

CONSULTATION ON EXTRA-MURAL STUDIES IN THE VETERINARY UNDERGRADUATE CURRICULUM

BACKGROUND

RCVS's current review of extra-mural studies (EMS) has been prompted by a number of issues. Since the last major review in 1995, there have been significant changes in the UK higher education system: changes to the content and structure of the veterinary curriculum, to the number and organisation of veterinary schools as well as the introduction of increased tuition fees, adding to increasing levels of student and graduate debt. Revised requirements and guidelines for EMS were published by RCVS in 2005, introducing greater flexibility into EMS programmes, but the basic concept of EMS has remained essentially unchanged for many years.

The RCVS has therefore set up a working party to review the requirements for EMS. The working party first met in December 2008, and invited open-ended comments and views from the profession to help inform its considerations. (See Annex A for membership and remit of the working party.) Having considered all the various responses, the working party then held four days of 'evidence gathering sessions' at RCVS to discuss ideas further with a number of organisations and individuals. (See Annex B for the list of those who attended.)

The working party has now formulated its initial proposals and seeks further comments from the profession before it makes its final recommendations to RCVS's Education Policy and Specialisation Committee in the Autumn. The working party's findings and proposals are set out below and all members of the profession, either as individual members or as representatives of the various veterinary associations and universities are invited to comment.

Comments should be sent by email by Friday 4th September 2009 to Mrs Freda Andrews, Head of Education, at RCVS – at f.andrews@rcvs.org.uk

JUNE 2009

THE VALUE OF EMS

1. The working party has been impressed by the wide consensus on the enduring value of EMS – not just in terms of its contribution to the veterinary undergraduate course, but also to many practices who feel they benefit from the injection of new ideas from students and the opportunity to contribute to the professional development of the next generation of veterinarians. There has been no support for dropping the concept of EMS as part of veterinary undergraduate training.
2. It was noted that there was no direct equivalent of EMS elsewhere on mainland Europe or in the USA. Neither is there any requirement for EMS within the EU Directive setting out the minimum training requirement for veterinary surgeons. However, the working party noted that the UK's system is often looked on with envy by colleagues in other countries, and that there are some moves elsewhere in Europe to develop a similar system. The fact that EMS is not currently a European requirement is therefore not an argument to remove or reduce it in the UK. On the contrary, the UK's EMS system is an excellent example of how universities and practices can collaborate in the training of the next generation of veterinary surgeons, and should not only remain as a key feature of veterinary education, but should continue to be strengthened and improved.
3. Furthermore, there is an increasing emphasis within UK higher education on work-based learning, which is seen as a way to improve the employability of graduates and to increase the involvement of employers in HE.¹ "Employer engagement" and "employability" are now key government themes for HE, and yet this has been an unsung feature of veterinary education in the UK for over 70 years. The veterinary profession should be seen as an example for other sectors of how employers and the universities can work together for mutual benefit, and for the good of the profession at large.
4. There are strong educational reasons why EMS should continue to be an integral part of the veterinary degree. It provides students with an unrivalled opportunity to gain real-life work experience that enhances their university-based studies. Whilst the universities are responsible for teaching the skills that students need to practise when they first graduate, (the 'Day One Competences'), it is on EMS placements that students can further practise the animal handling and clinical skills that they first learn at university, as well as build up their experience of dealing with clients and with members of the veterinary team. New graduates are therefore able to 'hit the ground running' having developed their Day One competences whilst on EMS placements during their degree course. EMS helps students to prepare for work, and introduces them to the important concept of lifelong learning and reflective practice which then continues after graduation through the Professional Development Phase and ongoing CPD. As the veterinary degree is a professional qualification, EMS constitutes an important component that helps to distinguish the qualification from other academic science degrees.

¹ Dept for Innovation, Universities & Skills, "Higher Education at Work – High Skills: High Value", April 2008.

ALTERNATIVES TO EMS?

5. Before agreeing simply to accept the status quo, the working party considered carefully whether EMS should be replaced by a pre-registration year as happens in some other professions, or by extending the degree course by a further year. However, they were not persuaded that either approach would be of benefit, and indeed a pre-registration year (not to be confused with the Professional Development Phase) would not only increase the student debt burden, but would also put at risk the educational benefits of students interspersing periods of veterinary work placements with their university-based studies. The timing of EMS placements is important as the experience that students gain during placements informs and reinforces their learning during the core curriculum.

