generalism can thus be regarded as “specialisation-in-breadth” (van Weel, Carelli, & Gerada, 2012).

Primary care: This is care given by the first clinical professional encountered by the client with their animal (May, 2015). Cases will span the full range in terms of the period for which the client complaint has existed. Some will be “day one” cases, at an early stage in development of disease, and many of these will be self-resolving. Other cases will have established disease that it is now clear to the client is not self-resolving.

Specialism: This is the increasingly narrow domain in healthcare of the specialist clinician. The individual specialist tends to focus primarily on clinical problems that fall within their domain of specialist expertise. As an annex to generalism, specialism can provide supportive depth (van Weel et al., 2012). The risk around healthcare systems built entirely with specialists is that of fragmentation, and the potential to fail to recognise the patient as a whole. Where clinical workplace learning takes place in a teaching hospital, preparation for generalist practice may be hampered by the training structures, such as rotation through specialties, rather than following whole cases, and a culture that belittles generalism (Roder & May, 2017) similar to that which exists in human medicine (Royal College of General Practitioners, 2012).

Referral/Advanced care: Many specialists work by receiving referrals involving cases of established disease, on which generalists have chosen not to proceed, or emergency cases where specialised facilities have equipment that it does not make economic sense for general practices to own.

Learning outcomes: These are the educators’ (and funders’, and society’s) expectations regarding the achievement of a student at the end of a period of learning (Gibbs, 2010; Harden, Crosby, & Davis, 1999). Learning outcomes can be defined at various levels: overall programme outcomes, end of year outcomes, end of module outcomes, and outcomes for individual classes (R. Miller & Leskes, 2005). In an outcomes-based curriculum these will form a nested hierarchy that starts with the overall capability expected of the graduate and works backwards to look at the sequential development of the knowledge and skills, and milestones associated with their assessment.

Learning objectives: Some have defined learning (instructional) objectives as synonymous with learning outcomes. More helpfully learning objectives relate to what is taught and intended learning; learning outcomes are what we actually expect the students to achieve (Harden, 2002).

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Annex C – Additional guidance to standard 6.6

Standard 6.6 states:

6.6. Under all teaching situations students must be actively engaged in the case. In the majority of cases, students must be actively involved in the investigation and management of the patient (including practical aspects of diagnosis and treatment, as well as clinical reasoning and decision-making).

The additional guidance is currently:

- *Students must also be involved in all aspects of the case including financial and economic factors, which are of high significance in the majority of first opinion cases, and client communication.*

Suggested additional guidance:

- It is not possible to predict individual student caseloads, and therefore there will be inevitable variation across a cohort. Therefore, the School must have a mechanism to track the cases and skills that have been taught to the individual student and carried out by them and have mechanisms in place to ensure that any gaps are addressed before graduation. This must be part of the clinical teaching and not EMS.

Annex D - Further clarity on the transition period to the new standards

It is accepted that some Schools may experience the necessity to commit to major changes in order to comply with a specific standard or standards, as defined in the new standards and methodology, and that they may not, therefore, be able to demonstrate full compliance at the time of accreditation.

Each School will be reviewed objectively through the accreditation process and any progress made to meet the standard will be considered. Each standard will be concluded as being 'fully met', 'partially met' or 'not met' through the review process, thus ensuring that schools may not be deemed as non-compliant if the changes required are not fully implemented. However, the School must be able to demonstrate their progress in meeting the standards; for example, the changes may have been applied to new cohorts, but it is not possible to make changes to the existing cohorts and so they will need to complete their current programmes.

The RCVS is committed to working with individual Schools to discuss their specific needs during the transition period.

Summary	
Meeting	Education Committee
Date	8 February 2022
Title	EMS – Review of Temporary Policy
Summary	<p>As part of the on-going three-monthly reviews of the temporary EMS requirement, Education Committee is asked to consider EMS completion data submitted from schools in January.</p> <p>At its last meeting, Education Committee agreed that there should be no further amendments made at that time. A letter from the RCVS President was sent to all students to inform them of the outcome of the review, and also to reassure them that the reviews would still be taking place periodically even though the majority of restrictions due to the pandemic had now been listed.</p> <p>Education Committee is invited to consider the latest set of data and decide if any further changes to the temporary policy should be made at this time.</p>
Decisions required	To agree on any changes to temporary EMS policy
Attachments	<p>Annex A – Summary of data completed on EMS completion rates as at February 2022</p> <p>Annex B - Summary of data completed on EMS completion rates as at November 2021</p>
Author	<p>Duncan Ash Senior Education Officer d.ash@rcvs.org.uk</p>

Classifications		
Document	Classification¹	Rationales²
Paper	Unclassified	

¹Classifications explained

Unclassified	Papers will be published on the internet and recipients may share them and discuss them freely with anyone. This may include papers marked 'Draft'.
Confidential	Temporarily available only to Council Members, non-Council members of the relevant committee, sub-committee, working party or Board and not for dissemination outside that group unless and until the relevant committee or Council has given approval for public discussion, consultation or publication.
Private	The paper includes personal data which should not be disclosed at any time or for any reason, unless the data subject has agreed otherwise. The Chair may, however, indicate after discussion that there are general issues which can be disclosed, for example in reports to committees and Council.

²Classification rationales

Confidential	<ol style="list-style-type: none"> 1. To allow the Committee or Council to come to a view itself, before presenting to and/or consulting with others 2. To maintain the confidence of another organisation 3. To protect commercially sensitive information 4. To maintain public confidence in and/or uphold the reputation of the veterinary professions and/or the RCVS
Private	<ol style="list-style-type: none"> 5. To protect information which may contain personal data, special category data, and/or criminal offence data, as listed under the General Data Protection Regulation

Review of EMS policy

Background

1. Since the start of the pandemic, a number of temporary amendments to Extra-Mural Studies (EMS) policy and support measures have been put in place to address the difficulties faced by students in achieving their full EMS requirement of 12 weeks Pre-clinical Animal Husbandry EMS (AHEMS) and 26 weeks Clinical EMS.
2. The last review took place at the November meeting of Education Committee, and it was decided that no further reductions should be made at that time. The data indicated no concerns that the current 2nd, 3rd or 5th years would have difficulties meeting their reduced requirements for pre-clinical and clinical EMS respectively. Weeks completion for the new 1st years was low, however this was normal of the time due to the students recently starting on the degree course. There were some concerns with the number of completed weeks for the 3rd years' clinical EMS, but it was decided to continue to monitor the completion rate before deciding upon any reductions.
3. A letter from the RCVS President was sent to heads of vet schools to share with all students in December 2021 to give an update on how the reviews would be continuing as standard going forward, despite no further reductions being approved.
4. As with previous reviews, RCVS had requested data from the EMS Coordinators at each of the vet schools, detailing the average number of weeks completed per year (mean, median and range), against the number of weeks that would normally have been completed by November in a typical year. A summary of the data collected can be seen at **Annex A**. Also, for comparison, the data collected in November 2021 can be seen at **Annex B**. No data has been returned from Bristol or Nottingham, as of 31 January 2021.
5. RCVS also requested any further data that was available that could be of use, such as data on placement cancellations.
6. For reference, the current requirement for all year groups is shown in Table 1:

