Harper and Keele Veterinary School
BVetMS accreditation event

12-16 May 2025

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

Table of contents

List of panel members

Dr Kate Richards, Chair, RCVS

Dr Alex Berry, RCVS

Dr Jude Bradbury, RCVS

Prof Alexander Corbishley, RCVS

Dr Hannah Fitzsimmonds, RCVS

Dr Michal Tzack, RCVS

Dr Joe Moffit, VCI

Dr Anthea Flemming, SAVC

Prof Jenny Western, AVBC

Dr Paul Kavanagh, VCI observer

Also in attendance:

Dr Linda Prescott-Clements, RCVS staff

Ms Claire Holliday, RCVS staff

Ms Kirsty Williams, RCVS observer

Background

1. The accreditation event for the BVetMS veterinary programme run jointly between Harper Adams University and Keele University, took place from January to May 2025, and involved representatives from the Royal College of Veterinary Surgeons (RCVS), the Australasian Veterinary Boards Council (AVBC), the South African Veterinary Council (SAVC) and the Veterinary Council of Ireland (VCI). This was a final accreditation event for a new veterinary programme, undertaken as the first cohort of students were preparing to graduate.

2. For UK veterinary degrees, it is the UK's Privy Council which grants recognition orders for a degree to be recognised for registration purposes. For this they receive advice from the RCVS. The accreditation report is first considered by RCVS's Primary Qualifications Sub-Committee (PQSC), then by the Education Committee (EC) which makes its recommendation to Privy Council. For new veterinary programmes the report is also considered through the RCVS Council.

3. Stage one of the event involved consideration of evidence uploaded to the RCVS repository by the School, in support of the accreditation standards. A substantial amount of information comprising input, process and outcomes evidence, was considered by all members of the accreditation panel and staff within the RCVS Education Department, and a risk-based approach was taken when deciding on the scope and focus of the visitation.

4. Panel members completed their initial review of the evidence independently of each other and made an assessment of where it was felt that standards were met with multiple sources of robust outcomes evidence, or where further evidence and / or triangulation was required during the visitation stage of the accreditation event.

5. Following initial review of the evidence in the repository, the panel met to agree on the scope and focus of the visitation. During this meeting, the evidence available for each accreditation standard was considered and discussed in depth, which informed their decision on which questions/areas of exploration were needed on the visit, and which groups of stakeholders were required in order to collect this additional information or triangulate existing evidence.

6. Following this meeting, RCVS staff compiled a detailed list of questions for stakeholder groups, along with specific areas/facilities needing to be seen directly by panel members during the visit, including both on-site and off-campus facilities. This list was then used to draft a visit schedule in conjunction with the School.

7. The panel were present at Harper and Keele Veterinary School from Monday 12th to Friday 16th May 2025. Excluding the external practice visits, the panel stayed together as one group for all tours and meetings with stakeholder groups. The report on each of the RCVS accreditation domains and associated standards, therefore, represents the combined views of the whole team.

8. The evidence rubric can be seen at annex 1. This details the evidence gathered at each stage of the accreditation event, and which each panel member voted on compliance with against each

individual standard. Commendations are provided, along with recommendations and suggestions. Commentary and rationale to support any commendations, recommendations and suggestions is provided for context.

9. The School's response to this report can be found at annex 2 and contains a timeline/action plan for the addressing of standards which are not met, or partially met, along with any timelines/plans for implementing suggestions from the report.

10. The final schedule for the visitation, including the groups of stakeholders met with during the visitation, can be seen at annex 3.

11. This report, including the response from Harper and Keele Veterinary School, is considered by the RCVS committees. The RCVS committees will consider the findings and agree on an accreditation classification, and then this decision will be conveyed to the King's Privy Council.

12. The Chair, accreditation panel members and the RCVS would like to thank the Universities and especially the Head of School, Professor Matt Jones, and the staff, for their hospitality, openness, and collegiate cooperation during the visitation. In particular, the panel wished to thank Helen Barton for her support throughout the process, and responding to multiple requests for information, often with little notice. The panel was also grateful for all the work that staff had put into preparing the thorough repository of evidence in stage one of the event, which formed the basis for discussions/triangulation during the visitation.

Summary of findings

Domain 1 – The Learning Environment

Commendations

- The school is commended for their innovative use of 3D printing and simulation facilities to support student learning. (Standard 1.13)

Recommendations

- The school must ensure health and safety, biosecurity, and animal welfare policies are adhered to across all teaching sites and effective monitoring and oversight of such areas are in place. (1.2)

- The school must undertake in-person audits of the learning environment at all teachings sites with sufficient regularity. (1.3)

- The school must ensure that all commercial partner practices involved delivering IMR are PSS accredited or equivalent. (1.4)

- The school must ensure students obtain sufficient hands-on experience with live birds and small ruminants. (1.5)

- The school must ensure all students attend farm ambulatory visits to experience a range of clinical cases. (1.8)

- The school must continue at pace to develop proposals for a range of postgraduate programmes and provide a timeline for implementation. (1.14)

Suggestions

- The school should review the integrity of isolation procedures across IMR providers. (1.9)

- The school should consider improving access to farm records (individual and herd health) for students. (1.11)

- The school is encouraged to continue their plans to allow open access to their clinical skills labs. (1.13)

Domain 2 – Organisation, Culture and Values

Commendations

- The school is commended for the strong commitment and positive culture with respect to diversity and inclusion. (2.4)

- The school is commended for cultivating a growth mindset in their students through the implementation of EPAs, support from CTFs, and coaching from preceptors. (2.5)

There are no recommendations or suggestions for this domain.

Domain 3 – Educational Governance and Quality Improvement

Recommendations

- The school must ensure that there are sufficient staff to support the effective and sustainable delivery of all aspects of the programme (3.5)

- The school must ensure that contracts are in place with all partner practices involved in the provision of education. (3.13)

- The school must improve the granularity of attendance monitoring to ensure gaps in learning do not occur. (3.14)

- The assessment strategy must be reviewed for validity to ensure all graduates are Day One Competent. (3.14)

Suggestions

- The school should consider convening a school health and safety committee with student representation. (3.7)

- The school should ensure parity across disciplinary processes across institutions. (3.7)

Domain 4 – Supporting Students

Commendations

- The school is commended for the innovative and holistic support provided by staff, particularly by the preceptors, CTFs, and disability inclusion tutors. (4.1)
- The school is commended for championing inclusion and widening participation through a range of processes. (4.2)
- The school is commended on their approach to, and implementation of, contextualised professional development. (4.7)

There are no recommendations for this domain.

Suggestions

- The school should ensure that students gain experience handling live birds prior to undertaking EMS. (4.12)
- The school should periodically consider revisiting communications to students regarding the expectations of student behaviour and conduct to ensure student confidence in the process. (4.13)

Domain 5 – Supporting Educators

Recommendations

- The school must ensure that all educators have completed training relevant to their role. (5.1)
- The school must ensure that all educators within IMR practices engage with CPD relevant to teaching, and can demonstrate that they remain effective educators. (5.2).
- The school must ensure that the workload model is used to distribute work appropriately to maintain stability and morale, as well as providing educators and staff with an appropriate balance of teaching, administration and research. (5.5)

Domain 6 – Curriculum and Assessment

Commendations

- The school is commended for integrating a range of interprofessional education (IPE) interactions. (6.7)

- The school is commended for their support of students in identifying suitable placements and the quality assurance of placement providers. (6.9)

Recommendations

- The assessment strategy must be reviewed for validity to ensure all graduates are Day One Competent. (6.1)

- The school must ensure students obtain sufficient hands-on experience with live birds and small ruminants. (6.2)

- The assessment strategy must be reviewed for validity to ensure all graduates are Day One Competent. (6.14)

- The assessment strategy must be reviewed for validity to provide assurance of competence across clinical domains. (6.15)

Suggestions

- The school should introduce a quality assurance process for the summative assessment of the portfolio to demonstrate reliability. (6.14)

- The school should implement robust processes to review assessment content prior to delivery. (6.17)

- The school should encourage more students to pursue primary research projects. (6.22)

Domain 1 - The Learning Environment

Standard		Repository Evidence (Type = Input, Process or Outcomes)						Further evidence needed	Visitation Evidence (Type - Input, Process or Outcomes)			Recommended			Comments	Recommendations	Suggestions	Commendations
		Supporting evidence #	Typ	Supporting evidence # 2	Type	Supporting evidence #	Type		Supporting evidence # 1	Supporting evidence #	Supporting evidence # 3	Standard Met	Partially Met	Not Met				
1.1	The spaces, infrastructure, physical and digital resources across the programme must provide an effective and safe learning and teaching environment, support student welfare, and meet the needs of educators and support staff.	Infrastructure Overview	I	Various staff and student **training sessions** and user manuals	P	Various student feedback and survey results	O		Student meetings	Senior team meetings	Tour of facilities	X			Pre-clinical Keele students -reported easy to use learning resources across both campuses. VLE, iPad took time to get used to but work extremely well. SharePoint is very useful. IT team are very helpful if problems or replacements needed. (Harper students also reported challenges and delays). Livestreaming of lectures includes slides, audience, students to enable engagement - students report this works well (Keele students) - Harper students feel sometimes it is too quiet and 'it works when it works'. Consistency of student experience is consistent across campuses via policy - at a school level through SSVC. All teams have input to drafting policies, then through JAB. Have a key information page for students where all policies are available for students. Module level feedback processes ensure experiences across campuses is equivalent for students, and if issues become apparent they're addressed.			
1.2	The learning environments across the programme must ensure the health and safety of students, staff and animals and comply with all relevant jurisdictional legislation including health, safety, biosecurity and UK animal welfare and care standards.	Audit of partner practices	O	H&S policies, guidance for staff & students	P	Incident logs, inc. placement team reporting	O		Students meetings	Discussions on tours	CTF meeting, support & tech staff meetings			X	If things go wrong on a placement, the process is a 24hr helpline and is addressed quickly. This phone number is communicated on every email, and students are confident that they're supported. Students report nice messages from EMS staff on Teams. Students report DOPS help them feel confident before going on EMS. Example given that they can scrub in as they've learned that already , which means they can get the most from their EMS. CTFs - aware of animal use policy but did not have detailed knowledge. Reported that 'Dogs rotated round, and have to fill in hours'. Evidence seen of recording dog use, but no monitoring / oversight / audit. Separate farm biosecurity policy sent to students each year. Students required to follow this, and additional steps in place before they enter other buildings. Partner practice audits for QA - Staff noted they would prefer to do an in person audit each year, but currently insufficient resources so it can only be completed in person every 2 years. Students not allowed to wear own hard hats, they must use those provided to ensure safety. However, this is not being implemented across all IMR sites as evidenced on partner practice visits. Students observed not wearing PPE on university farm. Not all post mortem material from suppliers is assessed for zoonotic and biosecurity risks before arriving on campus Unsecured items were presenting a risk to student safety in an ambulatory vehicle. No policy or audit for animal use in teaching (all species). No adequate recording of farm animal use.	**The school must ensure health & safety, biosecurity and animal welfare policies are adhered to across all teaching sites and effective monitoring and oversight of such areas are in place.**		
1.3	All learning environments (within the school and off-site) must be quality assured to ensure appropriate standards of teaching, support and learning outcomes are achieved.	Partner QA status	O	Module evaluation reviews	O				Support & tech staff meeting	partner practice staff	GVAK meeting		X		QA of school facilities (farm) - red tractor assurances, monitored in summer and winter, monitored by Morrisons, AVP, by Home Office etc. In terms of suitability of spaces for teaching, the farm has been built for this with handling areas set up for safety. Any maintenance issue are raised e.g. crush stiff, and the dedicated maintenance team addresses it. Faults reported to estates team. No periodic inspection, - 'in constant use, so would be reported'. Same process for equipment at Harper teaching spaces. For animal material use coming in from external suppliers, they use their judgement on whether it is appropriate or not. Partner practice QA - process starts with self-audit then a visit, verification form completed and docs checked. Then every year, updated insurance required. Visit held every 2 years, would like to visit in person every year but do not currently have the resources. Would also consider student feedback. If any aspect non-compliant, escalated to directors of practice and action plan developed. GVAK - maintenance log - new system, each piece of equipment has its own tag and is updated through ticket system.	**The school must undertake in-person audits of the learning environment at all teaching sites with sufficient regularity.**		
1.4	The learning environments across all aspects of the programme must demonstrate good practice standards and promote high standards of animal husbandry and care at all times.	Partner inventory List	I	Animal use policies	P				Support & technical staff meeting	GVAK meeting			X		Evidence of recording of dog use, but no evidence of audit. No evidence of recording of farm animal use. No animal use policies (any species). Tracker used to record animal use, now handed over to one of the teaching fellows (for dogs). They don't currently record the farm animals used for each session, but have the potential to monitor. If an animal became aggressive, staff would record this and would not use the animal with the student group. On farm...would exit farm as a cull animal, have a strict exit policy. If student was kicked by cow, they would deal with it on an individual basis depending on reasons why. If aggressive sheep - would exit as a cull animal. Dogs - have initial teaching assessment before use. All handling of horses by students recorded on a daily basis - limit equine sessions to 2 hours at a time, and horses allocated according to session considering previous involvement, temperament. No committee looks at animal handling data. Garden Vets - PSS status reported as 'rescheduled to Oct/Nov 25' but PSS team at RCVS say no booking as awaiting payment since March 25. Partner practices Horizon and Willows not currently PSS accredited.	**The school must ensure that all commercial partner practices delivering IMR are PSS accredited.**		