6. The working party asked the universities whether, if EMS were no longer a part of the UK veterinary degree course, they could still ensure that all students would have covered the essential Day One Competences defined by RCVS. Although most would be able to ensure that basic skills were taught as part of the core curriculum through intra-mural rotations, there would be a significant cost if it were all to be brought in-house. Furthermore, there was consensus that EMS placements not only help to develop Day One Competences, but they also provide students with valuable complementary experience in contexts that cannot be replicated within the university. This is not necessarily because the universities lack facilities or expertise (although some currently rely on EMS to cover some of the Day One Competences), but because students benefit from being exposed to veterinary work in real-life commercial and other working environments. Working within the time constraints and financial pressures of every-day veterinary practice is seen as an invaluable part of the undergraduate course and this must continue to be the main focus of EMS for the majority of students.

AIMS OF EMS

7. Reviewing the main aims of EMS, the working party believes that those set out in 1996 and reinforced in the 2005 guidance are still valid, although the notion that placements should always cover a breadth of species for each student needs adjusting. The working party proposes the following slightly revised aims:

Work placements should be undertaken in a range of veterinary-related contexts to allow students to gain an appreciation of the breadth of the veterinary role and how veterinary medicine and science operates in “real-life” and commercial environments. Specifically, placements should enable students to:

- gain an understanding of the practice and economics of animal management systems
- gain an understanding of practice economics and practice management
- acquire an understanding of medical and surgical treatments in a variety of species
- develop communication skills for all aspects of veterinary work
- expand their experience to those disciplines and species not fully covered within the university
- appreciate the importance of animal welfare in animal production and in the practice of veterinary medicine
- gain experience to help them appreciate the ethical responsibilities of the veterinary surgeon in relation to individual clients, animals, the community and society.

QUESTION 1

- Do you agree with the general aims for EMS set out at paragraph 7? If not, please suggest alternatives.

TIME SPENT ON EMS

Pre-clinical and Animal Husbandry related EMS

8. The 12 weeks devoted to animal husbandry EMS is still felt to be about right. Students need to develop their handling skills and husbandry knowledge for a variety of species, as well as develop their communication skills with animal owners and others and this must remain an essential component of the early years of the veterinary degree course. It is also an important grounding for veterinary public health education.
9. The working party considered whether some students should be allowed partial exemptions from animal husbandry EMS, for example those with an agricultural background or with considerable experience of handling a particular species. However, it was considered that any time saved by allowing exemption in one area would be well spent on developing skills in other areas, such as gaining experience on different types of farms, at other animal handling facilities, or at food production facilities.
10. Rather than defining a set number of weeks to be spent with particular species or in different types of placement, as currently happens in many universities, the priority should be for animal husbandry EMS placements to provide the student with all the necessary handling skills and husbandry experience they will need to have mastered before they progress to the clinical components of the course. Indeed, this is already stated in the existing RCVS guidance which says that **animal husbandry EMS should be designed to meet the individual needs of the student**. Universities should provide sufficient resource to assess individual needs, allowing as much flexibility as possible to meet these needs, rather than students merely ticking boxes as evidence of time-serving.

QUESTION 2

- a) Is 12 weeks for animal husbandry/pre-clinical EMS about right?
- b) Do you agree with the proposal at paragraph 9 that there should be no exemptions (in terms of time) allowed from this phase of EMS? If not, briefly outline why.
- c) Do you agree with paragraph 10 that there should be flexibility within animal husbandry-related and pre-clinical EMS to meet individual student learning needs?