Table 1: EMS requirements in place as of 14 September 2021:

Student Cohort		AHEMS requirement (usually 12 weeks)	Clinical EMS requirement (Usually 26 weeks)
Year of programme starting in September 2021	Year of Graduation		
Year 1	2026	12 weeks	26 weeks
Year 2	2025	6 weeks with online top-up around personal learning objectives	26 weeks

Year 3	2024	6 weeks with online top-up around personal learning objectives	26 weeks
Year 4	2023	6 weeks with online top-up around personal learning objectives	13 weeks with online top-up around personal learning objectives
Year 5	2022	12 weeks	13 weeks with online top-up around personal learning objectives

Options for review

Pre-clinical EMS

7. As with the review in November 2021, there are no indications that the cohort year of 2025 will have problems in meeting their reduced requirement.
8. For the cohort year of 2026, some of the schools have not yet started their pre-clinical EMS. But, for those that have, there have been completions. Whilst they may be slightly lower than the normal expected amount, students would generally not be expected to complete the requirement until moving into their clinical years in September 2023. Therefore, it is recommended that this should be closely monitored in further reviews, taking into account completions over Easter which is a popular time for lambing placements.
9. No further reductions to pre-clinical EMS requirements are recommended at this stage.

Clinical EMS

10. The RVC had reported 96 clinical EMS placements weeks being cancelled, and Glasgow had reported 99 cancellations. However, again these were not specific to a single cohort year.
11. The cohort years of 2022 and 2023 appear to be on track to complete their reduced requirement with no concerns being reported by any of the schools at this stage.
12. The cohort year of 2024 still currently has the “normal” requirement of 26 weeks. There have been anecdotal reports of students in this year finding it more difficult to book placements, with practices tending to favour students in the years above. There has been a slight increase in completion rates across all schools since the last review.
13. Education Committee is invited to consider the following two options and agree a way forward:

A: No further amendments to be made at this time with a further review at the May meeting of Education Committee

Similarly to the review in November, with no increasing concerns and there being few or no further restrictions in place, in theory placement completion should be able to increase. No further amendments should be made to the requirements at this time with a further review to take place in May as standard, with the focus being on the cohort years of 2026 and 2024.

B: A reduction of 3 weeks clinical EMS for Year 3 (class of 2024)

As considered in November 2021, a 3 week reduction to the class of 2024 could be allowed to make-up for the initial gap in completion rates.

However as discussed in November 2021, the third years will have until 2024 to complete the requirement. Whilst a reduction at this stage may seem premature, it would at least offer potential relief to some students who may already feel behind.

14. Education Committee is invited to consider the options and agree a way forward.

Summary of data collected on EMS completion rates – February 2022

The median of completed weeks

	Graduating Year				
	2026	2025	2024	2023	2022
Bristol					
Cambridge	4	5	9	12	12
Edinburgh	0	5	0	7	11
Glasgow	0	10	4	11	16
Liverpool	3	6	3	7	12
Nottingham					
RVC	2	4	5	6	13
Surrey	1	6	3	8	14

The mean of completed weeks

	Graduating Year				
	2026	2025	2024	2023	2022
Bristol					
Cambridge	3.77	5.75	9.82	12.32	12.7
Edinburgh	0.6	5.8	1.3	6.96	11.9
Glasgow	0.5	9	4.7	1.3	6.96
Liverpool	2.94	5.63	3.5	7.1	12.2
Nottingham					
RVC	3.2	4.5	4.7	4.5	12.9
Surrey	1	6.22	3.24	7.8	12.59

The range of completed weeks

	Graduating Year				
	2026	2025	2024	2023	2022
Bristol					
Cambridge					
Edinburgh	0-2	3-14	1-8	1-23.5	3.37.5
Glasgow	0-3	0-12	0-19	2-26	4-26
Liverpool	1-6	1-12	0.2-12	0.2-18	1-25
Nottingham					
RVC	1-6	1-12	2-7	1-12	2-15
Surrey					

The data from RVC for cohort year of 2024 is based on expected completion rate due to confirmed bookings as clinical EMS does not begin until Easter.

No data supplied from Bristol or Nottingham, as at 31/1/22.

(No range data supplied from Surrey or Cambridge, as at 31/1/22)

Annex B

Summary of data collected on EMS completion rates – November 2021

The median of completed weeks

	Graduating Year				
	2026	2025	2024	2023	2022
Bristol	0	4	0	6	10
Cambridge	4	4	0	8	13
Edinburgh	0	5	0	7	14
Glasgow	0	9	3	10	15
Liverpool					
Nottingham					
RVC	2	4	3	5	12
Surrey	0	6	2	7	14

The mean of completed weeks

	Graduating Year				
	2026	2025	2024	2023	2022
Bristol	0.05	3.31	0.12	5.57	10.27
Cambridge	3.61	5.1	0	7.6	13.64
Edinburgh	0	5	1	7.2	14.3
Glasgow	0	8	4	11	15
Liverpool					
Nottingham					
RVC	2.9	4	4	4	11.7
Surrey	0	5.92	3.13	7.59	13.39

The range of completed weeks

	Graduating Year				
	2026	2025	2024	2023	2022
Cambridge	1-5	1-14	0	2-13	2-25
Edinburgh	0	0-12	0-9	0-21.5	1-31.5
Glasgow	0	0-12	0-18	0-26	1-26
Liverpool					
Nottingham					
RVC	1-6	1-10	2-7	1-10	2-21
Surrey	0	1-12	0.5-6	1-18	3-22

Summary	
Meeting	Education Committee
Date	8 February 2022
Title	Rules around temporary EMS policy for intercalating students
Summary	<p>Following the introduction of the temporary EMS policy, rules around the requirements for intercalating students were also agreed upon.</p> <p>However, these rules have been based specifically on clinical EMS and the requirement to be registered as a veterinary student to be able to carry this out. There are currently no rules in place specifically for those who would be intercalating prior to their clinical years, which can create an anomaly when it comes to their pre-clinical EMS requirements.</p> <p>There are also currently no formal rules in place around students needing to repeat years or taking gap years or suspending their studies.</p> <p>Education Committee is invited to consider the additions to the rules.</p>
Decisions required	To approve amendments to rules around intercalation and repeated years
Attachments	None
Author	Duncan Ash Senior Education Officer d.ash@rcvs.org.uk / 020 7202 0703

Classifications		
Document	Classification ¹	Rationales ²
Paper	Unclassified	n/a

¹Classifications explained

Unclassified	Papers will be published on the internet and recipients may share them and discuss them freely with anyone. This may include papers marked 'Draft'.
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Private	The paper includes personal data which should not be disclosed at any time or for any reason, unless the data subject has agreed otherwise. The Chair may, however, indicate after discussion that there are general issues which can be disclosed, for example in reports to committees and Council.