Domain 1 - The Learning Environment

Standard		Repository Evidence (Type = Input, Process or Outcomes)						Further evidence needed	Visitation Evidence (Type - Input, Process or Outcomes)			Recommended			Comments	Recommendations	Suggestions	Commendations
		Supporting evidence #	Typ	Supporting evidence # 2	Type	Supporting evidence #	Type		Supporting evidence # 1	Supporting evidence #	Supporting evidence # 3	Standard Met	Partially Met	Not Met				
1.5	Normal and diseased animals of the principal domestic and non-traditional/exotic species must be available for instructional purposes, either as clinical patients or provided by the school. The school must provide access to sufficient numbers and range of animals and animal material to provide the necessary quantity and quality of animal husbandry and clinical instruction to meet the programme learning outcomes and achieve the RCVS Day One Competences.	Partner inventory List	I	Use of animals in curriculum log	O	IMR clinical experience logs	O		Pre-clin Keele student mtg, Harper students	Preceptors meeting	CTFs meeting, partner practice network staff mtg, GV mtg		X		Pre-clin students report groups of 8-20, but get turns and experience of herds not just individual animals. Cat handling more difficult, staff tried to balance animal welfare with opportunities. Some cat handling opportunities are offered at Stapely Grange. Small ruminants - sheep tipping training reported to be good. Preceptors report good range of species / clinical contexts experience; Garden vets for small animal, equine etc. Production animal (PA) they try to use the local partner network. Clinical experience log available - more small animal than others, but a range. Harper students report variety of dogs / caseload Harper students happy with pre-clinical small ruminant exposure. Farm happy for students to book with them directly if they want more experience. There is no live bird experience. Previously had poultry and birds but this is no longer the case. Good range of necropsies across species. CTFs report no cat handling in clinical skills, students have raised a concern about lack of practical classes in cat handling and that this is 'left to EMS'. Intention to increase hands-on farm experience - additional week on yr5 Garden Vets - have 6 surgeries a day and 16 consults per vet across 2 vets / consulting streams. Typical inpatients around 2, but increasing as they take on OOO from other vets. Day patients considered in-patients from students perspective, who care for them. Garden vets - agreement with school and have a clause to increase caseload - they had considered triggering this but have not needed to. About 200 new subscribers / month, so should be sufficient. Students receive some hands on clinical experience with live small ruminants. No hands on experience (handling and clinical experience) of live avian species.	**The school must ensure students obtain sufficient hands-on experience with live birds and small ruminants.**		
1.6	There must be sufficient up-to-date and well-maintained learning and teaching equipment to support the programme effectively, readily accessible by students.	Equipment inventory	I	Hardware audit (no dates)	O				Pre-clin Keele students	Harper students	Support, technical staff meeting	X			Pre-clin students report modern equipment, plenty to go around. Can't access out of clin skills time, but staff working on this. Harper students (3rd year) report good resources, staff happy for students to have more sessions. Supportive of left handed students. Access to skills lab better, not yet 'out of hours'. Tech staff - some equipment passed from site to site where sessions on different dates. Occasionally transfer kit, but enough for all students. Maintenance schedule in place with Garden Vets. Hardware audit - annual Harper students report some delays - tech staff say there is a stock available. Requests for new equipment goes through resource committee - meets every 4 weeks.			
1.7	The school must ensure students have access to a broad range of diagnostic and therapeutic facilities, of sufficient standard and in number to enable learning outcomes to be met and achievement of the RCVS Day One Competences.	Partner inventory list	I						Tours of facilities	Student meetings	Support services meeting	X			Facilities observed during tours. Staff and students reported a wide range of good facilities available for students.			
1.8	A supervised field service and/or ambulatory programme must be available as part of the programme, in which students are offered multiple opportunities to obtain clinical experience under field conditions.	Rotation practical exposure info	I			Student feedback	O		Staff meetings	Student meetings	Partner practice meeting		X		Insufficient time on ambulatory visits or range of species on farm. Equine better. Farm experience - not all practices are ensuring ambulatory experience for all students, as they're concerned about client acceptance. Ambulatory on farm rotation reported 'students mostly doing project work while here, relatively few cases / ambulatory to go out on'.	**The school must ensure all students attend farm ambulatory visits to experience a range of clinical cases.**		
1.9	Appropriate isolation facilities/provision must be available at all sites where clinical instruction is delivered, or be able to be supplied when needed, to meet the need for the isolation and containment of animals with communicable diseases. Students must receive instruction within this environment on how to provide for animal care in accordance with accepted best practice for prevention of spread of infectious agents.	Partner inventory list	I	Video tours of partner practices	O				Tours of facilities			X			Isolation procedures at GVAK would not provide effective biosecurity.		**The school should review the integrity of isolation procedures across IMR providers**.	
1.10	Clinical education in veterinary public health training must be complemented by direct exposure in commercially run, approved abattoirs.	Infrastructure info, photos	I	Hardware audit	O				Tour of facilities			X			Evidence observed during partner practice visits.			
1.11	Patient medical records within all sites used for clinical teaching must be comprehensive and maintained in an effective retrieval system to efficiently support the teaching, research, and service programmes of the school.	Education collaboration agreements	I	Partner inventory list	I				Clinical Keele students meeting	Tours of IMR		X			Clin students taught how to use patient record system. They're told that it is a similar system in 5th year. Students report everything is on the HKVS website, which shows whether it is a Harper or Keele policy. If not there, then 'home' campus. Students don't have free access to records on some farm placements, but they can request them.		**The school should consider improving access to farm records (individual and herd health) for students.**	
1.12	Students and educators must have timely access to literature and information resources relevant to the programme. An appropriately qualified individual must be available to support students and educators in the effective retrieval of information.	Textbook purchase receipts	O	Library report	O				Pre-clin Keele students meeting	Harper 3rd year students		X			Easy to access library resources across both campuses. Can book library space if need to use. Students report library staff are helpful. Systems set up through Keele, which sometimes leads to challenges for Harper students in early years. Some online journals can't be accessed e.g. equine journal, but these can be requested. Both campus libraries accessible 24/7 with card.			

Domain 1 - The Learning Environment

Standard		Repository Evidence						Further evidence needed	Visitation Evidence			Recommended			Comments	Recommendations	Suggestions	Commendations
		Type = Input, Process or Outcomes							*Type - Input, Process or Outcomes*			Standard Met	Partially Met	Not Met				
		Supporting evidence #	Typ	Supporting evidence # 2	Type	Supporting evidence #	Type		Supporting evidence # 1	Supporting evidence #	Supporting evidence # 3							
1.13	Students and educators must have timely access to non-animal resources relevant to the programme.	Photo's, guides	O,I						Student meetings	Tours of facilities	Demonstration of room available	X			Students report sufficient access to materials; not yet available 'out of hours' but staff are working on this. Students can request extra sessions if needed.		**The school is encouraged to continue their plans to allow open access to their clinical skills labs.**	**The school is commended for their innovative use of 3D printing and simulation facilities to support student learning.**
1.14	The school must establish post-graduate programmes such as internships, residencies, and advanced degrees (e.g., MSc, PhD), that enrich, complement, and strengthen the professional programme.	Strategic vision & delivery plan	I	Research bids under development	P				Curriculum presentation & meeting	Rotation leads meeting	Meeting with partner practices			X	PGT programmes; the systems are in place, want to use to strengthen relationships with partners and complement existing programmes. Areas of interest provided, redacted for confidentiality. Internships, residencies - not established yet but they're keen to progress. Want to offer preceptorship model nationally and internationally No HKVS PhD programmes in place yet. Internships, residencies not established and whilst school indicate they are keen to progress there are no firm plans and clinical partners indicated they have not been engaged on this topic.	**The school must continue at pace to develop proposals for a range of postgraduate programmes and provide a timeline for implementation.**		

