The Royal College of Veterinary Surgeons

Practice Standards Scheme

PSS Handbook

Belgravia House

November 2015
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1. About the RCVS Practice Standards Scheme

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

The Practice Standards have been developed by the Practice Standards Group which comprises representatives from the British Veterinary Association (BVA); the British Small Animal Veterinary Association (BSAVA); the British Veterinary Hospitals Association (BVHA); the British Equine Veterinary Association (BEVA); British Cattle Veterinary Association (BCVA); RCVS Council; the Society of Practising Veterinary Surgeons (SPVS); the Veterinary Practice Management Association (VPMA); the British Association of Veterinary Emergency and Critical Care (BAVECC); Veterinary Nurses Council; the British Veterinary Nurses Association (BVNA) and a lay representative. The PSG is responsible for the ongoing development of the Scheme and the Standards.

Who manages the scheme?
The Practice Standards team manage the day to day operations of the Scheme and will be your first point of contact if you have any questions about the standards, your accreditation or your assessment. The team can be reached by calling 020 7202 0767 or by email to pss@rcvs.org.uk.

There are many members of the PSS team, including 18 assessors. Details for the full team, including biographies, can be found on the RCVS website http://www.rcvs.org.uk/practice-standards-scheme.

Accreditations
Practices can apply to be accredited at different standards depending on the services they offer. These are described below. Compliance with one or more of these standards is compulsory for members of the Scheme.

The Standards to be met are set out in the RCVS Practice Standards Modules Documents. There is a separate document for each species type; Small Animal, Equine and Farm. Full details of this are available on the RCVS website http://www.rcvs.org.uk/practice-standards-scheme.

Different premises within a practice may apply for different categories of accreditation (e.g. a Main premises could be a Small Animal Veterinary Hospital with its branch an Equine General Practice). Also one premises may apply for multiple accreditations (e.g. as an Equine Veterinary Hospital and a Small Animal General Practice).

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

The Scheme requires that all practice premises open to members of the public to bring animals for veterinary treatment and care, or from which ambulatory services are provided, must be assessed and comply with at least Core Standards for all species treated.

To achieve Core Standards practices must meet the core requirements in all relevant modules. For example, if a practice did not undertake any surgery at the premises then it would be exempt from the requirements of this module.
**General Practice**

General Practice accreditation reflects the requirements of a primary care practice which aims to facilitate the achievement of high standards of clinical care, and encompasses many of the facilities required for veterinary nurse training standards.

General Practices must meet the Core and GP requirements in all of the modules.

**General Practice – Ambulatory (Equine)**

General Practice – Ambulatory is a new accreditation level. It recognises there are Equine practices that provide a GP level service, albeit that they do not have stabling facilities or premises where horses are treated.

General Practice – Ambulatory practices must meet the Core and GP requirements in all modules except In-Patients.

**Emergency Service Clinic**

Emergency Service Clinic accreditation reflects the requirements of a designated out-of-hours provider.

Emergency Service Clinics must meet the Core and GP requirements in all modules and the ESC requirements in the Emergency and Critical Care Module.

**Veterinary Hospital**

Veterinary Hospital accreditation reflects the requirements of a General Practice allied with additional facilities and protocols for the investigation and treatment of more complex cases.

Veterinary Hospitals must meet the Core, GP and Veterinary Hospital requirements in all of the modules. However, if for example a Veterinary Hospital can demonstrate that it undertakes no dentistry, because it only undertakes orthopaedic work, then it may be exempted from the requirements of the Dentistry Module.