²Classification rationales

Confidential	<ol style="list-style-type: none"> 1. To allow the Committee or Council to come to a view itself, before presenting to and/or consulting with others 2. To maintain the confidence of another organisation 3. To protect commercially sensitive information 4. To maintain public confidence in and/or uphold the reputation of the veterinary professions and/or the RCVS
Private	<ol style="list-style-type: none"> 5. To protect information which may contain personal data, special category data, and/or criminal offence data, as listed under the General Data Protection Regulation

Rules around temporary EMS policy for intercalating students

Background

1. RCVS introduced temporary EMS requirements in 2020 due to the restrictions imposed as a result of the Covid-19 pandemic. As students were not able to partake in EMS placements, the requirements for each cohort year were considered separately based on the lost opportunities during the time that restrictions were in place, alongside the amount of time remaining before graduation.
2. When the temporary requirements were first put into place, there were situations where the specific clinical EMS requirements for different cohorts differed. This then created a slight anomaly with students that were intercalating during the time of restrictions, as they could have been re-joining cohort years that at the time had differing EMS requirements prior to when they were intercalating. Therefore, rules were applied for those students to meet the same requirement as the cohort year they were joining so that consistency could be applied across all schools.
3. Similarly, as restrictions were lifted, a rule was applied to those who would be intercalating during the academic year of 2021-22. However, the rule differed in that they would still be expected to meet the requirement of the cohort year they started the course in. This was applied based on the fact that those students would have still lost opportunities to carry out EMS whilst intercalating (assuming that they were not registered as veterinary students, and therefore would not be permitted to undertake EMS), so even though they would be graduating a year later, the time they had remaining to meet their EMS requirement would still be the same as those in their initial cohort year. For example, a student intercalating between their 3rd and 4th year in 2021-22 would still only have two years to “catch up” with EMS once they re-joined the course in 2022, and would have effectively lost close to a year’s worth of EMS opportunities in 2020-21.
4. The rules currently state the following:

Students who were intercalating during the academic years of 2019-20 and/or 2020-21 and not registered as veterinary students at that time, would be expected to meet the requirements of the year group that they are graduating with when they re-join the course.

Students that will be intercalating during the academic year of 2021-22, and will not registered as veterinary students at that time would still be expected to meet the same requirements of the year group that they started the course in, rather than the year group that they are graduating with.
5. However, these rules have been primarily based around the requirements for clinical EMS only. Due to the timings of the reduced requirements, there have previously been no issues for those intercalating during their pre-clinical years, or prior to their clinical years, as the cohorts had all had the same reduced requirement of 6 weeks pre-clinical EMS in place. Now, there is again an anomaly that could be created due to the differing requirements for the current 1st and 2nd years

for intercalating students which RCVS has become aware of. (The requirement for the 1st years is currently still set at the “normal” requirement of 12 weeks pre-clinical EMS.)

6. In theory, the current rules could still be applied, and students could be expected to meet the same requirement of the cohort year that they started the course in. However, students do not technically have to be registered as veterinary students to be able to carry out pre-clinical EMS. Therefore, if they are intercalating, they will effectively have an “extra year” before they begin their clinical years, and there is an argument that during this extra year they could still be partaking in pre-clinical EMS placements to gain further experience. It is therefore proposed that this should be taken into account in the rules.
7. There are also currently no formal rules in place for students who are repeating a year, or those who are suspending their studies for any reason.
8. In a situation where a student is repeating a year, they are effectively gaining an extra year of their course and will have extra time to meet any EMS requirement. Therefore, it is proposed that they should be expected to meet the same requirement of the year group they are graduating with.
9. In contrast, a student that takes a year out for another reason and who is not registered as a veterinary student at that time, should be expected to follow the same rules as those who are intercalating. They would still have the same amount of time to meet the requirement of the cohort year they were previously in when they re-join the course, therefore it could be seen as unfair to expect them to possibly have to meet an increased requirement.

Way Forward

10. Therefore, going forward it is proposed that the rules around intercalation are separated out for pre-clinical EMS and clinical EMS, with extra rules for those repeating years and those suspending their studies, as follows:

Students intercalating during Pre-Clinical EMS years / prior to Clinical EMS years

Students that are currently in their pre-clinical years prior to commencing to the clinical years and will be intercalating during the academic year of 2022-23, would be expected to meet the requirements of the year group that they are graduating with when they re-join the course.

Students intercalating during Clinical EMS years

Students who were intercalating during the academic years of 2019-20 and/or 2020-21 **and not registered as veterinary students at that time**, would be expected to meet the requirements of the year group that they are graduating with when they re-join the course.

Students that are currently in their clinical years and are, or will be, intercalating during the academic year of 2021-22 and onwards **and are not registered as veterinary students at that time**, would still be expected to meet the same requirements of the year group that they started the course in, rather than the year group that they are graduating with.

Students suspending their studies

Students that are currently in their clinical years and are, or will be, taking time out of their studies during the academic year of 2021-22 and onwards, **and are not registered as veterinary students at that time**, would still be expected to meet the same requirements of the year group that they started the course in, rather than the year group that they are graduating with.

Students repeating academic years

Students that are repeating a year would be expected to meet the requirements of the year group that they are graduating with.

11. Education Committee is invited to consider the proposal to update the rules. If approved, they will be published on the EMS page on the RCVS website.

Summary	
Meeting	Education Committee
Date	8 February 2022
Title	Update from the CPD Policy and Compliance subcommittee
Summary	Minutes from the meeting of the CPD Policy and Compliance subcommittee on the 26 January 2022
Decisions required	None
Attachments	None
Author	Jenny Soreskog-Turp Lead for Postgraduate Education j.soreskog-turp@rcvs.org.uk / 020 7202 0701

Classifications		
Document	Classification¹	Rationales²
Paper	Unclassified	N/A

¹Classifications explained

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²Classification rationales

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CPD Compliance Panel Notes of the meeting held on 26 January 2022

Present:	Linda Ford Alison Carr Susan Paterson Claire Roberts Neil Smith Alison Reid Claire Bloor	Chair
In attendance:	Jenny Soreskog-Turp Joanne Stetzel Sandra Neary (item 22-25)	Lead for Postgraduate Education Head of Marketing and Digital Communications Professional Conduct Officer

Welcome and Apologies

1. The Chair welcomed everyone to the meeting, especially the new members, Alison Reid and Claire Bloor. Elizabeth Cox had sent her apologies.