Domain 2 - Organisation, Culture and Values

	Standard	Repository Evidence *Type = Input, Process or Outcomes* Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type	evidence needed on	Visitation Evidence *Type - Input, Process or Outcomes* Supporting evidence #	Supporting evidence # 2	Supporting evidence # 3	Recommended Outcome Standard Met	Partially Met	Not Met	Comments	Recommendations	Suggestions	Commendations
2.1	The school demonstrates effective strategic & operational planning, including evidence that goals are being achieved in a timely manner.	Strategic vision & delivery plan	I	Terms of ref for project groups	I	Project outcomes reports, project update reports	O		Senior team presentation			X			Strategic plan presented.			
2.2	The school must have a system in place to identify, actively monitor and address risks to any aspect of the vet programme.	Risk register	I	SMT agenda, (but no minutes)	I				Discussion with IMR partners	Senior team discussion	Partner practice staff meeting, GVAK mtg, rotation leads mtg	X			It was reported by a partner practice that if an issue with training arose, the back up plan would be to provide the materials or 'last resort' to get another team member in as other staff not currently enrolled on TIT. Not yet got contracts with all partner practices, however, they are planning to get this. Adequate staffing to manage accompanying students to visits. Not all partner practices have contracts - approx. half do. Of those that don't, some might not have students in place and there have been challenges with different legal teams having to approve things which takes time. Longest outstanding contract about a year. Students had to start rotations, so needed to proceed (following risk assessment). Governme have now changed payment rules so can use the fact that they can't pay practices until contract in place as a lever. Wi-Fi at GVAK has back up.			
2.3	The school can demonstrate a culture which is inclusive, actively seeking and responding to feedback from stakeholders, and involving them in decisions relating to programme development, delivery, and enhancement.	Ppt for placement provider	I						ST meeting report	Student meetings	Preceptors meeting, IMR partner discussions, CTF meeting	X			They school is trying to address poor response to student surveys through advocacy training, and other opportunities through committees. End of module assessments feed into mid-year reviews of modules which students now carry out as well as end of year. Students liked the mid module reviews as they could see changes made in real time. Feedback to students on actions taken as a result. Students reported they felt 'heard'. Preceptors report feeling safe to reach out to others if they need to escalate something or raise a concern with senior staff. Actions taken (example provided). IMR partners report being involved in some discussions on programme development, and opportunities to discuss feedback. CTFs are able to feedback, report ST are approachable.			
2.4	The school must actively promote and maintain a culture that does not discriminate and enhances diversity, consistent with applicable law. Diversity may include, but is not limited to, race, religion, ethnicity, age, gender, gender identity, sexual orientation, cultural and socioeconomic background, national origin, and disability. There must be reporting mechanisms in place for any individual to raise concerns about discrimination and harassment. Universities must be prepared to withdraw from teaching contracts with partner practices / organisations if they fail to respect the guidance for this standard.	Policies from each university	I	Placement incident logs, flowcharts, Diversity cohort plan	P	Incident action log	O		Student meetings	Tours of facilities	Staff meetings	X			Students say that incidents reported were supported and followed-up. Students report knowing the process for reporting and getting support when on placements. Example given of action taken following incident at one partner practice to students satisfaction. Prayer rooms available at both campuses. Support for students with disabilities.			**The school is commended for the strong commitment and positive culture with respect to diversity and inclusion.**
2.5	The school must demonstrate a positive learning culture that investigates, reflects, and learns from mistakes and adopts effective reporting mechanisms and sharing of best practice. Students and staff should feel safe in raising and reporting concerns, and these must be dealt with effectively.	Terms of ref for SSVC, prog committee	I	Staff & student feedback survey reports / actions taken	O				Keele clinical students	Preceptors meeting		X			Assessment strategy referencing EPAs completion promotes learning culture, i.e. by setting a minimum number of observations to be made in each EPA, with several rated as 'independent' performance, this prevents tick-box behaviour and students are seeking feedback regularly regardless of performance. Supported by outcomes data showing % of students with 'additional' EPAs. Preceptors report supporting students and coaching them to understand EPAs shouldn't be seen as an exam and implemented as a tick box, to ensure they seek feedback at an early opportunity. Promotes students confidence at attempting tasks that they may not be guarenteed to succeed at first time.			**The school is commended for cultivating a growth mindset in their students through the implementation of EPAs, support from CTFs and coaching from preceptors.**

Domain 2 - Organisation, Culture and Values

Standard		Repository Evidence *Type = Input, Process or Outcomes* Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type	evidence needed on	Visitation Evidence *Type - Input, Process or Outcomes* Supporting evidence #	Supporting evidence # 2	Supporting evidence # 3	Recommended Outcome Standard Met	Partially Met	Not Met	Comments	Recommendations	Suggestions	Commendations
2.6	The school must demonstrate a commitment to environmental sustainability, including consideration of the impact of delivering the programme on the environment.	Policies for HAU & KU	I	IMR sustainability measures	P	Awards (2022)	O		ST meeting report	Keele clin students	GVAK meeting	X			Part of strategic themes; livestock & stock sustainability focus at Harper, energy at Keele. Areas complement each other. Keele generates 50% of their own energy. Planning to trial hydrogen vehicles in vet school. Students aware of sustainability policies, Keele 'shout it loud', but less so at Harper (but still there). Consult recording (energy footprint) GVAK does not support their sustainability policy School / students organise conference on herd sustainability which students across all vet schools attend.			

Domain 3 - Educational Governance and Quality Improvement

	Standard	Repository Evidence *Type = Input, Process or Outcomes*						evidence needed on	Visitation Evidence *Type - Input, Process or Outcomes*			Recommended Outcome			Comments	Recommendations	Suggestions	Commendations
		Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard Met	Partially Met	Not Met				
3.1	The school must be part of an accredited institution of Higher Education and be recognised and autonomous within that institution with accountability for the quality of the veterinary programme (including the RCVS standards being met).	OfS register information		Collaboration agreement between HAU and KU					HoS presentation	ST meeting		X						
3.2	The school demonstrates a commitment to continuous quality improvement across all accreditation standards and aspects of the programme, informed where possible by measurable outcomes and stakeholder engagement.	QA presentation Feb 25	I	Various committee minutes, action plans	O				Student meetings	Senior staff meeting		X			QA processes sits more with Keele. Students report actions being taken by the school following their feedback. QI - they have an independent governance structure. Anything re resources goes via JMB, anything relating to standards goes through JAB. APR going to JAB not the end of the process, it generates an action plan.			
3.3	The head of school or dean must be an MRCVS. They must have appropriate knowledge and expertise of the veterinary profession, academic affairs and leadership, and have control over the budget for the veterinary programme.	Find a vet info	O	CVs	O				Senior team meeting			X			HoS reports having autonomy over budget.			
3.4	Finances must be reviewed regularly in line with strategic plans and be sufficient to sustain and enhance all aspects of the veterinary programme(s) for the duration of all current cohorts, including teaching and learning, infrastructure, teaching resources and students / staff support.	Finances presentation	I	Financial forecast	P				Senior team presentation			X			Wider HE financial challenges noted; HoS reported vet school budge is 'protected' from the recently announced budget cuts by Keele. £1.5M confirmed over next 5 years (for research). Budgets reviewed quarterly. Vet school budget 'ringfenced'.			
3.5	The managerial, academic and support staff must have the necessary skills and experience for their role and be sufficient in number to support the effective design, delivery and quality assurance of all aspects of the programme.	Staff CVs		Organogram					Pre-clin Keele students, 3rd yr Harper students	Staff meetings	CTF meeting		X		If staff are absent, pre-clin Keele students say tutorials may be combined, or rearrangements made to timetable. 4 tutorial groups b 5 CTFs in building, so cover is available. Vacancies noted and staff recruitment is difficult. There are significant challenges around Keele processes and the lengthy time it takes. If staff are absent from lectures, students report still getting content, but possibly from the previous year's lecture recording. Module leads' and early academics' workload is reported to be very high. Administrative burden reported as being high.	**The school must ensure there are sufficient staff to support the effective and sustainable delivery of all aspects of the programme**		
3.6	The school must demonstrate that the recruitment, selection and appointment of students, educators and staff are open, fair transparent and free from bias.	Admissions policy		Recruitment code of practice		Selection event feedback			Early career staff meeting	Admissions meeting		X			Staff training for recruitment occurs each year as it focuses on the scenarios for that year. Training includes: Keele unconscious bias, student recruitment etc. Online briefing as well. Feedback generally positive on the process			

Domain 3 - Educational Governance and Quality Improvement

	Standard	Repository Evidence *Type = Input, Process or Outcomes* Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type	evidence needed on	Visitation Evidence *Type - Input, Process or Outcomes* Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Recommended Outcome Standard Met	Partially Met	Not Met	Comments	Recommendations	Suggestions	Commendations
3.7	The school must have effective and transparent educational governance systems, with formal committee structures, which develop and continually monitor, assure, and enhance the quality of veterinary education and the student experience across all aspects of the programme.	Committee info	I	Committee action logs, agendas, minutes	O				Pre-clin Keele students meeting	Clinical students meeting	Senior staff meeting	X			Pre-clin students will report issues to their student rep and engagement is understood, they like the anonymous aspect. 'Animal Aspirations group' - a diversity group, creates an opportunity to feed into things. EDI committee rep in place. Everyone is engaged. SSVC - slow start but now students report being more engaged. Committees have student reps on them. H&S committee across both institutions - no school H&S committee. Have H&S group at HA, number of groups feed into this, and one ha a Keele rep (not all have a vet school rep). Some lack of consistency across campuses. Same with student conduct processes. (different sanctions across each).		**The school should consider convening a school health and safety committee with student representation.** **The school should ensure parity of disciplinary processes across institutions**	
3.8	The school must have robust mechanisms for quality assurance and improvement, embedded into policy and processes, which routinely gather data to demonstrate that organisational and educational objectives are being met and opportunities for improvement are identified and responded to.	Module modification proposals		Minutes, action logs etc. from committees					Rotation leads meeting	Staff responsible for partner practices meeting		X						
3.9	Mechanisms for quality assurance and improvement must encompass both internal and external review and data collection and analysis.	External examiner reports, school responses		Student feedback					Senior team meeting	Students meetings	Staff meetings	X			External input from External Examiner reports Internal QA from actions on student feedback, triangulated through student reports.			
3.10	The school must evaluate students' performance, progression and outcomes with respect to information on equality and diversity and provide support for groups where disparities are identified.	HKVS annual programme review		Combined action plan					EDI leads meeting	ST meeting	Meetings with students	X			The school appears to be monitoring performance and progression of students with regards to EDI. They have outreach support/schemes and state plans/actions to help close attainment gaps.			
3.11	The school must regularly review curricula, using available quality assurance data and feedback from students, educators and stakeholders, to ensure standards are being met and maintained.	External examiner reports, school responses		Module modification proposals		Plans for full review in 2027			Curriculum presentation in meeting	Student meetings	Partner practice meetings	X			Full curriculum review planned for 2027. Module updates and actions shown. Students report actions taken when module feedback provided.			
3.12	The school must have effective processes in place to monitor attrition and progression rates in relation to admissions and selection criteria and student support if required.	Vet Med cohort data	P	Attrition data (anon)	O				Admission meeting	Preclinical student meetings	ST meetings	X			Attrition monitored.			
3.13	The school must have effective processes in place to ensure that a continual commitment to student learning and teaching is demonstrated within all locations where clinical teaching takes place.	Agreement templates	I	QA data from partners (mix of self assessment & site visit)	O	Student rotation feedback	O		ST meeting, HoS response	Partner practice meetings	TtT meetings			X	Contracts not yet in place for all placement providers where HKVS staff do not deliver all the teaching to the students. Evidence triangulated with partner practices.	**The school must ensure contracts are in place with all partner practices involved in the provision of education**		

Domain 3 - Educational Governance and Quality Improvement

Standard		Repository Evidence *Type = Input, Process or Outcomes*						evidence needed on	Visitation Evidence *Type - Input, Process or Outcomes*			Recommended Outcome			Comments	Recommendations	Suggestions	Commendations
		Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard Met	Partially Met	Not Met				
3.14	The school must demonstrate that only students who are fully Day One Competent are able to graduate.	Various attendance and engagement policies and processes e.g. Academic Engagement Policy (and trackers)	I	BVetMS Curriculum mapping and Programme Assessment Strategy	P	BVetMS Module Outcomes & Progression Data	O		ST meetings	Student meetings	Staff meetings		X		The assessment strategy does not currently include sufficient mandatory EPAs across all clinical domains / areas of clinical practice to assure that graduates are day one competence in all species domains. Work being undertaken to address this (at time of visit). Attendance monitoring data is currently unable to identify if a student is not attending particular areas of the programme. Reports form staff and students indicate that the attendance app can be unreliable.	**The school must improve the granularity of attendance monitoring to ensure gaps in learning do not occur.** **The assessment strategy must be reviewed for validity to ensure all graduates are Day One Competent**		