- Anaesthesia
- Clinical Governance
- Client Experience
- Dentistry (*not for Farm Animal Practices*)
- Diagnostic Imaging
- Emergency and Critical Care (ECC) (*Small Animal Practices only*)
- Infection Control
- In-patients
- Laboratory and Clinical Pathology
- Medicines
- Medical Records
- Nursing (and Paraprofessionals)
- Out-of-hours
- Out-patients
- Pain Management
- Practice Team
- Premises
- Surgery

**Awards**

In addition to the PSS accreditations, practices can apply to be assessed for *optional* awards in specific areas. Practices may be designated as ‘Good’ or ‘Outstanding’ within each award.
The awards, unlike the practice standards, will focus on the impact of actions, behaviours and outcomes of the work undertaken within the practice. For example they will look closely at the clients’ experience when visiting a practice and the impact of clinical governance in bringing about change. They are arranged in modules according to subject. Each clause within a module is given a designated point score.

The Awards are made up of modules. In order to be judged as ‘Good’ a practice will need to achieve 60% of the available points within a module or 80% in order to be designated as ‘Outstanding’. Where a practice does not achieve 60% of the available points no award will be issued.

Below is a table showing all the awards achievable for each species type. Full details of the awards and the modules they contain can be found in the Modules documents.

<table>
<thead>
<tr>
<th>Award</th>
<th>Equine</th>
<th>Farm Animal</th>
<th>Small Animal</th>
</tr>
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<tbody>
<tr>
<td>Team and professional responsibility</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Client service</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Diagnostic service</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>In-patient service</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Ambulatory service</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advisory/consultation service</td>
<td>x</td>
<td></td>
<td></td>
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<tr>
<td>Patient consultation service</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency and critical care</td>
<td></td>
<td></td>
<td>x</td>
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How often are practices assessed?
Practices will be assessed at least every four years for their accreditations and any optional Awards. Any practice premises may be subject to interim ‘spot checks’. These may be without prior warning and could include candidate premises which have not yet been accredited.

The PSS IT System (Stanley)
The Practice Standards Scheme is administered from a bespoke IT System which takes practices through the assessment process. This IT system has been named Stanley (inspired by Practice Standards) and can be found at www.Stanley.org.uk

Stanley provides a step-by step guide to the requirements of the Scheme and acts as the central point for all communications between practices, assessors and RCVS staff.

Stanley will be made available to accredited members of the Scheme to hold practice related documents, reports and other relevant documents. Practices are required to upload pre-assessment documents which will be checked by their allocated assessor before a date for the visit is agreed. Practices are required to use this system in order to gain accreditation and the optional Awards. Stanley speeds up the accreditation process and will also provide a reminder service when documents are due to expire.

In exceptional circumstances where particular IT difficulties arise, a paper based process may be permitted, subject to the payment of an administration charge.

In early 2016 Stanley will also be also opened for non-accredited practice to use to assist in ensuring they are working to the equivalent of Core Standards.
The information on the system is located on a remote server. All parties are bound by the principles of the Data Protection Act 1998 and take data privacy very seriously. Neither RCVS or Skillwise (the system’s developer) will make any data from the system available to other external users without the permission of the data owners, except in the circumstances as provided for under the Data Protection Act (e.g. may be passed to relevant enforcement agencies, including the Health and Safety Executive or Veterinary Medicines Directorate). Users must not attempt to upload any files or enter data that could potentially harm the system. Please see the PSS rules and the Information Commissioner’s Office guide to data protection ([http://bit.ly/1Vrkmw2](http://bit.ly/1Vrkmw2)) for more information.
2. Applying to Join the Scheme

Benefits of Being Accredited
There are many benefits to joining the scheme which may vary across practices. Some of the most common ones are listed below:

- Receipt of guidance and support to meet the requirements e.g. advice and assistance with compliance on Veterinary Medicine Regulation.
- Encourages communication and team work amongst staff at the practice.
- Focuses staff on aspects of running a veterinary practice which can sometimes be overlooked due to the busy nature of the profession.
- Accreditation boosts public awareness of the need to choose a veterinary practice carefully.
- Scheme members are authorised to use a brand, advertising to members of the public as an accredited practice-logos, signage, certificates, plaques etc.
- Advertised as accredited on the RCVS Find a Vet service.
- Scheme membership can serve as a marketing tool for the practice.
- Free e-newsletter 'The Practice Standard' provides information and guidance about changes to the Practice Standards requirement and tips for assessment.
- Scheme Membership is recognised by the Veterinary Medicines Directorate (VMD). Practice premises under the ambit of the Practice Standards Scheme are not subject to routine inspection from the VMD as the Scheme's standards meet the VMD inspection criteria. The annual Practice Standards Scheme fee for accredited practice premises includes the annual Register of Veterinary Practice Premises fee.