Minutes of the meeting on the 2 September 2021

2. The minutes of the meeting held on 2 September 2021 were received and approved as a true and accurate record.

Matters arising

3. There were no matters arising that were not covered within the main agenda.

1CPD/Communication Update

4. The Committee received and noted the 1CPD report into users/non-users, CPD pause applications and 1CPD compliance.
5. It was noted that CPD compliance was lower in 2021 compared to 2020, but it is still too early to draw any conclusions from that as many will only update their record before the annual renewal or when asked to submit records as part of the audits.

6. The committee felt that regular reminders and prompts to login and record/reflect on CPD would be helpful to remind veterinary surgeons/nurses to regular record and reflect on their CPD.
7. As of January 2022, 1CPD becomes mandatory and the committee felt that we need to contact members who are not yet using the system to inform them about the change in requirement. As the annual renewal is approaching for veterinary surgeons, it was suggested that it would be useful if non-users had to acknowledge their awareness of the new CPD policy.

Action: Contact IT to discuss 1CPD option for AR

8. It was felt that if there was a reward for recording CPD, such as acknowledgement when the hours have been completed, it might encourage more people to record more frequently. The plan for this year is to develop a downloadable CPD compliance certificate. The committee also suggested to review other options such as data to compare the number of hours recorded against peers to bring a competitive element that might encourage some to keep regular records.
9. The committee felt that it would be useful if by the next meeting we could have a plan from the IT team that included a schedule for updates in 1CPD/My Account.

Action: JST to discuss priorities with IT Team and report back at the next meeting.

10. It was noted that more pause requests were received in 2021, but there is still general lack of awareness about the ability to pause CPD and the committee suggested that could be a good news story to raise awareness of the option to contact the RCVS if they are struggling with CPD.
11. Ms Stetzel gave an update on the CPD communication plan. The focus is still to support members, either to engage with the outcome based CPD requirement or using 1CPD and how to reach members that are still not using 1CPD.
12. Older members are less likely to use 1CPD but it was suggested that it may be less of a technical barrier and instead more resistance to reflective practice. It would be useful to publish more short videos on the website that are more clearly signposted and show vets and nurses reflecting using different format. It was also suggested that shorter bite size video clips and short case studies are more likely to be viewed rather than long recorded webinars. The case studies need to include different members profiles so that it is easier to find someone to relate to. It was also suggested to review language on the website to ensure that the requirement and our expectations are clear and use plain English.

Action: Review website/language used.

13. Some of the older age groups may be resistant to change and therefore do not engage in any communication that the RCVS sends so other printed press may be useful. It was discussed to approach VDS to see if there could be any collaboration to promote 1CPD.

Action: Explore collaboration with VDS

14. The committee discussed the 1CPD QR codes and felt that it was an easy way to get members to record their CPD. They are not widely used and as they are an efficient way for members to quickly and regularly record their CPD, the committee suggested that we should raise awareness of them and that RCVS should start using them as part of all workshops and academy courses. It was also suggested to ask conference organisers to include information of how to record CPD using 1CPD as part of lecture slides.

Action: Comms/Ed to explore promotion of 1CPD QR codes

CPD Policy

15. The Committee received and noted the CPD policy and guidance notes, the committee felt that the language in the policy needed to be more assertive to make it clear that the requirement is mandatory and ensure that it is clear that members need to use 1CPD to record CPD. Members were asked to send amendments and suggestion of changes to JST and the policy would be updated and circulated for approval.

Action: Update RCVS CPD Policy

Overseas members

16. The committee discussed the fact that overseas members are less likely to use 1CPD and a paper was received with suggestions for how the CPD policy should apply for overseas members. The RCVS is doing a wider piece of work around engaging with overseas members, so it would be useful to have a suggested way forward from the committee.
17. The registrar had provided feedback to aid discussion, members practising outside the UK are not automatically allowed to practice in the UK without changing their status on the register. Members practising outside of the UK have signed a declaration to say that will comply with RCVS standards, including CPD but it was unlikely the college would pursue a case against a member who was not practising in the UK.
18. The committee discussed the fact that the members practising outside of the UK can still use MRCVS and felt that the same standards should be applied to everyone using MRCVS. If the same standards are not expected, it needs to be clear to the public that different standards apply to members practising in the UK and overseas. It was also highlighted that 1CPD has only just become mandatory so it may be worth reviewing the situation and see if the figures improve throughout the year.
19. There was still uncertainty around what jurisdiction we have over members practising outside of the UK so perhaps it not the best use of time/resources in chasing these members if there is nothing we can do. It was acknowledged that engaging with members practising outside of the UK is an important part of the overall RCVS strategy. The committee felt that it would be useful to explore an option for overseas members to self-certify CPD compliance and we would then be able to use a charter committee to investigate any complaints or cases of non-compliance. It was suggested that we arrange a meeting with the registrar to explore this further and then report back to Education Committee in May.

Action: JST to arrange a meeting with the registrar

CPD Audit Update

20. The committee received an update about the CPD audits. The VN CPD audit took place in June and results were reported to VN Council in November. The results were very positive with more than 90% of respondents compliant.

21. In the veterinary surgeons' CPD audit we included a sample group of non 1CPD users which seem to have affected response rate and therefore the committee suggested that we send a last reminder by post.

Action: JST to send final reminder by post

Follow up non-compliant cases

22. The group received a paper providing information about monitored cases.

23. The group agreed with the recommendations in the paper but felt it was important to keep chasing members who were going to update records to ensure that we receive all information required.

24. Ms Neary provided an update about the cases that had been referred to Professional conduct Department. 2 of the cases had removed their name from the register but the others will continue to be monitored and the committee will receive an update at the next meeting.

25. All monitored cases will be reviewed by the Panel at the next meeting.

Any other business

26. There was no other business to discuss.

Next Meeting

27. Meeting dates for the rest of the year is yet to be arranged but a doodle poll will be sent out within the next two weeks.

Action: JST to circulate meeting dates for 2022.