Domain 4 - Supporting Students

Standard		Repository Evidence *Type = Input, Process or Outcomes*						Further evidence needed	Visitation Evidence *Type - Input, Process or Outcomes*			Recommended Outcome			Comments	Recommendations	Suggestions	Commendations
		Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard Met	Partially Met	Not Met				
4.1	Effective processes must be in place to support the physical, emotional and welfare needs of students.	Policies, strategic theme plan		Student support training, Student management group ToR					Student meetings	Staff meeting with preceptors	CTFs meeting, Student support services meetings	X			Students report support services are very responsive. Students were very positive about CTFs and would approach them in the first instance with any issues. Students reported reasonable adjustments requests were dealt with efficiently. CTFs monitor exceptional circumstances and will speak to the student if requests look unusually high - requests come through their email but more of an academic mentor role to discuss. CTFs would use the HAK wellbeing policy for students, but have a crib sheet to understand which policies (Harper / Keele / HKVS) to use. CTFs - Reasonable adjustments for students get sent to them and also to academic leads, occupational health etc - Monitored through Student Management Group. CTFs triage the referral forms. Student Support Service - TtT includes an element of reasonable adjustments training.			**The school is commended for the innovative and holistic support provided by staff, particularly the preceptors, CTFs and disability inclusion tutors.**
4.2	The school must have a strategy for widening participation which considers all aspects of diversity and engages students from different ethnic and social backgrounds. The school must be proactive in their marketing to attract a diverse cohort of applicants and regularly review, and provide evidence of, their progress towards targets.	Admissions policy, HAK vets diversity paper		Future vets programme details					Senior team presentation & meetings	Student meetings	Showcase of 'Future Vets' WP	X			Proactive widening participation approach. Student support strategy working well. Showcase of 'Future vets' WP programme. Award nominated. Criteria include postcode, ethnicity, disability, free school meals, first in family to University. Evaluation of the programme shows successful, excellent feedback from participants. Want to expand to include male participants to attract more male vets. Future options to franchise programme to other schools. May explore sponsorship, and expand target criteria (with Higher Horizons) to refugees with settled status, and travellers.			**The school is commended for championing inclusion and widening participation through a range of processes.**
4.3	The school must provide accurate and current information regarding the educational programme easily available for prospective students. The information must include the accreditation status of the degree course (whether by RCVS or other relevant accrediting bodies), selection and progression criteria, the demands of the course and the requirements for eventual registration/licence, including fitness to practise.	Website review		Admissions policy, interviewer training					Student meetings			X			Offer holder days at both campuses, free transport. Good introduction to vet school reported by students at Keele. Useful information for students on website, inc. EMS and costs info - easy to find. Website info is current and comprehensive.			
4.4	Selection and progression criteria must be clearly defined, defensible, consistent and free from discrimination or bias. The criteria must also include relevant factors other than academic performance. The academic requirements for entering the programme must be sufficient for the student to cope with the demands of the programme upon entry.	Admissions policy, website, unconscious bias guide	I	Selection event participant feedback	O				Academic staff meetings	Student meetings	Early career staff meeting	X			Staff report training each year (links to specific scenarios, so updated) Keele unconscious bias, student recruitment etc. training. Online briefing as well.			
4.5	The school must demonstrate their selection and progression criteria and processes are effective in identifying students with the potential to achieve the RCVS Day One Competences. This must be achieved through regular and effective training for staff involved and the routine collection and analysis of selection and progression data, to enable them to evaluate, reflect and adjust the selection and progression criteria where necessary.	Training for interviewers		Student feedback					Student meetings	Early career staff meeting		X			Staff report training each year (links to specific scenarios, so is updated yearly. Training includes unconscious bias, student recruitment etc. Online briefing as well.			
4.6	There must be clear policies and procedures as to how applicants with disabilities or illness will be considered and, if appropriate, accommodated on the programme, taking into account the requirement that all students must be capable of meeting the RCVS Day One Competences by the time they graduate.	Admissions policy	I	Occupational Health procedures, Reasonable Adjustments policy	I/P	List of identified RA made	O		Student meetings at Keele and Harper sites	Staff meetings, inc. EMS staff, preceptors etc.	Student support meeting	X			Students report reasonable adjustment support easy to access and useful, reviews dependent upon need. EMS staff note that they monitor EMS weeks carried out where reasonable adjustments are in place to allow shorter hours / weeks due to the need for the adjustments. Students encouraged to speak to placement providers when they have reasonable adjustments. Students reported this is easier with IMR than EMS. Have their own dedicated support officer. Exceptional circumstances - students allowed 3 extensions per semester, automatically approved. Can also be offered another assessment opportunity. If more than 2 additional opportunities requested, they are offered support. Operations team (central) feed this back to module leads.			

Domain 4 - Supporting Students

Standard		Repository Evidence *Type = Input, Process or Outcomes*						Further evidence needed	Visitation Evidence *Type - Input, Process or Outcomes*			Recommended Outcome			Comments	Recommendations	Suggestions	Commendations
		Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard Met	Partially Met	Not Met				
4.7	Students must be actively supported to develop resilience, self-reflection and professional values in line with the RCVS Code of Professional Conduct and must not be subject to behaviour which undermines their professional confidence, performance or self-esteem at any sites where teaching and / or learning takes place.	Staff training on student support roles	I/P						Meeting with preceptors	Student meetings across campuses	Staff meetings, inc. EMS staff	X			Preceptors support students in the clinical phase - strong team, workload high at times, role includes coaching, academic mentoring and signpost mental health support if needed. Students (3rd year) report CTFs also provide valuable support. EMS staff report process for following up issues encountered on placements, with support for students and contacting providers where there are persistent problems. Strategic theme on wellbeing and professional performance is innovative and successful.			**The school is commended on their approach to, and implementation of, contextualised professional development.**
4.8	Students must receive continuous and effective educational support to enable them to achieve the learning outcomes of the programme and the RCVS Day One Competences, including the provision of regular, constructive and meaningful feedback on their performance and progress in a timely manner.	Mentor, tutor guidance	I	Description of feedback points for students on programme	P	Module evaluations from students	O		Student meetings	Staff meetings	ST meetings	X			Multiple opportunities throughout the programme for students to receive timely feedback on their performance and progress. Feedback provided on completed EMS placements. Formative and summative feedback opportunities given.			
4.9	Effective processes must be in place by which students can convey their needs and wants to the school. The school must demonstrate how student feedback is considered and acted upon.	Terms of Ref for SSVC	I	Information on how students can feed back throughout programme	P	SSVC minutes	O		Student meetings at Keele and Harper sites	Staff meetings		X			QR codes are located around campus to feed back. Students also report would talk to a preceptor, then they would escalate if needed. Students confirmed actions resulting from student feedback are fed back to the whole year cohort, without the individual being mentioned. Anonymous feedback remains anonymous. Students felt heard. Student surveys - end of term, and module feedback. Opportunities to feedback on committees, also via Teams. Harper students admit survey engagement variable, but they would probabl go directly to the module leader directly if there's a problem. School now does module feedback half way through year (following their suggestion) so they can see the benefits.			
4.10	The school must provide students with a mechanism, anonymously if they wish, to offer suggestions, comments, and complaints regarding the compliance of the school with the RCVS standards for accreditation and that Day One Competences are being met. All such feedback from students must be reported to the RCVS as part of the annual report.	Posters, QR codes	I	Module evaluation forms	P	Feedback summary / themes reports	O		Students meeting	CTF/Preceptor meetings		X			Widespread QR codes to be able to feed back. Can feed back anonymously, although difficult for school to do something if anonymous. Module feedback is easy to give. Staff presentations to students on RCVS standards. Students feel their voice is heard and actions are taken.			
4.11	The basis for decisions on progression (including academic progression and professional fitness to practise) must be explicit and readily available to the students. The school must provide evidence that it has effective processes in place to identify and provide remediation and appropriate support (including termination) for students who are not performing adequately in any area of the programme.	Assessment regs, FtP policy	I	Exam board minutes	O	Example of student audit trail info	O		Curriculum meeting report	Student meetings	Preceptors meeting, partner practice meeting, CTF meetings	X			Attendance monitored for every session and fed back, academic mentor & student support notified if attendance falling. Students confirmed this, and works well although easy to forget - processes in place it they do. Some reported that the attendance app could be unreliable, and staff reported that the app was not able to drill down to granular session detail. So it was possible for attendance patterns / gaps to go unnoticed. Have a compulsory 'pre-arrival' module to highlight student support. Induction was useful, inc. wellbeing info. If students miss placements, they are supported to make up the time. Preceptors aware. Some IMR practices not actively monitoring attendance, however, they can contact school if someone appears to be missing. CTFs do spot checks for attendance. Poor attendance could flag up other concerns generally.			
4.12	The school must ensure that students are competent and sufficiently experienced in animal handling before they begin clinical placements and / or workplace learning, and that they are fully briefed regarding all relevant Health and Safety matters.	AHEMS / EMS handbooks	I	Student H&S, professional, EDI training		AH DOPs tracker			Student meetings	Staff meetings	Partner practice and EMS meetings	X			DOPs on animal handling occur before EMS. Clinical students feel prepared for their EMS.		**The school should ensure that students gain experience handling live birds prior to undertaking EMS**	
4.13	Mechanisms for dealing with student misconduct and/or the exclusion of students from the programme, either for academic reasons, misconduct or under fitness to practise procedures, must be explicit.	Student policies	I						Student meetings	Staff meetings		X			Concerns raised in some of the confidential sessions that poor behaviour from a minority of students doesn't appear to have consequences, and linked to FtP, professionalism and student safety.		**The school should consider revisiting communications to students regarding the expectations of student behaviour and conduct periodically to ensure student confidence in the process.**	
4.14	The school must have in place effective processes for the resolution of student grievances.	Student complaints procedure	I	Complaints tracker (high level)	O				Student meetings	CTF/Preceptor meetings		X						

Domain 4 - Supporting Students

Standard		Repository Evidence *Type = Input, Process or Outcomes*						Further evidence needed	Visitation Evidence *Type - Input, Process or Outcomes*			Recommended Outcome			Comments	Recommendations	Suggestions	Commendations
		Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard Met	Partially Met	Not Met				
4.15	School policies for managing appeals against decisions, including admissions, academic and progression decisions, must be transparent and publicly available.	Academic appeals procedure		Academic appeals tracker	O	Admissions tracker			ST meetings	Student meetings		X						