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

Costs
An application/joining fee is payable for any Principal or Main practice premises and each branch practice premises. This is a non-refundable fee payable to cover initial assessment costs. The initial assessment must take place within six months of the RCVS receiving the initial application. If the assessment does not take place within six months the practice will need to re-apply to join the Scheme and pay the application fee again.

Fees are reviewed annually. Details are available on the RCVS website (http://bit.ly/1LPYWq5).

How to Apply
The application to join must be made by the legal entity running the veterinary practice (e.g. partnership, limited company or sole trader). Where the individual with authority to sign on behalf of the legal entity is not a MRCVS, the practice must state the name of the veterinary surgeon nominated to have overall responsibility for veterinary matters in the practice.

Applications are made online via Stanley: www.Stanley.org.uk
3. Applying for Awards

Benefits of the Awards
- Create a clear pathway to improvement, allowing practices to demonstrate the areas in which they excel.
- Focus on behaviours and other factors that impact upon the veterinary care of animals, the practice team and the experience of clients.
- Practices will be free to market their Awards as they choose, providing significant marketing benefits.
- The Awards follow a similar format to that used by Ofsted in the inspection of schools and should therefore be easily recognisable and understood by the public.

Eligibility
Practices can only apply for Awards if they are members of the Practice Standards Scheme and have been accredited. The Awards are additional to accreditation and are entirely optional.

The Awards will be available to all practice premises whether they are accredited to Core Standards, General Practice, Emergency Service Clinic or Veterinary Hospital. For a practice premises accredited to Core Standards some of the Awards may not be achievable due to the constraints of the premises or the work undertaken, however we would expect they would be able to attain Awards in Team and Professional Responsibility and Client Service. Where a Core Standards practice premises would like to apply for an Award it would also need to comply with the General Practice requirements within the applicable modules.

Practice premises wishing to achieve the Award in Emergency and Critical Care Service must also meet the Emergency Service Clinic (ESC) requirements within the Emergency and Critical Care Module.

Application
Practices can request to have an award assessment at any time and will be charged based upon assessor time, which will be charged at a minimum in half-day blocks plus travel time and expenses.

Applications are made online via Stanley: www.Stanley.org.uk
4. Non-Assessment Years

Practices are assessed every four years. This section contains information relating to the Scheme during the periods when practices are not undergoing routine assessments.

Annual Fees

An annual fee is payable for every Principal or Main practice premises and each branch practice premises. The annual fee is due each year for the period 1st April to 31st March. Fees are reviewed annually. Details are available on the RCVS website (http://bit.ly/1LPYWq5). The annual fee for each PSS premises accredited includes the statutory Register of Veterinary Practice Premises (RVPP) fee due under the Veterinary Medicines Regulation for those premises which have been registered.

Non-payment of annual fees following one warning notification, will result in accreditation being withdrawn. Any application for re-instatement should be made to the RCVS, together with payment of the joining fee. The RCVS reserves the right to require re-assessment of the practice and the cost of re-assessment will be charged to the practice.

A practice may notify the RCVS at any time that it wishes to withdraw from the application process or membership of the Scheme. No refund of fees already paid will be made.

The RCVS reserves the right to charge a cancellation fee where an assessment is cancelled by the practice less than 7 days before the assessment date agreed by the practice. Following withdrawal the RCVS will notify the Veterinary Medicines Directorate regarding medicines assessment.

Keeping Stanley Updated

Practices should keep their details on Stanley updated. It is important to keep your contact details up to date to enable the PSS team to contact your practice if necessary.