Jenny Soreskog-Turp

January 2022

j.soreskog-turp@rcvs.org.uk

Summary	
Meeting	Education Committee
Date	8 February 2022
Title	VetGDP Minutes of the meeting held on 27 January 2022
Summary	VetGDP Minutes of the meeting held on 27 January 2022
Decisions required	To note
Attachments	None
Author	Britta Crawford b.crawford@rcvs.org.uk 0207 202 0777

Classifications		
Document	Classification¹	Rationales²
Paper	Unclassified	1
¹Classifications explained		
Unclassified	Papers will be published on the internet and recipients may share them and discuss them freely with anyone. This may include papers marked 'Draft'.	
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DRAFT**Veterinary Graduate Development Programme (VetGDP) Subcommittee****Minutes of the meeting held on 27 January 2022****Members:**

*Mandisa Greene	
Sue Paterson	Chair
Rob Williams	
Chloe Roberts	
Teresa Cordovil	
Mary de las Casas	
Rachel Bowron	
Claire White	
Tim Walker	
Robert Wiensen	
Hannah Hodgkiss-Geere	
Linda Prescott-Clements	Director of Education
Britta Crawford	Senior Education Officer
Joanne Stetzel	Head of Marketing and Digital Communications
Jenny Soreskog-Turp	Lead for Postgraduate Education

Apologies for absence

1. Apologies were received from Mandisa Greene

Declarations of interest

2. There were no declarations of interest. The subcommittee were reminded of the terms of reference discussed at the last meeting and that they had been asked to be a member of the group due to their experience and skill-set and not to represent their employer.

Minutes

3. The minutes from the subcommittee meeting held on 30 September 2021 were agreed as a true record.

Matters Arising

4. The subcommittee noted that most matters were on the agenda. The issue of the graduate mentioned in any other business had been resolved.

Additional/Changes to EPAs

5. The subcommittee were presented with amendments to EPAs 7 and 14, which had been discussed at the previous meeting and subsequently worked on by subcommittee members. The members agreed the amendments to the wording in EPA 7 but suggested changing “suitable” to “appropriate”. The members also agreed the change in wording to EPA 13 with the addition of reference to product exports and animal exports. The members agreed that the reference to euthanasia should be added to EPA 3 rather than EPA 6 with some further explanation.
6. The Subcommittee were also presented with a table of requests for additional EPAs. They agreed that all requests were covered by existing EPAs. EPA 3 could be amended to add some narrative relating to drugs and dispensing. EPA 10 should have a sentence added about biosecurity.

Action: Amendments to be made to EPA’s as agreed

7. The subcommittee agreed that the EPAs should be updated only once a year, with an email to the active graduates explaining that the improvements had been made in response to graduate feedback.

Peer Review Process

8. The subcommittee welcomed the peer review sign off procedure and asked that “not including any practice details” should be included in the confidentiality statement.

ACTION: Amend procedure

Communications Update

9. Joanne Stetzel, gave an overview of the VetGDP communication plan for the previous quarter which had successfully focused on problem solving for all parties and ensuring all could access the systems. The strategy proposed for the next few months included:

- Support graduates and VetGDP Advisers to ensure successful progression through programme
- Resolve technical/operational issues re: accessing the e-portfolio
- Communicate requirement for vets who have been off the practising register for 5+ years to complete VetGDP
- Ensure that each relevant party (graduate, VetGDP Adviser, employer, vets who have not practised for 5+ years) know what is expected of them
- Encourage practices/workplaces to show their VetGDP Approved Practice/Workplace status

QA response process

10. The subcommittee received a summary of results from the QA questionnaire that was sent to graduates and VetGDP Advisers in November 2021. The Education Department discussed the results and the additional open text answers on a weekly basis and identified two graduates that

may need some further support and they were contacted by a member of the team. The graduates were phoned and emailed twice, asking them to get in contact to discuss the support they were getting through VetGDP in more detail but neither responded to the calls or emails. These graduates will be followed up in the next QA report.

11. The committee noted that the response rate was relatively low and the data might therefore be skewed. They were reassured that the QA process would be part of the e-portfolio as soon as the new feature is available. The next set of QA questionnaires will be sent out at beginning of February 2022
12. The subcommittee noted the referral policy and diagram included with the paper.

VetGDP Training Evaluation

13. The subcommittee received the results of the evaluations completed by all VetGDP Advisers at the end of the VetGDP on-line training. The results were extremely positive and a majority found all areas of the training to be either 'very' or 'extremely useful'.
14. The training was rated positive consistently across all different groups. Female respondents and those working for a corporate practice were in general more positive about the training but there were no major differences in any of the areas.
15. Respondents who had previously received other formal training felt that the course had been as useful as those respondents who had previously not any received previous training in coaching or mentoring and there were no major differences between the two groups.
16. The results were particularly pleasing given the that the profession was given little notice to complete the training, in a climate of high stress due to covid and difficulties with a shortage of staff.

New Graduate member

17. At the previous meeting the subcommittee had requested a member who had graduate within the last 12 months. They were presented with an anonymised list of 6 candidates and the rationale that they had given for wishing to join the subcommittee. The subcommittee members all nominated their favourites and decided on the two applicants that should be interviewed by the Education Department to appoint the graduate member of the committee.

Any Other Business

18. There was no other business.

Date of Next Meeting

19. 18 May 2022

Britta Crawford
January 2022

b.crawford@rcvs.org.uk

Summary	
Meeting	Education Committee
Date	08 February 2022
Title	Summary report of the graduate and adviser VetGDP surveys
Summary	<p>In 2021, the Vet Graduate Development Programme (VetGDP) was launched by RCVS, linking trained advisers to new graduates at their place of work to provide support and guidance.</p> <p>Prior to the graduate and adviser starting this collaborative programme, both were asked to complete a questionnaire. The questionnaire gathered some demographic data, as well as asking specific questions about how prepared the graduate felt on commencing their first role, and how well prepared the adviser felt the graduate was.</p> <p>Both the advisers and graduates completed the questionnaire separately and could only access the VetGDP e-portfolio once the questionnaire had been completed and submitted. This has provided an extremely high response rate.</p> <p>This report provides a high-level summary of the data analysis. More detailed analyses have been undertaken on the data specific to each vet school and have been distributed to them, along with their fully redacted raw data, in order to support their internal quality improvement plans.</p>
Decisions required	For information
Attachments	Annex A – Summary Report of the 2021 Graduate and Adviser VetGDP Surveys
Author	<p>Kirsty Williams</p> <p>Education Quality Improvement Manager</p> <p>k.williams@rcvs.org.uk / 02079651105</p>

Classifications		
Document	Classification¹	Rationales²
Paper	Unclassified	
Annex A	Unclassified	

¹Classifications explained	
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ANNEX A – Summary Report of the 2021 Graduate and Adviser VetGDP Surveys

Background

In 2021, the Vet Graduate Development Programme (VetGDP) was launched by RCVS, linking trained advisers to new graduates at their place of work to provide support and guidance.

Prior to the graduate and adviser starting this programme, both were asked to complete a questionnaire. The questionnaire gathered some demographic data, as well as asking specific questions about how prepared the graduate felt on commencing their first role, and how well prepared the adviser felt the graduate was. Finally, graduates were asked to describe any particular strengths of their veterinary degree (Advisers asked to describe graduate strengths) and areas where they were less well prepared.

Both the advisers and graduates completed the questionnaire separately and could only access the VetGDP e-portfolio once the questionnaire had been completed and submitted. This has provided an extremely high response rate.