Domain 5 - Supporting Educators

	Standard	Repository Evidence *Type = Input, Process or Outcomes*						Further evidence needed	Visitation Evidence *Type - Input, Process or Outcomes*			Recommended Outcome			Comments	Recommendations	Suggestions	Commendations
		Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard Met	Partially Met	Not Met				
5.1	The school must ensure that all educators who are involved with student teaching have successfully completed, or are working towards, a quality assured programme of teacher training, which effectively prepares educators for their roles.	Training info provided	I	TtT feedback	O				Discussions with IMR partners	CTF meeting	Partner practice network staff, GVAK mtg			X	It was reported that one IMR partner delivering a small amount of core teaching had received no training for the past year, but had now enrolled on the TtT course. Another noted that only anyone involved heavily in training students will do the TtT, not other staff with less contact with students CTFs - recognised that the administration time commitment was 'huge', but they had opportunities for training if and when they had time, there had been discussions about joining preceptors training as well. CTFs - There is a CPD budget available, staff were encouraged to join VetEd and can do PGCert. All partners assessing EPAs need to do TtT course - 2 day in-person course, including educational theory & support / wellbeing team, including assessment strategy. Try to have contact with wider team as well. Specific TtT for farm & equine before 5th year rotations started. In future there will be 3 training sessions each year. TtT is evaluated through participant feedback. When asked how they ensured everyone involved in clinical teaching in partner practices was trained, the panel heard from the school that that was not the expectation - they only require those involved in student progression / assessment (i.e. EPAs) to complete training. They ensure all those involved in EPAs are trained, by cross-checking lists. The school reported not wanting to mandate that others involved in student teaching to need to complete training as it could be a barrier to the partnership. This is because mandating the training would hinder the relationship with vets in practice. The training programme has, however, been recently made available to any staff in clinical partner practices who wish to attend. In one partner practice, staff do TtT after few months settling in, and the whole team have been trained. Preceptors were observed delivering clinical curriculum content, which is outwith their role. Training for staff in partner practices is currently optional unless they are an academic anchor or assessing EPAs, whereas the standard requires all those involved in teaching students to be trained.	**The school must ensure that all educators have completed training relevant to their role.**		
5.2	All educators involved in teaching and / or supporting students' learning within the programme must demonstrate their continued competence and effectiveness.	Peer observation process	P	Record of staff completed training					ST meeting report	Student meetings	Early career staff mtg, senior teaching staff, GVAK mtg		X		There is no mechanism to check staff are CPD compliant, but a process is in place for staff to request time and resource for CPD. Budget for this is ringfenced. Students report CTFs really useful and gave extremely positive feedback about them. Early career staff use the Teams channel for more informal peer feedback, but they are starting to use a new formal peer teaching approach. It was reported that this happens once or twice a year. Staff reported low recruitment / vacancies unfilled that can negatively impact time available for CPD. Reports that 'currently no time for staff to do research', some report several papers they want to publish but don't have the time, inc. pedagogical research. Some partner practices noted their own CPD programmes,not formally linked to HKVS. None of the commercial partner practices reported ongoing processes to ensure educators demonstrated their continued competence and effectiveness after completing the TtT course e.g. peer observation of teaching, refresher training etc.	**The school must ensure educators within IMR practices engage with CPD relevant to teaching and can demonstrate that they remain effective educators.**		
5.3	An appraisal system for all staff must be in place. The school must provide evidence that it has a comprehensive, effective and publicised programme for the professional development of staff. Promotion criteria must be appropriate, clear and explicit.	Staff performance Review and Enhancement (SPRE) scheme for academic staff.	I	Record of staff who have completed peer reviews (partial record)	P	Student module feedback	O		Senior teaching staff	Senior team	Presentation on staffing	X			The school has brought in a talent management framework linked to appraisal and peer review of career development plans. Staff reported that they are involved in the appraisal process even as new starters.			
5.4	The school must support educators by dealing effectively with concerns of difficulties they face as part of their educational responsibilities. Effective processes must be in place to support the physical, emotional and welfare needs of staff.	Staff policies are separated into HAU and Keele policies and some joint HKVS joint policies	I	Staff survey details	P				Early career & senior teaching staff meetings	IMR practice discussions		X			Senior staff note a busy workload, but acknowledge that this has been part of a new school developing content from scratch. Difficulties in staff recruitment also impact this. Starting to look at workforce sustainability, including focus on staff wellbeing. IMR practices noted they would raise any concerns directly with the school liaison staff. Practices can have formal catch up meetings once a quarter for strategic issues around student feedback or issues from CTFs.			

Domain 5 - Supporting Educators

Standard		Repository Evidence *Type = Input, Process or Outcomes*						Further evidence needed	Visitation Evidence *Type - Input, Process or Outcomes*			Recommended Outcome			Comments	Recommendations	Suggestions	Commendations
		Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard Met	Partially Met	Not Met				
5.5	Academic positions must offer the security and benefits necessary to maintain stability, morale, continuity, and competence of the educators. Educators and staff must have a balanced workload of teaching research and service depending on their role; and must have reasonable opportunity and resources for participation in scholarly activities.	Staff policies are separated into HAU and Keele policies and some joint HKVS joint policies	I	Workload allocation model	P	Feedback survey results	O		Early career staff meeting, senior staff mtg, CTF meeting	Preceptors meeting	IMR partner discussions			X	There are quarterly research days for staff, that include research leadership teams from the institutions, to review and support research activities in line with the School's strategic aims. Staff reported the process for recruitment (Keele) was insufficient, excessively slow and impacts on them and their workload. Also feel they aren't recruiting enough. Time for onboarding was also thought to be excessive and time consuming. Research has not been prioritised for staff, and little opportunity currently althoug plans to change, inc. pedagogical research Preceptors - strong teamwork, teaching & research opportunities if wanted. Workloads vary and there are busy periods. May be 'upcoming vacancies' that could impact further. Engagement with scholarly activity for partner practice can consist of attending an open day and being involved that way, or some practice-based research 'on occasion', some practices have chosen not to be involved in student research projects at the current time. CTFs - some opportunity to join research project (1 had published paper), and findings incorporated into teaching. No time for this in term time though. CTFs - workload - pulled into a lot of different areas, and support needed to be provided by them in other areas inc. assessment, invigilation, attendance, admin etc. as well as professional tutor role. Now they have set aside paid admin time but had to push for this. Delays in staff recruitment impacts on them as it is a slow process. CTF turnover is relatively high, as the role is seen as 'entry level' fo those in practice, and tend to move on into more senior roles. No opportunities for progression - a ceiling in this role. CTFs - there has been an impact of additional student support (e.g. for reasonab adjustments and widening participation etc) on their workload. These students ar not seen as an additional burden and they are happy to provide the additional, however, this is absorbed into their existing workload. CTFs - have also absorbed the new requirements for the EMS policy about approval of student learning outcomes.	**The school must ensure that the workload model is used to distribute work appropriately to maintain stability and morale, as well as providing educators and staff with an appropriate balance of teaching, administration and research.**		
5.6	The school must provide staff with a mechanism, anonymously if they wish, to offer suggestions, comments, and complaints regarding compliance of the school with the RCVS standards for accreditation and that Day One Competences are being met. All such feedback from staff must be reported to the RCVS as part of the annual report.	Staff surveys	O						Early career staff meeting, senior staff meeting	QR codes displayed		X			Early career staff stated senior staff are very approachable. They reported that pulse surveys, and phase leads are helpful. Senior staff noted they can feedback via the QR codes. There are anonymous opportunities to feedback.			

Domain 6 - Curriculum and Assessment

	Standard	Repository Evidence (Type = Input, Process or Outcomes)						Further evidence needed on	Visitation Evidence (Type - Input, Process or Outcomes)			Recommended Outcome			Comments	Recommendations	Suggestions	Commendations
		Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard Met	Partially Met	Not Met				
6.1	Veterinary programmes must be designed and delivered to ensure that students, upon graduation, have achieved the programme learning outcomes (targeted at FHEQ level 7 or equivalent) and the RCVS Day One Competences.	Programme specification	I	BVetMS Final Year Assessment Strategy	P				Assessment presentation	Meetings with senior team			X		Please see 6.15 for commentary related to this standard.	**The assessment strategy must be reviewed for validity to ensure all graduates are Day One Competent**		
6.2	The curriculum shall extend over a period equivalent to a minimum of five academic years and must include a sufficient quantity and quality of hands-on clinical education to ensure students are prepared to meet the requirements of the veterinary role upon graduation.	Programme specification and curriculum overview	I	EPA tracker	O	Clinical experience logs	O		Meetings with staff	Meetings with students	Tours of clinical facilities		X		Assurances on cattle, equine and small animal. Absence of hands on clinical education with live sheep, avian.	**The school must ensure students obtain sufficient hands-on experience with live birds and small ruminants**		
6.3	Veterinary programmes must be underpinned by pedagogical theory or based on best educational practice, involving input from educators, students, employers and other relevant stakeholders, and subject to regular evaluation and review.	Clinical Partner Rotation Feedback Form	I	Stakeholder input into the curriculum	P				Discussions with IMR partners	Meetings with staff	Meetings with senior team	X			EJ - no formal contract currently, an 'informal' arrangement, but will be moving to a formal agreement soon.			
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.	Strategic Vision HKVS 2023-2030 – Theme 3 "Excellence in primary care research and practice"	I	HKVS Clinical Phase Overview	P				Meetings with staff			X			Strong general practice caseload in partner practices.			
6.5	The curriculum must describe appropriate learning outcomes which represent and effectively align the required knowledge, skills, and behaviours of a veterinary surgeon with teaching, learning and assessment activities within a cohesive framework.	BVetMS Programme Specification 2024-25	I	BVetMS Final Year Assessment strategy	P				Meetings with senior team			X						
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).	Garden Vets and blank ECA schedule extracts	I	EPA tracker	P	Rotation student feedback	O		Meetings with clinical students	Partner practice meetings	Rotation leads meeting	X			Students choose whether to observe first and then able to be more hands on at GV. Good opportunities reported from students. Surgical block - students report some 'hands on' cases and tend to be assigned 2 x Op cases, given chance to intubate, IV, induce, got to scrub in. Had a lecture on costings & business. GVAK - vets try to get students involved as much as possible, but depends on clients. % is 'hard to say' but if the students aren't hands on they're involved in discussion.			
6.7	The programme must give students the opportunity to learn and practise alongside other members of the veterinary team in an holistic manner that reflects the reality of veterinary practice in society.	HKVS Clinical Phase Overview	I	BVetMS Interprofessional Education	P	Student feedback on rotations	O		Partner practice meeting			X			GVAK rotation work alongside nurses. Students also have opportunities to work alongside veterinary physiotherapists and physio students, and have some practicals with the vet nursing students, as well as opportunities to work with EDTs and farriers			**The school is commended for integrating a range of interprofessional education (IPE) interactions**
6.8	Students must be supported to gain experience which consolidates their learning throughout the programme through the completion of Extra Mural Studies (EMS). This must be delivered in line with RCVS EMS Policy.	HKVS 2024-25 term dates_EMS weeks	I	EMS Update spreadsheet	P	Placements incidents and Actions log.	O		EMS staff meeting	Meetings with students		X			See above			
6.9	There must be an appropriate structure and resources in place to ensure the oversight, coordination and quality assurance of EMS. There must also be sufficient administrative support in place to assist the students	EMS 1st Yr Intro Sept 24 PowerPoint	I	EMS Placements process map	P	Examples of incident follow-up from placement team	O		EMS staff meeting	Student meetings		X			See above			**The school is commended for their support of students in identifying suitable placements and the quality assurance of placement providers.**
6.10	The school must have processes in place to ensure that students are supported in the identification of relevant learning outcomes for their EMS placements, and record and reflect on their achievement.	HKVS tutoring and student support overview and role descriptors	I	Example of EMS reflections and feedback	O	Examples of student EMS ILO	O		EMS meeting	Student meetings		X			See above			