Your practice can continue to upload documents to Stanley at any time. This will help to make the routine assessment process easier. You can also set reminders to update documents which will help you to remember when important updates are due (e.g. an RPA visit, public liability insurance renewal).

Spot Checks

Practices in the Practice Standards Scheme are also subject to Spot Checks. These are shorter (generally up to two hours) and more focussed than routine assessments. Documentation will generally not be needed and it should not be a problem if key team members are not available.

Spot checks are arranged in advance but with much less warning than a routine assessment visit (24 to 48 hours notice).

The assessor, chosen by the PSS officers, will again leave contact details to enable your practice to contact them. If your practice has a genuine reason why a spot check cannot occur, please inform the assessor or the PSS officers as soon as possible.

Confirming Compliance

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

The assessment process starts approximately three months prior to the assessor’s visit taking place. Below is the usual procedure prior to routine and Award assessments visit.

Confirming Practice Details

Each premises or premises group must nominate a veterinary surgeon who will have responsibility for that group and will be present during the visit by the allocated assessor. Your practice must also provide details of the person responsible for coordinating Practice Standards at your practice if this is different to the Veterinary Surgeon who has overall responsibility at your practice. Please note, where a practice has more than one premises, correspondence will generally be with the main practice.

Check that your practice details are up to date, including your nominated PSS contact’s details and the addresses of all premises in your practice group. Ensure that all branches are listed, including any new premises which have not previously been assessed.

For routine assessments, check your accreditation details are correct and notify the PSS officers (via Stanley) of any changes you would like to make.

Check that all necessary documents have been uploaded that will need to be available on the day.

If you are applying for an Award, it is a good idea to check that you think you will score well above the points needed for the level you are aiming for. This will help to avoid disappointment on the day if an assessor finds any issues.

Assigning an Assessor

The PSS officers will assign a suitable assessor to visit your practice(s). Various factors are taken into consideration when allocating:

- Assessors must be capable of assessing the necessary levels of accreditation for the practice group.
- There must be no conflict of interest (financial, emotional, or otherwise), which could possibly affect the motivation of the assessor or practice. Examples of this include having previously worked in the practice, being part of a practice group which is in competition, or having a personal relationship with a member of staff.
- An assessor should not have carried out the previous routine assessment.
- Where possible, journey time will be kept to a minimum in order to reduce costs.

Assessors are asked to confirm or reject allocations within one week. After this period another assessor may be assigned.

Once an assessor has agreed to undertake the assessment, your practice will be asked to confirm that they have no conflicts of interest with the allocated assessor within one week.

Arranging the Assessment Visit

Once an assessor has been accepted, they will contact your practice’s named PSS contact to arrange a mutually convenient date to visit, using the contact details provided via Stanley. This should occur within two weeks of your practice accepting an assessor.

It is helpful if you can provide information on your desired timeframe, as well as any unsuitable dates, before the assessor calls. Practice groups with more than one premises will be visited on the same
day(s) wherever possible. Please note, the RCVS reserves the right to levy an additional fee in the event that more than one day is required.

During the phone call, the assessor will discuss their plans for the visit, including their arrival time. They will also provide their contact details to allow your practice to contact them with questions, concerns and any last minute changes of plan.

If it proves difficult to arrange a date, or there are any issues, assessors will keep the PSS officers informed. Your practice can also contact the PSS officers with any queries or concerns.

**Uploading Documents**
Practices will be asked to upload documents to Stanley prior to a routine assessment. Details of which documents must be uploaded can be found in the modules.

Assessors will check these documents before visiting your practice to ensure they are compliant. This will give the assessor more time to talk to team members on the day and provide guidance to the practice.

If there are any major issues, for example an inadequate number of documents have been uploaded, the visit may not be able to take place.

Please contact the PSS officers for advice.

**Requests for Deferral or Cancellation**
If your practice requires a deferral or cancellation once a date has been confirmed, you should contact their assessor who will try to help solve the issue if possible. If there is a genuine reason the visit cannot take place, the assessor can arrange to visit on a later date.

