

Standards Committee

Agenda for the meeting to be held on 11 June 2025 at 09:30 remotely

1.	Apologies for absence, declarations of interest. Minutes from the meeting of 9 April 2025	
2.	Matters for decision	
	a. Practice Standards Scheme	Papers attached
	i. General update – confidential annex	
	ii. New members – confidential	
	iii. Five-yearly review off PSS standards and awards – confidential	
3.	Matters for report	
	a. Disciplinary Committee Report	Paper in library
4.	Risk and equality	Oral update
5.	Any other business and date of next meeting on 16 Sept 2025	Oral update

Standards Committee 2024/2025

Chair:

Miss Linda Belton BVSc MRCVS

Vice Chair:

Dr Olivia Cook MRCVS

Members:

Dr Sinéad Bennett MRCVS

Professor Derek Bray

Ms Linda Ford

Professor Christopher Loughrey FRCVS

Dr Alice McLeish MRCVS

Dr Sue Paterson FRCVS

Mr Matthew Rendle RVN

Mr Tim Walker

Dr Will Wilkinson MRCVS

Summary

Meeting	Standards Committee
Date	9 April 2025
Title	Standards Committee Minutes
Summary	<p>Minutes of Standards Committee meeting held in person and remotely on Wednesday 9 April 2025, at 10:00am</p> <p>The Committee's attention is drawn to paragraphs 1 - 17 of the classified appendix.</p>
Attachments	Classified appendix
Author	<p>Ky Richardson</p> <p>Senior Standards and Advice Officer/Solicitor</p> <p>k.richardson@rcvs.org.uk / 0207 202 0757</p>

Classifications

Document	Classification ¹	Rationales ²
Minutes	Unclassified	n/a
Classified appendix	Confidential	1, 2 and 3

1Classifications explained

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

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Minutes of the Standards Committee meeting held in-person on Wednesday 9 April 2025 at 10am

Members:

- Linda Belton (Chair)
- Sinéad Bennett
- Derek Bray
- Olivia Cook (Vice Chair)
- Linda Ford
- Alice McLeish
- Christopher Loughrey
- Sue Paterson
- Matthew Rendle
- Tim Walker
- Will Wilkinson

In attendance:

RCVS	Lizzie Lockett	CEO
	Clare Paget	Registrar/Director of Legal Services
	Gemma Kingswell	Head of Legal Services (Standards)
	Beth Jinks	Standards and Advisory Lead
	Ky Richardson	Senior Standards and Advice Officer/Solicitor
	Annelise Samuels	Senior Standards and Advice Officer
	Hannah McGillan	Standards and Advice Officer
	Bri McLachlan	Standards and Advice Administrator

AI 1 Apologies for absence, declarations of interest, minutes of the meeting of 12 February 2025

1. Apologies were received from Christopher Loughrey. Alice McLeish did not attend.
2. Two new declarations of interest were made. Will Wilkinson has recently started a new fish/aquaculture practice and Matthew Rendle has been elected to the WSAVA One Health Committee.
3. Sue Paterson reminded the Committee of an existing conflict for AI 2(c) as she is a practising RCVS Specialist.
4. The minutes of the meeting of 12 February 2025 were agreed by the Committee.