Domain 6 - Curriculum and Assessment

Standard		Repository Evidence (Type = Input, Process or Outcomes)						Further evidence needed on	Visitation Evidence (Type - Input, Process or Outcomes)			Recommended Outcome			Comments	Recommendations	Suggestions	Commendations
		Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard Met	Partially Met	Not Met				
6.11	The EMS experience must be individual to the student, and they must be able to tailor their experience based on their own learning needs.	2024 EMS guidance handbook	I	Veterinary Professional Preceptor descriptor	P				EMS meeting	Student meetings		X			4th year cohort reported certain mandatory requirements, but new cohorts not subject to restrictions. Students report reflection on EMS useful.			
6.12	There must be a system in place which allows for feedback from EMS providers of students' performance during EMS placements to be communicated with relevant academic staff.	EMS placements process map	I	Various processes provided – documents route from feedback to resolution	P	Example of placement data and feedback	O		EMS meeting	Student meetings		X			Get to see feedback from EMS placements quickly. Can discuss with tutor.			
6.13	The school must demonstrate that EMS placements consolidate skills which have previously been taught during the programme.	CDA4 Student Guidance 2024-25	I	Clinical phase overview	P	EMS ILO & Reflection example	O		EMS meeting			X						
6.14	The school must develop and implement a comprehensive and robust assessment strategy, at the programme and modular/unit level, which provides evidence that students meet the requirements for progression across the programme and the Day One Competences upon completion.	BVetMS Programme Assessment Strategy	I	Examples of reviews of portfolio progress and engagement	P	BVetMS Module Outcomes & Progression data	O		Assessment presentation	Meeting with senior team			X		The summative assessment (sign-off) of the portfolio is undertaken by one individual.	**The assessment strategy must be reviewed for validity to ensure all graduates are Day One Competent**	**The school should introduce a quality assurance process for the summative assessment of the portfolio to demonstrate reliability**	
6.15	The validity, reliability and educational impact of assessments must be appropriate to their purpose (high/low stakes) and evidenced through relevant evaluation data.	BVetMS Programme Assessment Strategy	I	2023-24 HKVS Module Reviews_Executive Summary	P	Exam reliability analysis 2023-24	O		Senior team meetings	Preceptors meeting	IMR practice discussions		X		Preceptors - support students in not seeing EPAs as a tick-box approach. IMR perspective on EPAs - farm placement provider stated that when final version of EPAs weraspublished, they asked for guidance from school, then 4 EPAs relevant and opportunities available there. Most students completed 3 or 4. (wasn't compulsory). provider appeared to see EPAs as getting in the way of 'real' learning. Often EPAs were retrospective rather than active observation for that purpose, but only if have observed anyway. The assessment strategy does not currently include sufficient mandatory EPAs across all clinical domains / areas of clinical practice. Content validity currently insufficient for farm / equine. Work being undertaken to address this (at time of visit).	**The assessment strategy must be reviewed for validity to provide assurance of competence across the clinical domains**		
6.16	The assessment tasks and grading criteria for each unit of study in the programme must be clearly identified, and available to students in a timely manner well in advance of their assessment. Requirements to pass including the effect of barrier assessments must be explicit.	Assessment regulations 2024-25	I	VET-20003 Critical essay - assignment launch	P	HKVS 2022-23 Assessment Regulations_JAB August 2022	P		Student meetings	Senior staff meeting		X			Clin students report ing beaware of regs. Senior staff report communicating with students via the Teams channel for most. For the final year portfolio requirements, comms with students are via workshops, supplemented with written guidance. Every module has its own handbook, inc. assessment regs.			
6.17	Assessments must be designed and carried out by individuals with appropriate expertise in the area being assessed, who have been trained in their role as an assessor and understand what is required to make the process robust, including honesty, fairness, consistency, and judgements free from bias.	HKVS Academic Guide to Writing Exam Questions	I	Various Workshop slides – Workshops delivered to staff writing exam questions	P	Various completed standardisation forms	O		Assessment presentation	Senior team meetings	Staff meetings and TtT meeting	X			Reports from a number of students regarding errors within exam questions, images and set-up.		**The school should implement robust processes to review assessment content and quality prior to delivery**	
6.18	Assessment load must be sufficient to provide both formative and summative feedback to support students' progress, and to evidence achievement, remaining cognisant of workloads for staff and students.	BVetMS Programme Assessment Strategy & examples of assessment diets	I	External Examiner School Response Nicola Blackie 2023-24	O				Student meetings	Teaching staff meeting		X			Students stated that assessment load is OK, quite spaced out. 3rd year is busy, but the timetable had recently been changed to accommodate a reading week before exams. Helps having the spot exams throughout, so they can keep up. Teaching staff state assessment marking workload 'variable', but able to plan across the year. Marking allocation spreadsheet available. Harper students - a lot of opportunity for formative assessment, is clear when it's formative or summative.			

Domain 6 - Curriculum and Assessment

Standard		Repository Evidence *Type = Input, Process or Outcomes*						Further evidence needed on	Visitation Evidence *Type - Input, Process or Outcomes*			Recommended Outcome			Comments	Recommendations	Suggestions	Commendations
		Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard Met	Partially Met	Not Met				
6.19	The school must have appropriate moderation processes in place to ensure parity within and between individual units of study, across the programme, with other institutions; and to ensure that each student is treated without bias.	Academic marking & moderation guidance	I	Assessment monitoring form	P	Range of completed moderation forms.	O					X						
6.20	There must be a system for students to keep a record of the quality and quantity of their clinical experience and reflect on their development of clinical and non-clinical skills over the duration of the programme. These records must be regularly reviewed by an educator to inform an individualised development plan. Consolidated data must contribute to the quality improvement of the programme.	Example of rotation assignment brief	I	Example of final year student portfolio demonstration	O	Example of clinical learning experience log	O		IMR practice discussion	Assessment/coaching and portfolio presentation		X			Partner practices not 'actively' monitoring attendance but would check with school if someone missing.			
6.21	The school must demonstrate a commitment to research led teaching throughout the veterinary programme.	Intro to QI Projects Session	P	Research-led teaching - showcasing examples	O	HK partnership comments	O		Early career staff meeting, senior staff meeting	Organisation presentation		X			Lecturer reported approach to using google scholar to update herself on latest research when preparing teaching content.Other examples of CPD carried out to update staff in latest developments. Also signpost students to research to update themselves. Workload to update teaching content - busy periods, was difficult in earlier days, but balanced over longer period.			
6.22	All students must be trained in scientific method and research techniques. All students must have opportunities to participate in research programmes.	BVetMS Curriculum Map_2024-25	I	Assessment Brief examples	P	Student research projects	O		Staff meetings	Rotation lead meeting	Senior team meetings	X			Appears to be limited opportunities for primary research, other than through electives or EMS, although students complete QI projects. Students draw upon research skills gathered earlier in course during their QI projects.		**The school should encourage more students to pursue primary research projects**	

Harper & Keele
VETERINARY SCHOOL

Response to RCVS accreditation report 2025

We would like to thank the RCVS team and Accreditation panel for their time preparing for and undertaking the visit and providing multiple opportunities for our colleagues, and a wide range of students, to engage and provide feedback. We appreciate the positive comments regarding our students as a whole and are proud of them and their contributions to the ethos and character of the School.

We were very pleased to have received several commendations, particularly in the areas of widening participation, inclusivity and inter-professionalism. It is of note that the School has just been ranked number one in the National Student Survey which adds to the evidence relating to student feedback and experience.

Best wishes,

Professor Matt Jones MRCVS
Head of Harper and Keele Veterinary School

Domain 1 – The Learning Environment

Commendations

- The School is commended for their innovative use of 3D printing and simulation facilities to support student learning. (Standard 1.13)

Suggestions

- The School should review the integrity of isolation procedures across IMR providers. (Standard 1.9)

Response: A review of biosecurity procedures underpinning the isolation facility noted in the report rubric has been undertaken and the School will work with the practice to ensure the issues are addressed. Audits for all partner practices will include an enhanced focus on isolation facilities in addition to standards set by the RCVS Practice Standards Scheme.

- The School should consider improving access to farm records (individual and herd health) for students. (Standard 1.11)

Response: There is a contractual obligation for practice partners to provide access to clinical records. Following consultation, the School has encouraged the farm partner practices to facilitate student access to farm records as much as is possible within confidentiality constraints. These records are already accessed by students for fertility visits, mastitis and lameness control sessions, to support clinical case teaching, and to provide data for the Farm First project work.

- The School is encouraged to continue their plans to allow open access to their clinical skills labs. (Standard 1.13)

Response: Clinical skills labs are available and in use at both campuses. Work is ongoing to provide controlled open access by students and a recording system of usage from October 2025. Further equipment will be purchased to install in the clinical skills open access rooms.

Recommendations

- The School must ensure health & safety, biosecurity and animal welfare policies are adhered to across all teaching sites and effective monitoring and oversight of such areas are in place. (Standard 1.2)

Response: In partnership with the Keele Health & Safety Manager and the Harper Adams Head of Health & Safety draft Terms of Reference for a School Health, Safety & Biosecurity Committee have been developed. These will be presented to Joint Management Board (JMB) for scrutiny & approval. This body will complement existing university committees and processes and have oversight of health, safety & biosecurity processes at all HKVS teaching sites and will ensure compliance with existing University policies & procedures. The committee will report to JMB and the Health & Safety groups at both universities. Where appropriate it will also receive HKVS related business from these bodies. Bespoke risk assessment, audit & review documents are in development.

A project is currently underway at Harper Adams on behalf of RCVS to develop a policy on animal use monitoring for UK Vet Schools. Once the policy has been developed, and approved by RCVS, the School and wider university will implement processes which ensure compliance with the policy.

- The School must undertake in-person audits of the learning environment at all teaching sites with sufficient regularity. (Standard 1.3)

Response: The audit process for distributed sites was developed based on higher education sector best practice (which places an emphasis on the role of self-assessment) and deployed at another accredited vet school. This blends visits and self-assessment along with submitted evidence. An initial self-audit is intended to encourage the practice to be self-critical in identifying gaps. This is followed by an in-person 'set-up' audit prior to any students attending and alternating in-person and self-audits using feedback from staff, students and partners to inform any actions to be taken between in-person visits. This approach was based on best practice and not resource constraints.

In order to address concerns with implementation of this process, annual in-person audit visits will be mandatory and conducted by a new Partnerships and Placements Manager.

Current auditing practices of facilities used for teaching at both campuses are being reviewed. The new School Health, Safety & Biosecurity Committee will adopt a revised approach for reporting and monitoring these.

- The School must ensure that all commercial partner practices delivering IMR are PSS accredited. (Standard 1.4)

Response: The School has met with the two practices not currently accredited and has received written undertakings that they are engaged in doing so already as part of their contractual obligations and will be submitted for PSS inspection at the earliest opportunity. The new Partnerships and Placements Manager will ensure that no further partners are engaged unless this is in place.

- The School must ensure students obtain sufficient hands-on experience with live birds and small ruminants. (Standard 1.5)

Response: Harper Adams University has agreed to establish a flock of chickens specifically for HKVS teaching in existing poultry facilities on-site in time for the 2025 / 2026 academic year. The nature and size of that flock is currently being determined though work with husbandry and welfare specialists at Harper Adams. Curriculum modifications to incorporate additional sessions are in planning.

A comprehensive revision of small ruminant teaching has been completed with additional learning outcomes and associated sessions planned for academic year 2025 / 2026.

- *Year 1: taught content on management systems for sheep and goats, tutorials focused on small ruminant management and additional practical sessions for drafting, handling and husbandry.*
- *Year 3: small group clinical examination sessions, repeated alongside clinical exam of cattle.*
- *Year 4: small group clinical examination sessions integrated with diagnostic sampling and clinical decision making and additional goat medicine taught content.*
- *IMR: additional clinical examination of sheep through on-farm session assessing cull ewes as a group with a focus on reasons for culling, iceberg diseases and treatment of individual cases and group problems.*
- *Future plans: visits to farms to assess various farming systems, flock health visits to farms to assess specific issues alongside review of curriculum time and staffing for the future.*

- The School must ensure all students attend farm ambulatory visits to experience a range of clinical cases. (Standard 1.8)

Response: The structure of the Year 5 production animal rotation has been changed for the 2025-26 academic year to incorporate a specific ambulatory week in practice. Clinical case exposure has been increased in the structured in-house weeks of the Year 5 production animal rotation block.