The data was filtered by vet school attended by each graduate and analysed by the RCVS to provide an individualised report which was issued to each school, along with their specific redacted raw data.

The RCVS will continue to gather this information for each graduating cohort, and this will contribute to the outcomes data available in the accreditation repository for each vet school that will be analysed in the accreditation cycle. It is envisaged that the data will be used by vet schools for their own internal quality improvement processes.

The questionnaires were set up on the Typeform platform and remain open as graduates commence their first roles. For the purposes of this review, the data was collected on 24th November 2021 and the analysis was carried out on the responses up to this date only.

Demographic Data

A total of 921 graduates had completed the questionnaire by 24th November 2021. Of these 1 had graduated in 2018, 27 in 2019, 45 in 2020, and 848 in 2021.

806 had graduated from UK vet Schools, and 115 from overseas vet schools.

741 graduates were female; 176 were male and 4 preferred not to say.

A total of 770 advisers had completed the questionnaire. Of these 574 were female, 191 male and 5 preferred not to say.

Age groups were as follows:

Age	Graduates	
	No. Respondents	% Respondents
20 - 24	587	63.7%
25 – 29	277	30.1%
30 - 34	45	4.9%
35 +	12	1.3%

Age	Advisers	
	No. Respondents	% Respondents
21 - 25	30	3.9%
26 - 30	148	19.2%
31 - 35	181	23.5%
36 - 40	126	16.4%
41 - 45	139	18.0%
46 - 49	30	3.9%
50 - 55	59	7.7%
55 +	57	7.4%

New graduate destination: Type of first role

Type of Role	No. Graduates	% Graduates
Small animal (inc. exotics)	638	69.3%
Mixed	156	16.9%
Equine	66	7.2%
Farm / production animal	46	5.0%
Charities & Trusts	6	0.7%
Other	3	0.3%
DEFRA, APHA, FSA, FSS, DAERA	2	0.2%
Commerce and industry	1	0.1%
Other (University/educational establishment)	1	0.1%
Overseas Government	1	0.1%
Veterinary School	1	0.1%

Extra Mural Studies (EMS) and Intra Mural Rotations (IMR) data

All graduates were asked how many weeks of pre-clinical (animal handling) EMS (AHEMS) they completed as well as the number of weeks of clinical EMS they completed. Due to the pandemic, the number of weeks of EMS required had been reduced for this cohort, to a minimum of 12 weeks AHEMS and 13 weeks clinical EMS.

30 Graduates from UK schools stated that they had completed less than 12 weeks AHEMS, and this was across all vet schools. 20 Graduates from UK schools stated that they had completed less than 13 weeks clinical EMS, and again this figure was represented in all vet schools.

However, the majority of graduates had completed the required number of weeks of EMS.

Graduates were also asked how many weeks of IMR they had completed in first opinion practice settings and in referral practice settings. Graduates reported from 1 week to 36 weeks of IMR

completed in a first opinion setting. 63 UK graduates reported completing just 1 week of their IMR in a first opinion practice setting across their entire vet degree.

Graduates reported spending a range from 1 week to 40 weeks IMR in a referral practice setting. Those with less than 10 weeks IMR in a referral practice setting were overwhelmingly from those vet schools offering more distributed or community-based curriculum models.

It should be noted that there may be discrepancies in the number of weeks of each of these placements (EMS and IMR) as recollected by graduates. However, the data should not be discounted and provides a useful benchmark from which to explore further evidence during the accreditation process in future.

Confidence / Preparedness Data

All graduates and advisers were asked a series of questions relating to their level of preparedness. Graduates were asked to consider how well they felt their veterinary programme had prepared them for their first role in the profession.

The first question asked how confident they felt to work independently. They were asked to rate their confidence using a 5-point Likert scale, where 1 was not at all confident and 5 was extremely confident.

Confidence	1	2	3	4	5
No Graduates	99	311	426	82	3
% Graduates	10.7%	33.8%	46.3%	8.9%	0.3%

The other questions were all based on day one competencies and skills and asked about specific conditions and skills. For example:

*“How well did your veterinary programme prepare you to **gather a history** for the following conditions (at the point of graduation)? (scale: 1 = not at all prepared, 5 = completely prepared).”*

- *Companion animal*
 - *Pruritis*
 - *Diarrhoea*
 - *Coughing*
- *Equine*
 - *Colic*
 - *Pruritis*
 - *Lameness*
- *Production animal*
 - *Mastitis*
 - *Diarrhoea*
 - *Respiratory Disease*

Advisers were asked about the same skills and competences but asked about how well prepared they felt the graduate was at the point of graduation. To enable the adviser to get to know the graduate

and for them to be able to observe the graduate undertake a range of procedures, they were asked to complete the questionnaire 3 – 6 weeks after the graduate had begun their employment.

Across all graduates the general opinion from both graduates and advisers was that they were better prepared for work with companion/small animals than they were for equines and production animals. Although there were some minor variations in this between vet schools, the data was consistent across vet schools in this respect.

Professional skills and attributes were also explored and the main themes emerging were that graduates had strong communication skills with both clients and team members; they had a good understanding of their limits and when to seek help; and were confident to ask for help and support from colleagues. Areas in which they felt they were less prepared were in time management (running consults, writing up notes, etc) and adapting treatment plans to take into account client economic factors.

Strengths and Areas for Improvement

The final questions in the questionnaire asked the graduates to comment on the aspects of their veterinary programme that they felt best prepared them for their first role and to indicate any aspects which they felt were missing from their veterinary programme, or which they felt could have been improved, in order to better prepare them for their first role.

The advisers were asked to comment on any areas in which the new graduate demonstrated a particular strength when they began their role, and on any areas in which the new graduate was not well prepared when they began their role.

There was no limit to the size of response and both the graduates and advisers were free to write freely.