The RCVS reserves the right to charge a cancellation fee where an assessment is cancelled by the practice less than 7 days before the assessment date agreed by the practice.
6. Routine Assessments

This section contains information relating to routine assessments for accreditation (Core, GP, ESC and VH). It provides guidance on the process both during and after an assessor’s visit.

During the Routine Assessment Visit

If there are any unforeseen problems on the day of the assessment visit, practices should contact the assessor as soon as possible. Likewise, assessors will contact your practice if they experience any issues or delays to provide an update and estimate a new arrival time.

Practices should remember that the visit is not an examination and assessors do not expect everything to be perfect. The aim of the visit is to allow assessors to provide advice and guidance to help your practice improve.

There is no standard approach to an assessment visit, meaning the assessor can be flexible to your practice’s needs. Assessors will have a plan for the assessment, but will be able to change this according to your practice’s workload.

Assessors may wish to assess practice vehicles. They will want to speak to a cross section of the team involved in the normal activities of an operational day, not just the practice manager. Practice managers should be aware that some team members may be more nervous when they are around, so assessors should be able to talk to them alone. The purpose of such discussions is so that assessors can be satisfied that actions and practice policies are not only in place but are understood by relevant staff and are applied in the day to day operation of your practice, and to encourage better practice. Assessors will also wish to discuss levels of expertise and training for roles undertaken. Assessors will record the number of veterinary surgeons, veterinary nurses and other members of staff spoken to in the course of an assessment.

If team members have any questions or issues, please ask the assessor to provide answers or advice. In some cases problems cannot be resolved on the day, in which case assessors may refer the query to the PSS Review Group in order to get the best guidance for your practice. Please refer to the PSS rules for more information about the review group.

At the end of the visit, the assessor will provide their feedback. Both positive outcomes from the assessment and any issues found will be discussed, and any necessary changes will be explained.

The full report will be available four to six weeks after the visit (please see the next section). Practices are advised to wait for this report before carrying out any expensive changes.

Please contact the PSS officers with any concerns or queries following the visit.

Outcome of the Assessment

Once an assessment visit is complete, assessors will submit their findings and the outcome of the visit using Stanley.

Any requirements which are not met will be identified in your Requirements and Recommendations Report. This will include guidance from the assessor on what you will need to do to become compliant and the types of evidence practices will need to send in. This may include digital photographs, copies of documents or written confirmation of a change. It will also indicate a time frame for submissions to be made within, which will usually be within one month, three months or six months from receiving the report. It is mandatory that your practice provides such evidence within a certain period in order to
achieve accreditation. If practices have any issues with these time frames, they should inform the
PSS officers.

Assessors may also provide some recommendations which will help your practice improve and go
beyond the requirements of the scheme. These are not mandatory, and evidence will not need to be
submitted in order to achieve compliance.

**Reports Referred to Lead Assessor or Review Group**

Once a report has been received, the PSS officers will refer them to either the Lead Assessor or to
the Review Group.

Reports which are straightforward will be referred to the Lead Assessor.

Reports with queries from the assessor, with a high number of requirements, or from a re-assessment
will be sent to the Review Group for advice, and may take a little longer to process.

After approval from the Lead Assessor or Review Group, the report will be made available to your
practice.

**Submitting Evidence for PSS Accreditation**

Practices with requirements to meet must submit evidence before they can be made compliant.
Practices must submit evidence via Stanley and must not send it directly to the assessors.

Assessors will check the evidence and update the report, giving appropriate feedback where evidence
does not meet the requirements. Assessors are expected to check this within one week of receipt of
the evidence.

In some cases a re-assessment of the premises may be required. This may, for example, be due to
the original visit highlighting a large number of issues or if the practice needs to undergo
refurbishment/structural changes in order to comply with the Scheme requirements. A re-assessment
fee will be levied to cover the costs of the visit.

If your practice has any queries relating to evidence, please contact either the assessor or PSS
officers. If you wish to appeal against any evidence requirements, please contact the PSS officers
within 21 days and refer to the PSS rules for the full appeals procedure.