- The School must continue at pace to develop proposals for a range of postgraduate programmes and provide a timeline for implementation. (Standard 1.9)

Response: With the process of governing new taught programmes now established between the two host institutions, the School can proceed with the development of a portfolio of postgraduate programmes, the first of which will be due for launch in October 2026. The postgraduate programmes offered by the School will build on our strengths and values within excellence in primary care research and practice, and professional performance and wellbeing. The School will also establish a programme of post-graduate training, due to launch in 2027, which will support the delivery of internships and residencies within private practice, focusing on widening participation and access to these programmes of study within the profession.

Domain 2 – Organisations, Culture and Values

Commendations

- The School is commended for the strong commitment and positive culture with respect to diversity and inclusion. (Standard 2.4)

- The School is commended for the strong commitment and positive culture with respect to diversity and inclusion. (Standard 2.5)

Suggestions

None

Recommendations

None

Domain 3 – Educational Governance and Quality Improvement

Commendations

None

Suggestions

- The School should consider convening a School health and safety committee with student representation. (Standard 3.7)

Response: In partnership with the Keele Health & Safety Manager and the Harper Adams Head of Health & Safety, draft Terms of Reference for a School Health, Safety & Biosecurity Committee have been developed. These will be presented to Joint Management Board (JMB) for scrutiny & approval. This body will complement existing university committees and processes and will have oversight of health, safety & biosecurity processes at all HKVS teaching sites and will ensure compliance with existing University policies & procedures. The committee will report into JMB and the Health & Safety groups at each University. Where appropriate it will also receive HKVS related business from these bodies. Bespoke risk assessment, audit & review documents are in development.

- The School should ensure parity of disciplinary processes across institutions. (Standard 3.7)

Response: The School does not believe there to be any lack of parity of disciplinary outcomes across the two university partners. The School's Student Conduct & Disciplinary Policy requires outcomes and sanctions arising from any University-led disciplinary processes to be agreed by both universities in order to ensure equity. The Director of Operations has written to the relevant teams at both universities to remind them of this requirement.

Recommendations

- The School must ensure there are sufficient staff to support the effective and sustainable delivery of all aspects of the programme. (Standard 3.5)

Response: All currently open posts have been approved for immediate recruitment. A revised business plan is being developed to review mid to long-term staffing to meet the needs of the programme and future developments. Post approval processes are being urgently reviewed.

A new workload allocation model is in development to launch in September 2025 to ensure that workloads are equitably distributed and focus of work is appropriate to roles.

- The School must ensure contracts are in place with all partner practices involved in the provision of education. (Standard 3.13)

Response: *The School has completed an urgent review of outstanding contractual matters and will ensure any contracts remaining unsigned will be completed without delay. Delays in processes for developing and executing contracts are being reviewed to improve process.*

- The School must improve the granularity of attendance monitoring to ensure gaps in learning do not occur. (Standard 3.14)

Response: The current university timetabling and attendance capture systems in place do allow detailed information to be captured regarding levels of attendance, but do not enable identification of learning gaps. Keele University is in the process of procuring a new timetabling system. The School has met with the Head of Timetabling who is leading the procurement process. They have confirmed that the preferred new system will have the capability for identification of learning gaps. Until such a time that a new system is procured and implemented the School will develop a manual process for identification of significant learning gaps. If required, additional human resource to implement this will be secured.

- The assessment strategy must be reviewed for validity to ensure all graduates are Day One Competent. (Standard 3.14)

Response: The assessment strategy established for the BVetMS programme, builds upon the principles of competency based veterinary education (CBVE), focusing on the holistic nature of veterinary practice. This is achieved through deploying a broad range of assessment methods to evidence that graduates are confident and competent in applying their knowledge, technical skills and non-technical skills across different clinical or professional contexts. One component of this is the comprehensive framework of Entrustable Professional Activities (EPAs) deployed within the final year portfolio of workplace-based learning.

This EPA framework was designed to drive student-centric clinical and professional development, going beyond the simple attainment of individual Day One Competences to evidence professional capabilities that can be applied holistically to all clinical and professional contexts. Whilst it is not defined within the RCVS accreditation standards, nor explicit within the RCVS Day One Competences, the School has since adopted this additional guidance to ensure species-specific completion of EPAs within final year, further improving the validity of this component of the CBVE strategy.

The School has, to the satisfaction of the RCVS appointed external examiners, successfully implemented relevant discipline-focused remediation, where required, for our first cohort of students in May of 2025, and has established relevant requirements within the final year portfolio going forward.

Domain 4 – Supporting Students

Commendations

- The School is commended for the innovative and holistic support provided by staff, particularly the preceptors, CTFs and disability inclusion tutors. (Standard 4.1)

- The School is commended for championing inclusion and widening participation through a range of processes. (Standard 4.2)

- The School is commended on their approach to, and implementation of, contextualised professional development. (Standard 4.3)

Suggestions

- The School should ensure that students gain experience handling live birds prior to undertaking EMS. (Standard 4.12)

Response: Please see recommendation for 1.5 for commentary related to this recommendation.

- The School should consider revisiting communications to students regarding the expectations of student behaviour and conduct periodically to ensure student confidence in the process. (Standard 4.13)

Response: Communications regarding expectations of behaviour and summarised data on numbers of anonymous behaviour reports received and actioned will be incorporated into scheduled student communications for the 2025-26 academic year.

Recommendations

None

Domain 5 – Supporting Educators

Commendations

None

Suggestions

None

Recommendations

- The School must ensure that all educators have completed training relevant to their role. (Standard 5.1)

Response: The School will continue to ensure that new academic staff are able to complete a post-graduate certificate in higher education and can work towards fellowship with Advance HE. We will work with host institutions to increase access and participation with these programmes, as well as promoting opportunities for scholarship and further staff development.

Since its inception, our two-day, in-person 'Train-the-Trainer' programme for clinical educators has been available to ALL STAFF within our clinical partnership network, which has seen the School train over 130 staff members across 15 core teaching sites. For new clinical practices,

the priority is always to ensure that those directly supporting the students (academic anchors) and those observing and evaluating EPAs (Entrustable Professional Activities) are trained, but this training has always been inclusive of all staff in the practice.

Over the next 6 months, the School will further develop our portfolio of clinical education training available to our partners, creating more role-specific training which will ensure all educators will have completed training relevant to their role in practice.

- The School must ensure educators within IMR practices engage with CPD relevant to teaching and can demonstrate that they remain effective educators. (Standard 5.2)

Response: As part of the development of our portfolio of clinical education training referenced in the response to standard 5.1 and building on the extensive training already delivered during the set-up phase of our clinical partnerships, the School will develop a programme of continued professional development over the next 6 months which will serve to ensure clinical educators remain current and relevant in their role.

- The School must ensure that the workload model is used to distribute work appropriately to maintain stability and morale, as well as providing educators and staff with an appropriate balance of teaching, administration and research. (Standard 5.5)

Response: A new workload allocation model is being implemented over the summer of 2025 and brought into use for the 2025-26 academic year. The new model has been used in Keele School of Life Sciences for the last decade and has received positive feedback from leadership staff and faculty. The model is being adapted to the Vet School through consultation with key stakeholders to ensure it is relevant, accurately reflecting workflows within the School and that time allocation for activities is accurate. This enhanced model will account for responsibilities such as leadership roles, committee activity, scholarship, academic mentoring, outreach activities, line management and research. The workload allocation will be visible to all School staff for transparency about how workload is distributed.

Domain 6 – Curriculum and Assessment

Commendations

- The School is commended for integrating a range of interprofessional education (IPE) interactions. (Standard 6.7)

- The School is commended for their support of students in identifying suitable placements and the quality assurance of placement providers. (Standard 6.9)

Suggestions

- The School should introduce a quality assurance process for the summative assessment of the portfolio to demonstrate reliability. (Standard 6.14)

Response: The Competency Development and Attainment portfolios involves use of a detailed briefing document for each cohort. The team of Professional Tutors reviewing the portfolios use this, and an auditing system built into the Pebble Pad platform, to verify them as complete. The skill-based elements of the portfolios are evaluated against a standard rubric by those with appropriate educational training and expertise in the field. In addition to these existing QA measures, the following additional measures will be introduced in September 2025:

- *Annual training and regular standardisation meetings for all involved in review of portfolio content and assessment of clinical skills.*
- *Moderation of a sample of portfolios by the Module Lead.*
- *Formation of a Competency Committee to ensure quality of the portfolio content and optimal student engagement.*

The School should implement robust processes to review assessment content and quality prior to delivery. (Standard 6.17)

Response: Exams will continue to undergo internal and external moderation prior to launch. A School Academic Assessments Officer has been appointed in May 2025 to take leadership for such actions. Recently produced guidelines for production of exam questions include specific guidelines on exam upload to complement the existing exam writing guide, for example guidance on image quality has been introduced.

- The School should encourage more students to pursue primary research projects. (Standard 6.22)

Response: All students are trained in scientific method and research techniques. All Year 5 students complete a 3-week Quality Improvement and Applied Research Project rotation, where they apply their research skills in literature review, study design and data analysis with the aim of improving the service in a primary care practice. Year 5 students also have the opportunity to undertake a 6-week primary research project in an area of their choosing as their Elective option. The School will promote both internal and external student research opportunities by circulating funding opportunities to all students. HKVS is a participant in the INSPIRE programme funded by the Academy of Medical Sciences. This Summer more students are participating in the programme than ever before, and the School continues to offer collaborative supervision between both parent institutions. The School will continue to encourage academic staff to offer primary research opportunities linked to their own research projects.

<u>Recommendations</u>

- The assessment strategy must be reviewed for validity to ensure all graduates are Day One Competent. (Standard 6.1)

Response: Please see recommendation for 3.14 for commentary related to this recommendation.

- The School must ensure students obtain sufficient hands-on experience with live birds and small ruminants. (Standard 6.2)

Response: Please see recommendation for 1.5 for commentary related to this recommendation.

- The assessment strategy must be reviewed for validity to ensure all graduates are Day One Competent. (Standard 6.14)

Response: Please see recommendation for 3.14 for commentary related to this recommendation.

- The assessment strategy must be reviewed for validity to provide assurance of competence across the clinical domains. (Standard 6.15)

Response: Please see recommendation for 3.14 for commentary related to this recommendation.

Action plan to support response to RCVS Accreditation report

All actions will be reviewed by the HKVS Project Management group and reported to RCVS as part of annual monitoring.