Clinical EMS

11. The working party discussed whether the 26 weeks currently devoted to clinical EMS placements should change, but again was not persuaded that there would be any benefit in doing so. There was consensus during the first phase of consultation that the current time allocation is about right. However, the working party recommends that **the way clinical EMS is phased and structured should change, and there should be more flexibility to allow students to select placements that match their areas of interest as well as the university's curriculum.**
12. The working party noted that RCVS's current requirements for EMS already allow for significant flexibility in the balance to be achieved between different types of placement. Not all universities have taken advantage of this flexibility and many have continued to stipulate specific numbers of weeks to be achieved by all their students across species. In many cases, this has led to a climate of "box ticking" with students attending placements merely to meet the requirements, rather than seeing all their placements as a positive contribution to their learning.
13. Whilst it is essential that all students gain appropriate experience across all the major species to meet their Day One Competences, universities must not rely solely on EMS placements to provide this experience. **Universities must take primary responsibility for delivering the Day One Competences, and where these need to be covered in placements outside the university, such placements should be seen as part of the core curriculum and should be quality assured, controlled and monitored accordingly, just like any other part of the intra-mural course.** Where placements are being used to deliver essential 'Day One' teaching that is not being covered within the university, such placements should not be seen as falling within the category of EMS with which this paper is concerned.
14. The working party recommends that clinical EMS should be seen as comprising two distinct phases:
 - **"Observational" EMS of around 6 weeks, to be undertaken at the start of the clinical years or when animal husbandry EMS has been completed. During this period students should undertake at least three different types of placements to experience a range of veterinary work.** (The term 'observational' does not imply that the student should be a mere passive observer, but indicates that the purpose is for them to see a variety of practices/placements.)

This phase will help them prepare to make decisions about the type of placements to undertake during the next, practical phase of EMS. As a student's clinical skills are still undeveloped in year 3, the amount of hands-on clinical work that is reasonable for them to undertake during early EMS placements is limited, and this can sometimes prove

frustrating for both the student and the placement provider. The focus during this phase of EMS should instead be on observing how practices work, and gaining experience to help select an appropriate 'base' practice or area of practice for the next phase of EMS. This is not to rule out practical hands-on work during this phase – on the contrary, students will learn best by doing, rather than just by seeing, but the limits of their ability at this stage needs to be appreciated by all parties.

- **“Practical” EMS should follow on from “observational” EMS, and should comprise the remaining 20 weeks to be undertaken during the main clinical years.**

For their practical EMS, students should be able to select the areas of practice they wish to focus on, and should be encouraged to find a “base” practice where they can spend a significant part of this final phase of their EMS, returning at different intervals until they graduate. This will help students to build a relationship with the practice, and help the practice to get to know and trust the student. In this way, the opportunities offered by the placement can be maximised for both parties.

15. The working party does not feel it appropriate to specify the number of weeks that should be spent in a base practice, nor the number of weeks that should be spent on different types of placement or with different species. This should be left to the individual student after a discussion with their clinical tutor at the university to identify their changing learning needs and career aspirations. However, the university has the over-riding responsibility to ensure that Day One Competences have been covered adequately for each student, either through external placements (the 'distributed model') or through other intra-mural rotations at the university. Universities must provide sufficient resources to enable individual “tailoring” of student learning to be agreed and reviewed at regular intervals.
16. Students should be discouraged from selecting a base practice or booking up EMS placements for particular species too far in advance. Not only might they change their minds about the areas on which they want to focus, but booking too far in advance blocks placements for others unnecessarily. Likewise, practices should be discouraged from accepting bookings too far ahead, as this may limit choices when students and their tutors are planning future placements to match the student’s educational needs. The exception to this would be that of a student seen during their “observational EMS” who would then like to book several return “practical EMS” visits throughout their remaining time as a student.

QUESTION 3

Do you support the proposals above for restructuring clinical EMS into two phases, with the latter phase allowing far more flexibility for students (after discussion with tutors) to select their areas of practice for EMS, and for more time to be spent in a “base practice”? (If not, please explain briefly why not).

EMS AND VETERINARY PUBLIC HEALTH

17. The teaching of VPH in its fullest sense must be strengthened. The practical component of understanding food hygiene and gaining experience of full-throughput abattoirs cannot be left to the vagaries of *ad hoc* EMS placements, many of which appear to contribute little of educational value to many students' experience. **To improve the quality of learning in this area, the working party recommends that visits to fully commercial abattoirs and other meat processing plants, which form an essential part of teaching in veterinary public health for all students, must be seen as part of the core curriculum and should not be left to EMS.**

18. The use of small in-house abattoirs such as those at Nottingham and Bristol could be effective if used to introduce students to the processes involved in a controlled manner. **The working party was encouraged to hear of the possibility of universities sharing these facilities. Discussions between universities to bring about collaboration and sharing of facilities for abattoir training should take place as a matter of urgency.** But this must be supplemented by external visits, coordinated by the university as part of the core course and possibly organised in small groups, to commercially run full-throughput red and white meat abattoirs, cutting and processing plants. This will help ensure that all students see a variety of meat production processes and, with more direction and control provided by the university, may help facilitate the development of closer links between the industry and the university for the mutual benefit of each. Continued collaboration between the veterinary schools, the Government Veterinary Surgeons team and the Veterinary Public Health Association will be important.