**Compliance Confirmed**

Once all the requirements for all premises in the group have been met, a practice is considered
compliant.

The RCVS welcomes feedback on the application/assessment process. Practices are therefore
required to complete the online feedback form following assessment before certificates will be issued.

All fees must be paid before accreditation is granted and before the premises’ entry on Find a Vet is
updated to display the accreditations achieved.
7. Awards Assessments
This section contains information relating to the optional Awards assessments. It provides guidance on the process both during and after an assessor’s visit.

During the Awards Assessment Visit
Awards assessments are entirely optional, and will be assessed separately to PSS accreditation levels (Core, GP, ESC and VH). The Awards focus on behaviours and outcomes, as opposed to facilities and equipment, thus are assessed in a different manner.

To gain an Award the practice must have achieved GP level in the appropriate modules, even if they are a Core practice. Core practices will be assessed for any extra GP requirements at same time as the Award assessment.

In order to achieve the points the practice must demonstrate the behaviour or action on the day of the assessment. Assessors will need to speak to the team members involved in the areas of your practice which contribute to the Award.

When assessing Awards, assessors will expect where relevant, to observe the normal activities taking place in your practice. Depending on the nature of the Award this may include observation of a surgical procedure, anaesthesia, consultation, in-patient care and waiting room/reception interaction with clients.

Each clause in a module has a points value e.g. 20 points. Practices can either score the whole 20 points or nothing. There are no points awarded if the practice is part way to fulfilling a clause.

It is expected that the practice will be able to demonstrate that the behaviours required to achieve the Awards are a recognised part of the culture of the practice and have been in place and implemented over time. It is unlikely that an Award will be granted where behaviours have been implemented for less than three months and cannot be evidenced as part of the routine for the practice.

As with the routine accreditation assessments, your practice should communicate any issues before, during or after the visit with the assessor. Remember that the assessor is there to help your practice improve and will be able to provide advice on queries you may have.

Outcome of Assessment
In order for a practice to be classed as ‘Good’ in an Award they must have achieved at least 60% of the available points in all modules within that Award. Likewise for a practice to be classed as ‘Outstanding’ in an Award they must have achieved at least 80% of the available points in all modules in that Award.

It is important to remember that no evidence can be submitted at a later date to gain points for an Award. Practices must be able to demonstrate the behaviours during the visit.

Assessors will indicate if the required behaviours have been demonstrated on the day and provide their feedback. A full report will made available via Stanley after the visit.

Successful Assessments
Once the assessor has confirmed which award you have achieved, the PSS officers will issue your certificate.
All fees must be paid before accreditation Awards are granted and before the premises’ entry on Find a Vet is updated to display the Awards achieved.

**Unsuccessful Assessments**
If practices do not achieve their anticipated level on the day they can apply for a re-assessment visit. They cannot do this until at least 3 months after the first visit in order to allow practices time to set up systems or change behaviours.

**The Assessment Cycle**
Practices can request to have an award assessment at any time and will be charged based upon assessor time, which will be charged at a minimum in half-day blocks plus travel time and expenses. Awards requested during years one to three of the routine assessment cycle will expire at the next routine assessment. Awards requested in year four of the routine assessment cycle, may be extended until the next but one routine assessment.

Some Modules contribute to more than one Award. If a practice has already achieved an award and wishes to apply for another Award which includes overlapping modules, as long as the second Award is being assessed within six months of the previous Award, then the overlapping Modules would not be reassessed. If, however, the subsequent Award is being assessed more than six months after the previous Award, then all the Modules would need to be reassessed. Moreover, if in the process one of the Modules was found to be of a lower standard than at the previous assessment, all relevant Awards would be affected. Thus a practice may have its earlier Award downgraded or removed.
8. Quality Control and Complaints

Quality Control
Under the new Scheme, a greater focus is being placed on quality control and consistency. The Lead Assessor monitors assessments and undertakes regular performance reviews of the Assessor team.