The strengths of the veterinary programmes that were perceived by the **graduates** were:

- Communication skills
- Hands on experience through both IMR and EMS
- Working through whole cases
- Experience in first opinion rotations
- Practical skills
- History taking practice
- Surgery skills

The areas that **graduates** felt could have been improved in order to better prepare them for their first role were:

- More first opinion practice experience and less referral practice experience
- Improved surgical experience, especially common and routine surgeries such as castrates and spays
- More farm and equine knowledge and experience
- More treatment planning and diagnostics, especially taking into consideration client financial constraints

- More understanding of commonly used drugs and their doses, in particular using common drug names

The areas that **advisers** felt graduates showed particular strengths were:

- Communication and interactions with clients
- Teamwork and communication with peers
- Recognising their limitations and asking for support
- Willing to try
- Enthusiasm and work ethic

The areas in which **advisers** felt that graduates could have been better prepared were:

- Surgical skills
- Time management and prioritisation
- Self-belief and confidence
- Diagnostics and treatment plans
- Financial planning (for the client)

Summary	
Meeting	Education Committee
Date	8 February 2022
Title	Review of subcommittees and working parties which report to Education Committee.
Summary	<p>This paper provides the terms of reference (ToR) for the following subcommittees that report to Education Committee:</p> <ul style="list-style-type: none"> • Primary Qualifications subcommittee • CertAVP subcommittee • Specialist subcommittee • VetGDP subcommittee • CPD Policy and Compliance subcommittee <p>It does not include any short-term committees or task and finish groups.</p>
Decisions required	<p>To review all ToR and agree on any necessary amendments.</p> <p>For the CertAVP subcommittee ToR, EC is asked to agree to the updating of language to reflect current RCVS committee structures.</p> <p>For the Specialist subcommittee, EC is asked to agree the updates in the Membership section.</p>
Attachments	<p>Annex A – Primary Qualifications subcommittee ToR</p> <p>Annex B – CertAVP subcommittee ToR</p> <p>Annex C – Specialist subcommittee ToR</p> <p>Annex D – VetGDP subcommittee ToR</p> <p>Annex E – CPD Policy and Compliance subcommittee ToR</p>
Author	<p>Jenny Soreskog-Turp</p> <p>Lead for Postgraduate Education</p> <p>j.soreskog-turp@rcvs.org.uk / 020 7202 0701</p>

Classifications		
Document	Classification¹	Rationales²
Paper	Unclassified	N/A

¹Classifications explained

Unclassified	Papers will be published on the internet and recipients may share them and discuss them freely with anyone. This may include papers marked 'Draft'.
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Private	The paper includes personal data which should not be disclosed at any time or for any reason, unless the data subject has agreed otherwise. The Chair may, however, indicate after discussion that there are general issues which can be disclosed, for example in reports to committees and Council.

²Classification rationales

Confidential	<ol style="list-style-type: none"> 1. To allow the Committee or Council to come to a view itself, before presenting to and/or consulting with others 2. To maintain the confidence of another organisation 3. To protect commercially sensitive information 4. To maintain public confidence in and/or uphold the reputation of the veterinary professions and/or the RCVS
Private	<ol style="list-style-type: none"> 5. To protect information which may contain personal data, special category data, and/or criminal offence data, as listed under the General Data Protection Regulation

Primary Qualifications subcommittee (PQSC)

Terms of Reference

Reporting to the RCVS Education Committee, PQSC is required:

1. to consider reports of visitors (including follow-up reports) to veterinary schools and make recommendations to Education Committee on recognition of undergraduate veterinary degrees so that Council can submit formal advice to the Privy Council
2. to consider annual monitor reports from the veterinary schools
3. to consider and make recommendations to Education Committee on the appointment of RCVS visitors and observers
4. to keep RCVS visitation/accreditation criteria under review and in line with any relevant international standards and to consider annual statistical returns
5. to oversee the work of the Statutory Examination Board and ensure that the standards for entry onto the register by this route are consistent with recognised degrees

Membership

6. The sub-committee will consist of fourteen members, to include:
 - a) Four members nominated by RCVS Council (to include the chair)
 - b) Two student representatives.
 - c) Panel members comprising both academic and practitioner representation.
7. The panel has fourteen members in total with a with a quorum of 50%.
8. Length of service will be three years, with the option for a second term to be allowed in order to provide consistency across accreditation periods.

Meetings

9. The sub-committee will meet up to six times a year, and meetings will be held virtually, except for where face to face meetings would be more beneficial.
10. Some of the business may be conducted by email if agreed appropriate by the sub-committee.

Certificate in Advanced Veterinary Practice (CertAVP) subcommittee**Terms of Reference**

1. The subcommittee reports to Education Committee and is responsible for the coordination and oversight of arrangements for the modular Certificate in Advanced Veterinary Practice. It will:
 - manage a framework to develop outlines for new modules where required and ensure existing modules are kept up to date and fit for purpose.
 - consider submissions for accreditation from universities for assessing modules; make recommendations to Education Committee in any cases where accreditation cannot be agreed by the subcommittee.
 - oversee arrangements for synoptic assessment, and the appointment of RCVS examiners.
 - receive and consider periodic quality assurance reports from accredited universities and make recommendations to Education Committee on any cases that cause concern.
 - oversee the Rules for implementation of the qualification and make recommendations to Education Committee for keeping the Rules up to date.
 - liaise where appropriate with other relevant veterinary associations, societies & divisions to ensure appropriate input of expertise to the accreditation, assessment and review process, and to consult on development of new modules.

Membership

2. Membership of the subcommittee will comprise of a mix of practitioners and academics, including representation of those who provide CertAVP module assessment.
3. The length of service would normally be 3 years, however this is not prescriptive and longer terms can be allowed for continuity or consistency of the subcommittee membership.
4. The subcommittee may nominate new members as appropriate, to be approved by Education Committee.
5. The subcommittee may co-opt individuals for their particular expertise for a defined period or defined task.

Meetings

6. The subcommittee may meet up to 3 times per year, remotely or in person as appropriate, and will report to the Education Committee. Some of the business may be conducted by email if agreed appropriate by the subcommittee members.
7. The panel has eight members in total with a with a quorum of 50% and at least one veterinary surgeon must attend each meeting.

Specialist subcommittee Terms of Reference

1. The Specialist Sub-Committee will report to Education Committee.
2. The Sub-Committee will recommend the decision on the outcome of all applications for Specialist Status to Education Committee. The decisions will be based on the requirements and criteria set by Education Committee. The Sub-Committee may recommend changes of the requirements, criteria and process, to be approved by Education Committee.

Membership

3. Membership of the Sub-Committee will comprise of a mix of practitioners and academics, covering the breadth of Specialist subject areas.
4. The Sub-Committee will normally comprise of 6 members, including the Chair.
5. Members will not normally be required to be Specialists themselves.
6. The length of service would normally be 3 years, however extensions can be granted for members to allow for continuity or consistency of the Sub-Committee membership.
7. The Chair will be appointed by RCVS.
8. Potential new members will be invited to follow an application process in line with RCVS policies. The Sub-Committee will then normally nominate new members from those applications, to be approved by Education Committee.
9. Other new members can also be appointed by RCVS where appropriate.

Meetings

10. The Sub-Committee will usually meet annually in January, although other meetings can be arranged on an ad hoc basis as and when required.

Veterinary Graduate Development Programme (VetGDP) subcommittee**Terms of Reference**

1. The VetGDP subcommittee reports to Education Committee and is responsible for the coordination and oversight or arrangements for the Veterinary Graduate Development Programme (VetGDP). It will:
 - oversee and update the VetGDP policy and guidance documents where necessary.
 - receive and consider periodic quality assurance reports and to advise action where appropriate.
 - decide on exemptions from the VetGDP.
 - manage the RCVS Entrustable Professional Activity (EPA) bank, agreeing on additions and ensuring the minimum of overlap.
 - oversee the sign-off procedure including oversight of the VetGDP Adviser panel.
 - oversee updates of the VetGDP Adviser training and guidance.
 - deal with ad-hoc queries that may impact policy.