19. Those students who wish to spend further elective time focussed on public health (which of course is far broader than just meat hygiene) should be encouraged to undertake relevant EMS placements within the industry, including time with an OV and in abattoirs, as well as other placements such as with the VLA, Defra, Animal Health, and other food production facilities.

QUESTION 4

Do you support the proposals relating to veterinary public health at paragraphs 17 – 19 to move abattoir-based experience into the core curriculum and out of EMS?

COMMUNICATION

20. A key message that has come across repeatedly from those responding to the initial consultation has been about **the importance of communication and exchange of information – between veterinary schools and practices, between students and practices, and between students and their university tutors**. Adding RCVS into the equation with its statutory duty to set and monitor standards for veterinary undergraduate education, there are therefore four principal parties involved if EMS is to be delivered effectively: students, universities, practices and other placement providers, and the RCVS. Although the general message to the working party was that EMS is of immense value and should not be diminished, **there is room for improvement by all parties to ensure that EMS continues to be an effective part of veterinary education and contributes to the development of the profession more generally**. All have a part to play if EMS is to be strengthened, and the working party has recommendations for all four parties.

RECOMMENDATION FOR STUDENTS

21. **Students must take responsibility for their own learning during EMS. This includes preparing properly before each placement**, setting themselves learning objectives for each placement in consultation with their tutors, taking into account the RCVS Day One Competences. They must be familiar with the guidance provided by their university and RCVS for EMS. They should also communicate effectively and in a professional manner with the placement provider before, during and after the placement. The EMS 'Driving Licence' developed by Edinburgh and RVC will be very useful preparation for placements. **Students should check that their placement provider has received all the relevant paperwork and guidance relating to EMS and, if they haven't, then either provide the practice with a copy, or email them with an on-line link so they can find it easily.**
22. **Students must keep their EMS records up to date, and must keep a proper record of their experience during EMS, using the logbooks, learning diaries or databases provided by their university. They must discuss their EMS records and progress with their clinical tutor(s), reflect on what they are learning and see their EMS experience as an integral part of their education.**
23. There is already plenty of guidance for students on how they should behave whilst on EMS placements, including the EMS 'Driving Licence' and the BVA Guide, and we do not wish to repeat it all here. The key issue is that students must recognise that they have important responsibilities as "nearly professionals" when undertaking EMS and that their attitudes and behaviour have an effect on their own career, and also reflect on their university and the veterinary student body more widely.

RECOMMENDATIONS FOR UNIVERSITIES

24. **Universities must allocate sufficient staff resources to EMS to ensure that it is administered, coordinated and monitored effectively, as befits a 38 week component of the veterinary degree.** They must ensure that there is ongoing liaison with all the various placement providers, be available to discuss learning objectives prior to each placement, gather feedback on students with those providers, and ensure that students are maintaining their EMS experience records and learning diaries. They must also ensure that such records are discussed with clinical tutors. It is recommended that timetabled tutorial sessions are built into the course to facilitate this.
25. In the working party's view, responsibility for coordinating EMS within the university is not a task that can be undertaken by a single individual, especially where that individual has other teaching, clinical or administrative demands on their time. Universities must continue to have a single named EMS coordinator to oversee EMS within the university and to liaise with practices and other organisations, including the RCVS. But, to ensure EMS continues to be delivered effectively, and to do justice to the enormous contribution provided by the rest of the profession through placements, **more staff resources are needed if EMS delivery is to be improved.**
26. **There must be a comprehensive recording system for students to log and reflect on their EMS experience and this must form an integral part of formative assessment during the degree course.** (Such a log could be combined with other records that demonstrate students' progress in achieving Day One Competences; it need not necessarily be used exclusively for EMS.) Students must be made aware of the importance of keeping accurate and up to date notes on their progress. (This is not a new recommendation – it is included in RCVS's existing EMS requirements. However, there is scope to improve its implementation, as the working party heard of varying degrees of compliance.)
27. **Universities must take primary responsibility for delivering the Day One Competences, and where these need to be covered in placements outside the university, such placements should be seen as part of the core curriculum and should be quality assured, controlled and monitored accordingly, just like any other part of the intra-mural course.** (Again, this is not a new recommendation – it is covered by RCVS's policy agreed in 2008 on the 'distributed' clinical education model, but greater clarity may be needed in some instances.)
28. The current student finance regulations in England allow students to apply for long course loans where attendance over 30 weeks and 3 days is required. The extra loan is paid for 52 weeks where attendance is required on a course for 45 weeks or more. Although such extended loans are means-tested, they would provide access to significant extra funds to