	Standard	Recommendation / Suggestion	School Actions	Timeline
Domain 1				
Sug	1.9	The School should review the integrity of isolation procedures across IMR providers.	Immediate review of specific issues. Audits to include an enhanced focus on isolation facilities in addition to standards set by the RCVS Practice Standards Scheme.	September 2025
Sug	1.11	The School should consider improving access to farm records (individual and herd health) for students.	There is a contractual obligation for practice partners to provide access to clinical records. Following consultation, the School has encouraged the farm partner practices to facilitate student access to farm records as much as is possible within confidentiality constraints.	Complete
Sug	1.13	The School is encouraged to continue their plans to allow open access to their clinical skills labs.	Provision of controlled open access by students and a recording system of usage from October 2025	October 2025
Rec	1.2	The School must ensure health & safety, biosecurity and animal welfare policies are adhered to across all teaching sites and effective monitoring and oversight of such areas are in place.	Establishment of a School Health, Safety & Biosecurity Committee. Review animal use under existing legislation and guidance. Implement future policy based on Harper Adams / RCVS work.	October 2025 Academic year 25/26
Rec	1.3	The School must undertake in-person audits of the learning environment at all teaching sites with sufficient regularity.	Mandatory annual in-person audit visits conducted by a new Partnerships and Placements Manager.	Academic year 25/26

			School Health, Safety & Biosecurity Committee reporting and monitoring of facilities.	Academic year 25/26
Rec	1.4	The School must ensure that all commercial partner practices delivering IMR are PSS accredited.	Complete two outstanding PSS accreditations.	Academic year 25/26
Rec	1.5	The School must ensure students obtain sufficient hands-on experience with live birds and small ruminants.	Establish Harper Adams teaching flock. Implement revisions to curriculum for small ruminants.	October 2025
Rec	1.8	The School must ensure all students attend farm ambulatory visits to experience a range of clinical cases.	Addition of a specific ambulatory week in IMR. Increase clinical case exposure in the structured weeks of the Year 5 production animal rotation block.	Complete
Rec	1.9	The School must continue at pace to develop proposals for a range of postgraduate programmes and provide a timeline for implementation.	Launch postgraduate programmes related to primary care research and practice, and professional performance and wellbeing. Launch programmes of post-graduate training which will support the delivery of internships and residencies within private practice.	October 2026 October 2027
Domain 3				
Sug	3.7	The School should consider convening a School health and safety committee with student representation.	Establishment of a School Health, Safety & Biosecurity Committee.	October 2025
Sug	3.7	The School should ensure parity of disciplinary processes across institutions.	The Director of Operations has written to the relevant teams at both universities to remind them of this requirement.	Complete
Rec	3.5	The School must ensure there are sufficient staff to support the effective and sustainable delivery of all aspects of the programme.	All currently open posts have been approved for immediate recruitment. Revised business plan to meet the needs of the programme and future developments. Review of post approval processes. New workload allocation model.	Complete Academic year 25/26 September 2025

Rec	3.13	The School must ensure contracts are in place with all partner practices involved in the provision of education.	The School has completed an urgent review of outstanding contractual matters and will ensure any contracts remaining unsigned will be completed without delay. Review of contracts' process.	Academic year 25/26
Rec	3.14	The School must improve the granularity of attendance monitoring to ensure gaps in learning do not occur.	Procurement of a new timetabling system dependent on Keele University. Launch manual process for identification of significant learning gaps.	During Academic year 26/27 Academic year 25/26
Rec	3.14	The assessment strategy must be reviewed for validity to ensure all graduates are Day One Competent.		Complete
Domain 4				
Sug	4.12	The School should ensure that students gain experience handling live birds prior to undertaking EMS.	See recommendation for 1.5.	October 2025
Sug	4.13	The School should consider revisiting communications to students regarding the expectations of student behaviour and conduct periodically to ensure student confidence in the process.	Communications regarding expectations of behaviour and summarised data on numbers of anonymous behaviour reports received and actioned incorporated into scheduled student communications.	Academic year 25/26
Domain 5				
Rec	5.1	The School must ensure that all educators have completed training relevant to their role.	Continue to ensure new academic staff complete a post-graduate certificate in higher education and work towards fellowship with Advance HE Further develop portfolio of clinical education training available to partners and ensure all educators have completed training relevant to their role in practice.	Ongoing January 2026

Rec	5.2	The School must ensure educators within IMR practices engage with CPD relevant to teaching and can demonstrate that they remain effective educators.	Develop a programme of continued professional development to ensure clinical educators remain current and relevant in their role.	January 2026
Rec	5.5	The School must ensure that the workload model is used to distribute work appropriately to maintain stability and morale, as well as providing educators and staff with an appropriate balance of teaching, administration and research.	Implementation of a new workload allocation model.	October 2025
Domain 6				
Sug	6.14	The School should introduce a quality assurance process for the summative assessment of the portfolio to demonstrate reliability.	Introduce additional QA measures.	Academic year 25/26
Sug	6.17	The School should implement robust processes to review assessment content and quality prior to delivery.	Academic Assessments officer to have leadership over the existing processes and improvements to them.	Academic year 25/26
Sug	6.22	The School should encourage more students to pursue primary research projects.	Continue existing activities. Promote internal and external student research opportunities by circulating funding opportunities. Continue to offer collaborative supervision for the INSPIRE programme funded by the Academy of Medical Sciences Continue to encourage academic staff to offer primary research opportunities linked to their own research projects.	Ongoing
Rec	6.1	The assessment strategy must be reviewed for validity to ensure all graduates are Day One Competent.	See recommendation for 3.14.	Complete
Rec	6.2	The School must ensure students obtain sufficient hands-on experience with live birds and small ruminants.	See recommendation for 1.5.	October 2025
Rec	6.14	The assessment strategy must be reviewed for validity to ensure all graduates are Day One Competent.	See recommendation for 3.14.	Complete

Rec	6.15	The assessment strategy must be reviewed for validity to provide assurance of competence across the clinical domains.	See recommendation for 3.14.	Complete

Sunday 11th May – Panel member meeting at 17:00 at the hotel

Monday 12 May					
Time	**length of time**	**Meeting / Tour**	**Location**	**Scope / focus**	**Attendees – Should be a mixture of staff from both Harper and Keele campuses (except where otherwise stated)**
8.00	15	Leave hotel (based in Keele)			
8.15	15	Private meeting		Panel Members only	
8.30	45	Welcome with Senior Team & organisation			
9.15	100	Senior team & those responsible for the curriculum and assessment		Curriculum & assessment presentation on the full 5 years, and any future plans (timeline for curriculum review etc) (20 mins max)	
10.55	10	Comfort break			
11.05	60	Tour of Keele facilities	Keele campus	Student spaces, Teaching and learning spaces.	
12.05	45	Meeting with pre clinical students at Keele		RCVS to invite students to a townhall style meeting in a large room rather than a tiered lecture theatre.	
12:50	55	Meeting with clinical students at Keele			
13.45	30	Private lunch		Panel Members only	
14.15	70	Tour of Keele facilities		Continue tour including any animal housing.	
15.25	10	Comfort break			
15.35	45	Early career academic / teaching staff			
16.20	45	Senior Academic / teaching staff session			
17.05	5	Comfort Break			
17:10	30	Senior Team mop up		Panel Members to ask for any clarification based on the visit day/evidence reviewed	
17.35	15	Leave for hotel			

18:00		Confidential sessions (staff/students, online) & private meeting		RCVS to organise confidential sessions	

Tuesday 13 May					
Time	**length of time**	**Meeting / Tour**	**Location**	**Scope / focus**	**Attendees - Should be a mixture of staff from both Harper and Keele campuses (except where otherwise stated)**
8.00	0	Leave hotel			
8.00	60	Travel to Harper Adams	travel		
9.00	05	Private meeting		Panel Members only	
09.05	35	Tour Harper facilities	Harper	Student spaces, Teaching and learning spaces, Library	
09:40	45	EMS meeting (45 min)			
10.25	10	Comfort break			
10.35	45	Staff session - Professional Preceptors			
11:20	40	Panel member lunch – private meeting			
12:00	55	Meeting with clinical students at Harper		RCVS to invite students to a townhall style meeting in a large room rather than a tiered lecture theatre.	
12.55	45	Meeting with pre clinical students at Harper			
13.40-15:30	110	Tour Harper / Bradshaws trip	Harper	The panel will split with 2/3 panel members visiting Bradshaw's whilst the others continue touring Harper facilities and animal housing.	Includes alternative trip to Bradshaws 13.40 – 15.30
15.30	15	Comfort break			
15.45	30	Mop up session with Senior Team		Panel Members to ask for any clarification based on the visit day/evidence reviewed	
16.15	60	Travel to Hotel	travel		
18.15		Confidential session (staff/students, virtual) or private meeting		RCVS to organise confidential sessions	

Wednesday 14 May					
Time	**length of time**	**Meeting / Tour**	**Location**	**Scope / focus**	**Attendees - Should be a mixture of staff from both Harper and Keele campuses (except where otherwise stated)**
8.00	15	Leave hotel			
8.15	05	Private meeting	Keele	Panel Members only	
8.20	30	Showcase slot (30 mins)			
8.50	45	Staff session – Clinical Teaching Fellow			
09.35	5	Comfort break			
09.40	45	Student Support Services (Senior tutor, Student experience and support officers, Disability Inclusion Tutor, EDI Lead) (45 min)			
10.25	10	Comfort break			
10.35	45	Meeting with Support/technical staff, administrators, facilities, IT staff meeting		To include farm/facilities managers based at Harper.	
11.20	60	Meeting with staff responsible for partner practice network and the QA of partner practices			
12.20	5	Comfort break			
12.25	60	Meeting with staff from/responsible for Garden Vets IMR placements		To include a quick tour followed by time to speak to GVAK and HKVS staff. To include Sheldon Middleton please.	
13.25	30	Private lunch 30 min		Panel Members only	
13.55	50	Meeting with senior staff (including senior team and committee chairs) (50 min)			
14.45	10	Comfort break			
14.55	50	Rotation leads session		To include Philip Robinson please.	
15:45	15	Private meeting			

16.00	30	Senior team mop up (30 min)		Panel Members to ask for any clarification based on the visit day/evidence reviewed	
16.30	15	Leave for hotel			
18.00		Confidential sessions (staff/students, online) & private meeting		RCVS to organise confidential sessions	

Thursday 15 May					
Time	**length of time**	**Meeting / Tour**	**Location**	**Scope / focus**	**Attendees - Should be a mixture of staff from both Harper and Keele campuses (except where otherwise stated)**
9.00	15	Leave hotel			
9.15	15	Private meeting	Keele	Panel Members only	
9.30	60	Senior University staff – Harper, Keele and HKVS		This should include staff from both sites that are included in decision making/finances alongside HKVS Senior Team.	
10.30	10	Comfort break			
10.40	60	Zoom meeting with partner practice representatives		To include; PDA Leicester, Twemlows, Someone senior from Eville and Jones, Leahurst, Frynwy, representatives from the farm animal/farm vets partner practices, and any other representatives you wish to invite.	
11.40	30	Staff responsible for Admissions / Widening Participation (30 min~~)~~			
12.10	60	Mop up session with students		Students who were unable to attend the previous meetings (town hall style).	
13.10	30	Private lunch			
13:40		Showcase slot (1 hour)			
14:40	30	Meeting with staff who plan, organise and deliver the TtT programme			
15:10-16:10	60	Free time to revisit areas/groups and/or report writing		To be determined during the visit	
16.10	60	Mop up session with Senior Team (including time for mop up)		Panel Members to ask for any clarification based on the visit day/evidence reviewed	
17.10	15	Leave for hotel			

16.00		Confidential sessions (staff/students, online) & private meeting/report writing		RCVS to organise confidential sessions	

Friday 16 May					
Time	**length of time**	**Meeting / Tour**	**Location**	**Scope / focus**	**Attendees - Should be a mixture of staff from both Harper and Keele campuses (except where otherwise stated)**
9.00	15	Leave hotel			
9.10	10	Private meeting		Panel Members only	
9.20	10	Meeting with Dean		Chair to feedback to Dean the findings from the team (and members of senior team at the Dean's discretion)	
9.30	10	Comfort break			
9.40	10	Meeting with VCs		Chair to feedback to the VCs and Dean the findings from the team	
9.50		Panel members depart			