Meetings

2. The subcommittee may meet up to 3 times per year. The subcommittee will meet remotely, unless there is a specific requirement to meet in person and some of the business may be conducted by email if agreed appropriate by the subcommittee members.
3. The subcommittee has a quorum of 50%

Membership

4. Sub-committee members should have a good understanding of the needs of new graduates and an interest in supporting them. There will be 8 – 10 members including representatives:
 - With good knowledge of the VetGDP
 - 1st opinion practice
 - across species
 - corporate practice
 - independent practice
 - VetGDP advisers
 - new graduates
 - MRCVS working in a non-clinical role
 - lay member with knowledge/involvement in a similar programme
5. The subcommittee may nominate new members as appropriate, to be approved by Education Committee.
6. The subcommittee may co-opt individuals for their particular expertise for a defined period or defined task.

CPD Policy and Compliance subcommittee Terms of Reference

Terms of Reference and meeting frequency

1. The Committee is responsible for monitoring and reviewing the RCVS CPD Policy and making recommendations for changes to Education Committee and VN Council.
2. The Committee is responsible for the RCVS CPD non-compliance policy and procedures, overall engagement with CPD and 1CPD and to make decisions on whether or not to refer individual cases of non-compliance or non-response to the Professional Conduct Department.
The group will:
 - a. Develop and keep under review the RCVS CPD non-compliance policy and procedures
 - b. Oversee any applications from veterinary surgeons or veterinary nurses to pause CPD.
 - c. Monitor and agree actions for CPD non-compliance cases
 - d. Decide when cases of CPD non-compliance should be referred to the Professional Conduct Department.
 - e. Monitor and review ways to improve engagement with CPD and the RCVS recording portal 1CPD.
3. The Committee will report to Education Committee and Veterinary Nursing Council.
4. The Committee will meet at least three times a year. Meeting will be held virtually except for any exceptional circumstances when face to face meetings will be more beneficial.

Membership

5. The Committee will consist of two veterinary nurses and one lay member nominated by the Veterinary Nurses Council and two veterinary surgeons and one lay member nominated by Education Committee. The committee will also have two external stakeholders that will be involved in the policy and CPD engagement discussions only. The committee has eight members in total with a with a quorum of 50% and at least one veterinary surgeon and one veterinary nurse must attend each meeting.

Summary	
Meeting	Education Committee
Date	8 February 2022
Title	List of approved Advanced Practitioners
Summary	A list of re-approved Advanced Practitioners and a list of newly approved Advanced Practitioners, approved by the panel in November 2021
Decisions required	To note
Attachments	None
Author	Rebecca Smith Senior Education Officer r.smith@rcvs.org.uk / 020 7856 1035

Classifications		
Document	Classification¹	Rationales²
Paper	Unclassified	

¹Classifications explained

Unclassified	Papers will be published on the internet and recipients may share them and discuss them freely with anyone. This may include papers marked 'Draft'.
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²Classification rationales

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List of re-approved Advanced Practitioners:

Designation	Name
Bovine Reproduction	Edward Hayes
	Philippa Mahen
	Tonia Simms
Companion Animal Behaviour	Hannah Donovan
	Emma Hatton
Emergency and Critical Care	David Mackenzie
	Helen Nelson
Equine Practice	Beth Robinson
Small Animal Cardiology	Maria Iole Giannitrapani
	Katharyn Hildick-Smith
Small Animal Medicine	Emily Hellewell
	Jennifer Long
	Benjamin Safrany
Small Animal Medicine - Feline	Yaiza Gomez Mejias
Small Animal Surgery	James Bennett
	Jon Berg
	Martin Fitzpatrick
	Leanne Hall
	Prudence Harvey
Veterinary Cardiology	Rachel Marsden
Veterinary Ophthalmology	Mark Russon
Veterinary Pain Management	Fergus Coutts

List of new approved Advanced Practitioners:

Designation	Name	Qualification
Companion Animal Behaviour	Emma Baker	MSc Newcastle
Emergency and Critical Care	Amy Norman	Harper Adams PgC
	Hannah Parrish	CertAVP ECC
	Anneka Phillips	BSAVA PGCert
	Nanette Robson	CertAVP ECC
	Michele Siebke	BSAVA PGCert
	Rebecca Thorne	Harper Adams PgC
Equine Internal Medicine	Abigail Jennings	CertAVP EM
	Sally McCartney	CertAVP EM
	Christopher Wright	CertEM (IntMed)
Equine Lameness	Andrew Wallace	CertAVP EL
Equine Surgery Orthopaedics	Simon Woods	CertAVP ESO
Small Animal Dermatology	Gordon Graham	Harper Adams PgC
	Stephanie Hovey	Harper Adams PgC
Small Animal Medicine	Yen Ang	CertAVP SAM
	Alastair Atkinson	CertAVP SAM
	Mark Bingham	CertAVP SAM
	Giulia Grenga	CertAVP SAM
	Aileen Griffin	Harper Adams PgC
	Katherine Hull	Harper Adams PgC
	Rachel Meakin	CertAVP SAM
	Paul Stanley	BSAVA PGCert
	Lindley Stewart	BSAVA PGCert
Small Animal Surgery	Amita Fiore-Patel	Harper Adams PgC
	Serena Holmes	Harper Adams PgC
	Clare Low	CertAVP GSAS
	Seamus O'Cathail	BSAVA PGCert
	Catriona Redman	BSAVA PGCert
	Malgorata Szczepanska	BSAVA PGCert
	Emmanouil Tzimtzimis	MSc
	Albertus Viljoen	Harper Adams PgC
	Louise Worth	Harper Adams PgC
Veterinary Anaesthesia	Katie Smithers	CertAVP VA
Veterinary Dermatology	Amy Smith	CertAVP VD
Veterinary Diagnostic Imaging	Emma Ball	Harper Adams PgC
	Raz Feldmesser	Harper Adams PgC
	Ian Johnson	Harper Adams PgC
Veterinary Ophthalmology	Marit Jynge	BSAVA PGCert
	Suzanne Robinson	BSAVA PGCert
	Alison Sunderland	Harper Adams PgC
Zoological Medicine	Holly Asquith-Barnes	Harper Adams PgC
	Hayley Bruce	CertAVP ZM
	Sheryl Calway	Harper Adams PgC
	Gianluca Deli	Harper Adams PgC
	Sarah Fallow	Harper Adams PgC
	Brian Halpenny	Harper Adams PgC
	Nadene Stapleton	CertAVP ZM