help some students defray the expense of undertaking EMS. Although this is not a complete solution to the problem of alleviating students' financial problems as it will add to graduate debt, it is still worth exploring as a means of providing additional funds to those students most in need. As EMS is a mandatory and integral part of the veterinary degree course, **it is recommended that universities should explore the possibility of defining some parts of their degree course as a "long course", and publicise this information to students to enable them to take advantage of the increased student loan available.**

29. **Bearing in mind that practices receive no financial remuneration for their contribution to the training of veterinary students, universities should consider offering EMS providers discounted and/or preferential access to CPD (including clinical CPD) and other services provided by the university.** This will help to strengthen links between practices and universities, bringing benefits to both sides. Whilst these recommendations have financial implications for the universities, it should be recognised that it could cost them considerably more to try and replace EMS completely by in-house or university-owned provision, if indeed it ever could be replicated.

RECOMMENDATIONS FOR PRACTICES

30. It is recognised by all that veterinary practices and other placement providers make a very important and highly valued contribution to veterinary education through their involvement with EMS. This altruistic attitude to education is a great credit to the profession and is something that should continue to be nurtured. The working party heard from many contributors about the benefits to practices of taking students, not only in terms of recruitment opportunities, but also of having insight into the latest thinking within the veterinary schools. It was reported that students who were near the end of their degree and who had built a relationship with a practice were often able to act as an additional pair of hands within the practice and were thus not always perceived as a drain on practice staff time.
31. To improve the experience of EMS for both the practice and the student, **it is recommended that practices identify named individual(s) to act as EMS contact for students and the university, and that some time is set aside for entry and exit interviews with students at the beginning and end of each placement.** Each student should arrive at the placement with a set of objectives they're hoping to meet, and it will save time and make the placement more productive for both parties if these can be briefly discussed with the student at the outset. Practices should then not be inhibited from providing honest feedback to and about the student, and should contact the university's EMS coordinator if they want to discuss a particular student in more detail.

32. **Practices should check they have access to the latest guidance on EMS** provided by the universities, RCVS and the BVA. The student should be able to give them a copy or point them to the online guidance if necessary. Guidance is published on the RCVS website which summarises the curriculum for each university and gives further general guidance for practices.

RECOMMENDATIONS FOR RCVS

33. It is RCVS's responsibility to monitor that EMS is being delivered effectively as part of the university degree. Although EMS has always been considered during RCVS visitations, **the working party recommends that an audit-based approach should be adopted during future RCVS visitations to ensure compliance with EMS requirements. Universities should also be required to report annually until further notice to RCVS's Education Policy & Specialisation Committee on how they are developing and improving their EMS programmes, as well as other measures they are taking to deliver Day One Competences generally.** EPS Committee should ensure that this is a regular feature on its agenda.
34. **It is recommended that RCVS should take the lead in developing a single 'PDP style' recording system for EMS to be used by students, as a pre-cursor to PDP after they graduate.** There is a natural link between systems used to record EMS, PDP and ongoing CPD, and this would help to emphasise the importance of reflective lifelong learning in the workplace.
35. **RCVS will need to communicate its recommendations on EMS to veterinary schools and to the wider profession in a concerted effort over the next year.** The working party is conscious that much valuable guidance has been written in previous years about EMS but little appears to have got through to those at whom it was directed.

QUESTION 5

Do you agree with the recommendations at paragraphs 21 – 35, for students, universities, practices and the RCVS? If not suggest other priorities that you think should be explored.