Assessors undertake professional training to ensure even higher standards and consistency. External professional advice has been sought to help train assessors in behavioural-based assessments.

If your practice has any questions or concerns, please contact the PSS Officers.

Complaints
If you encounter serious problems and need to complain at any point during the assessment process, please contact the PSS officers at the RCVS. The PSS team will try to help solve the issue and reach an amicable solution. If necessary, the PSS officers can contact a senior assessor for you to speak to and get advice. Please see the appeals procedure in the PSS rules for further information.

If a complaint is received alleging a practice has not complied with the Standards of the Scheme, the practice will be given the opportunity to comment before it is considered by the Review Group.

If in the course of an assessment assessors have concerns relating to a possible breach, they reserve the right to bring the matter to the attention of the Review Group or, where concerns relate to issues of professional conduct, to the RCVS Professional Conduct Department.

Practices agree to respond promptly to all requests for information and in respect of any complaints relating to the Scheme.
Frequently Asked Questions

Who do I contact with my question?
If you are not sure who is the best person to ask for help, please contact the PSS officers at the RCVS on 020 7202 0767.

What happens if a practice has a very high number of post-assessment requirements?
Practices with very high numbers of items requiring improvement are referred to the review group to decide on the best course of action. A re-assessment or spot check may be required at a later date to ensure the practice has solved the issues.

How long can a practice delay assessment visit for?
A practice can delay an assessment visit for a few months if they have a valid reason. This must be agreed by the PSS officers. The review group can grant a longer delay (e.g. due to major building works), although any practice delaying by more than 6 months may be subject to spot checks.

What happens if evidence is not submitted on time?
Practices who miss evidence deadlines are sent reminders until it is submitted. Extensions can be granted by the PSS officers when a practice has a particular issue.

What happens if my practice is taking too long to become compliant?
The PSS team is very patient with practices, and will keep working with them towards compliance for a considerable time, so long as the practice stays in touch. Practices who refuse to submit evidence or lose contact are eventually referred to review group for removal from the scheme. In this case the PSS officers will pass them back to the VMD for a medicines inspection, and request any PSS marketing material is removed.

How do I know my email has been received?
The PSS team will respond to all messages received, usually within three working days. Please note; the RCVS email server has a 10MB limit, so please ensure any attachments do not exceed this.

We recently acquired additional premises. What do we need to do?
Your practice may choose to have these premises assessed immediately (in which case an assessment fee, to cover costs, will be levied), or may ask for assessment of the premises to take place at your practice’s next four yearly assessment. Pending accreditation, the additional premises may not use the logo of the Scheme, or otherwise be promoted as an accredited premises.

We want to change our level of accreditation. What do we do?
If you wish to remove or downgrade an accreditation, simply inform the PSS officers. If you are looking to upgrade or add another accreditation before your four yearly assessment is due, another assessment visit will need to take place and a fee will be payable. Please contact the PSS officers to arrange this.

What are Main and Branch practice premises?
A practice must nominate one Principal practice premises. It may then have one or more Main practice premises associated with the Principal practice premises and also have any number of Branch practice premises associated with either the Principal or Main practice premises. Where a practice has administration offices at a separate location to its other practice premises please notify the PSS officers. When determining if a practice premises is a ‘Branch’ as opposed to a Main
premises, the Practice Standards Scheme will take into account factors such as shared staff, shared clinical governance, shared clerical services, shared out-of-hours and geographical location.

**Will practices in the old scheme need to be visited again under the new scheme?**
Practices will automatically migrate to the new Scheme at their current accreditation level, for example, General Practice – Small Animal. Routine assessment dates will not change under the new Scheme and practices do not need to delay or bring forward their routine assessment in order to be assessed for Awards.

**When can our practice apply for awards?**
Practices may apply to be assessed for optional Awards at anytime through Stanley.

**I cannot upload my documents to Stanley. What should I do?**
Please contact the PSS officers at the RCVS on 020 7202 0767.