SUMMARY OF MAIN RECOMMENDATIONS

1. Animal husbandry EMS should remain at 12 weeks, and should be designed to meet the individual needs of the student. (paragraphs 8 – 10)
2. The way clinical EMS is phased and structured should change: there should be more flexibility to allow students to select placements that match their areas of interest as well as the university's curriculum. (paragraphs 11 – 16)

Clinical EMS should be seen as comprising two distinct phases:

- “Observational” EMS of around 6 weeks, to be undertaken at the start of the clinical years or when animal husbandry EMS has been completed. During this period students should undertake at least three different types of placements to experience a range of veterinary work. (nb. ‘observational’ does not necessarily imply passivity or lack of practical involvement)
 - “Practical” EMS should follow on from “observational” EMS, and should comprise the remaining 20 weeks to be undertaken during the main clinical years.
3. Visits to fully commercial abattoirs and other meat processing plants, which form an essential part of teaching in veterinary public health for all students must be seen as part of the core curriculum and should not be left to EMS. (Paragraphs 17 – 19)
 4. Discussions between universities to bring about collaboration and sharing of university facilities for abattoir training should take place as a matter of urgency. There must also be external visits, coordinated by the university as part of the core course and possibly organised in small groups, to commercially run full-throughput red and white meat abattoirs, cutting and processing plants. (Paragraphs 17 – 19)
 5. Students must take responsibility for their own learning during EMS. This includes preparing properly before each placement. Students must keep their EMS records up to date, and must keep a proper record of their experience during EMS, using the logbooks, learning diaries or databases provided by their university. They must discuss their EMS records and progress with their clinical tutor(s), reflect on what they are learning and see their EMS experience as an integral part of their education. (paragraphs 21– 23)
 6. Students should ensure that their placement provider has a copy of the relevant documents and guidance on EMS. (paragraphs 21 – 23)
 7. Universities must allocate sufficient staff resources to EMS to ensure that it is administered, coordinated and monitored effectively, as befits a 38 week component of the veterinary degree. (paragraphs 24 – 25)

8. There must be a comprehensive recording system for students to log and reflect on their EMS experience and this must form an integral part of formative assessment during the degree course. (paragraph 26)
9. Universities must take primary responsibility for delivering the Day One Competences, and where these need to be covered in placements outside the university, such placements should be seen as part of the core curriculum and should be quality assured, controlled and monitored accordingly, just like any other part of the intra-mural course. (paragraph 27)
10. Universities should explore the possibility of defining some parts of their degree course as a "long course", and publicise this information to students to enable them to take advantage of the increased student loan available. (paragraph 28)
11. Universities should consider offering EMS providers discounted and/or preferential access to CPD (including clinical CPD) and other services provided by the university. (paragraph 29)
12. Practices should identify named individual(s) to act as EMS contact for students and the university, and ensure that some time is set aside at the beginning and end of each placement for entry and exit interviews with students. (paragraph 31)
13. Practices should check they have access to the latest guidance on EMS provided by the universities, RCVS and the BVA. The student should be able to give them a copy or point them to the online guidance if necessary. (paragraph 32)
14. An audit-based approach should be adopted during future RCVS visitations to ensure compliance with EMS requirements. (paragraph 33)
15. Universities should report annually until further notice to RCVS's Education Policy & Specialisation Committee on how they are developing and improving their EMS programmes, as well as other measures they are taking to deliver Day One Competences generally. EPS Committee should ensure that this is a regular feature on its agenda. (paragraph 33)
16. It is recommended that RCVS should take the lead in developing a single 'PDP style' recording system for EMS to be used by students, as a pre-cursor to PDP after they graduate. (paragraph 34)
17. RCVS will need to communicate its recommendations on EMS to veterinary schools and to the wider profession in a concerted effort over the next year. (paragraph 35)

QUESTION 6

Do you have any other observations or comments on the working party's findings and recommendations?

SUMMARY OF QUESTIONS FOR CONSULTATION

QUESTION 1

Do you agree with the general aims for EMS set out at paragraph 7? If not, please suggest alternatives.

QUESTION 2

- a) Is 12 weeks for animal husbandry/pre-clinical EMS about right?
- b) Do you agree with the proposal at paragraph 9 that there should be no exemptions (in terms of time) allowed from this phase of EMS? If not, briefly outline why.
- c) Do you agree with paragraph 10 that there should be flexibility within animal husbandry-related and pre-clinical EMS to meet individual student learning needs?

QUESTION 3

Do you support the proposals at paragraphs 11 – 16 for restructuring clinical EMS into two phases, with the latter phase allowing far more flexibility for students (after discussion with tutors) to select their areas of practice for EMS, and for more time to be spent in a “base practice”? (If not, please explain briefly why not).

QUESTION 4

Do you support the proposals relating to veterinary public health at paragraphs 17 – 19 to move abattoir-based experience into the core curriculum and out of EMS?

QUESTION 5

Do you agree with the recommendations at paragraphs 21 – 35, for students, universities, practices and the RCVS? If not, explain briefly why not, and/or suggest other priorities that you think should be explored.

QUESTION 6

Do you have any other observations or comments on the working party’s findings and recommendations?

Please email your comments by Friday 4th September 2009 to Mrs Freda Andrews, Head of Education, at f.andrews@rcvs.org.uk

REMIT, MEMBERSHIP & MEETINGS HELD

MEMBERSHIP OF THE WORKING PARTY

Dr. Barry Johnson – Chairman
RCVS Council Member, Large animal practitioner

Professor. Ed Hall
Professor of Companion Animal Studies, University of Bristol

Mr Paul Mahoney
EMS Director, Royal Veterinary College

Dr. Bob Moore
RCVS Senior Vice President, Large animal practitioner

Prof Bill Reilly
BVA President Elect, nominated by BVA

Mr. David Wadsworth
Member of Primary Qualifications Sub-Committee, Companion animal practitioner

Miss Karmen Watson
(Association of Veterinary Students, rep #1)

(Miss Emma Sinclair
Association of Veterinary Students, rep # 2, alternate for Miss Watson for meetings in April 09)

REMIT

The working party's remit was agreed by RCVS's Education Policy & Specialisation Committee at its meeting in October 2008:

1. Review RCVS policy and guidance on EMS and clinical education, and produce proposals for change as required, consulting with stakeholders as necessary and taking into account
 - related RCVS policy on veterinary education, including policy on the distributed model of clinical teaching, Day One competences, accreditation criteria
 - evidence obtained following consultation with interested stakeholders
 - current and likely future developments in veterinary education and the training requirements for veterinary surgeons.
2. Report to EPS Committee with proposals within a year.

MEETINGS HELD

The working party met at RCVS's offices on 11 December 2008 and on 18 March 2009, and held evidence gathering sessions at RCVS on 7th, 8th, 9th and 20th April 2009. Its next meeting is planned for 15th September 2009.

CONSULTATION TO DATE

The working party issued an invitation to all the BVA specialist and territorial divisions in December inviting written comments and views on EMS. The invitation was circulated via BVA. All graduates from 2007 and 2009 were also invited to comment. An item appeared in the Vet Record, and on the RCVS website publicising the consultation to anyone with an interest. Consultees were not restricted to a fixed list of questions as the working party wanted to encourage as wide a range of views as possible. However, a summary of some of the key issues was provided for associations and individuals to take into account in their submissions.

65 written submissions were received for the first phase of consultation between January and March 2009, of which 26 were from organisations/associations, and 39 were from individuals, most of whom were recent graduates.

The working party then held 4 days of 'evidence gathering sessions' during April, when representatives of various associations were invited to discuss EMS with the working party. The following attended these sessions with the working party:

Animal Health - Linda Smith
Association of Government Veterinarians - Sophia Rizvi
Association of Veterinary Students – Emma Sinclair
Bristol University - Frank Taylor
British Cattle Veterinary Association - Andrew Prail
British Equine Veterinary Association - David Dugdale
British Small Animal Veterinary Association – Mark Johnson
British Veterinary Association – Nicky Paull
Cambridge University – Andrew Jefferies
Edinburgh University - Elaine Watson & Rachel Whittington
Glasgow University – Stuart Reid
Government Veterinary Surgeons team (Defra) - Megan Power
Ms Karen Hurst (2007 graduate)
Ms Alison Lambert
Liverpool University – Malcolm Bennett
Meat Hygiene Service - Lewis Grant
Nottingham University – Mike Targett
Ms Karen Pickering (2008 graduate)
RVC - Stephen May
SPVS – Nick Ackworth
Veterinary Nurses Council – Andrea Jeffery
Veterinary Practice Management Association – Sarah Hibbert
Veterinary Public Health Association – Jason Aldiss