Matters for decision

AI 2 (a) Reducing misuse of lethal medicines – confidential

5. The minutes of this agenda item can be found in the classified appendix at paragraphs 1 – 4.

AI 2 (b) Maintaining professional boundaries

6. The Committee was reminded of its discussions in 2024 in relation to introducing guidance around maintaining professional boundaries. This guidance would highlight the power imbalance between veterinary surgeons/nurses and clients without prohibiting personal relationships. It would also provide advice in relation to safeguarding clients and veterinary professionals and codify existing advice relating to prescribing for animals belonging to family or friends and associated conflicts of interest considerations. It was further explained that the Competition and Markets Authority (“CMA”) investigation has commented on the imbalance of power between veterinary surgeons/nurses and clients and so it is timely to be exploring guidance of this nature.
7. The Committee was directed to the relevant paper, which set out proposed new language based on the comments from the Committee’s previous discussion in this respect. The Committee was asked if this proposed new language achieved its aims.
8. The Committee made the following comments:
 - a. Consider referencing student veterinary surgeons/nurses in this guidance, as there is also an imbalance of power due to the status of these roles in the practice, e.g., they may feel more pressure due to concerns about future career development.
 - b. Relationships beyond friendship and romance should also be considered, for example, where there is vulnerability and/or psychological dependency. Veterinary professionals should be empowered to step away from client relationships if a client becomes overly dependent on them, for example.
 - c. Framing the guidance around the importance of safeguarding and encouraging veterinary surgeons/nurses to undertake training in this respect might be helpful.
 - d. It was suggested that not every occurrence of prescribing controlled drugs to animals of family members or friends would automatically raise a conflict of interest, therefore the guidance should highlight that veterinary surgeons should be mindful of the risk of real or perceived conflict of interest, with the expectation that they behave accordingly if a conflict exists (i.e., decline the client/prescription).
9. It was agreed that a final version of the proposed new language incorporating the above comments would be circulated to the Committee by email for approval. It is hoped that this can then be published in time to be included in the spring guidance update, due at the end of the month.

Action: Standards and Advisory Lead

AI 2 (c) Specialist guidance

10. It was explained that the Committee was being asked to approve the removal of the guidance recommending the use of 'having a special interest in...', from Chapter 23 of the supporting guidance, as an alternative way of promoting a service when a veterinary surgeon was not an RCVS recognised specialist.
11. This request was being made because this sentence was reported to be causing some confusion within the professions given how similar it was to 'specialising in...', which the professions were advised not to use unless a veterinary surgeon was an RCVS recognised specialist.
12. The Committee approved the request and agreed that 'having a special interest in...' should be treated the same way as 'specialising in...', i.e., both phrases should be reserved for RCVS recognised specialists. This approval was provided with the following comments:
 - a. It should be replaced with, 'having a particular interest in...'; and
 - b. It should be adequately publicised to the profession in the spring update.

Action: Senior Standards and Advice Officer/Solicitor

Matters for discussion

AI 3 (a) GEFS audit metrics report – confidential

13. The minutes of this agenda item can be found in the classified appendix at paragraphs 5 - 8.

AI 3 (b) Guidance on RVNs and anaesthesia

14. The Committee was asked to consider the proposed plan for amending the guidance relating to Chapter 18 of the supporting guidance in relation to inducing, maintaining, and monitoring anaesthesia by RVNs, SVN, and other suitably trained staff members.
15. The Committee agreed this area should be reviewed. A paper would therefore be presented to the Committee at a future meeting.

Action: Standards and Advisory Lead

AI 3 (c) Strategy plan – confidential

16. The minutes of this agenda item can be found in the classified appendix at paragraphs 9 - 15.

Matters to note

AI 4 (a) RESC subcommittee update

17. The Chair of the Riding Establishments Subcommittee (“RESC”), Linda Belton, provided an overview of the work of the RESC, which included the following:
 - a. The Animal Welfare (Licensing of Activities Involving Animals) (England) Regulations 2018 and Riding Establishments Acts 1964 and 1970 (the “REAs”) require that all riding establishments in England, Scotland, and Wales are licensed by the relevant local authority.
 - b. To be granted a licence, a riding establishment must first be satisfactorily inspected by a veterinary surgeon who is on the RCVS list of riding establishment inspectors.
 - c. The RESC is responsible for keeping and maintaining the list of riding establishments inspectors and all related activities, including but not limited to:
 - i. recruiting new inspectors;
 - ii. training new inspectors and those subjected to mandatory refresher training (every five years);
 - iii. drafting, publishing, and updating relevant guidelines, inspection forms, and other associated resources;
 - iv. auditing inspectors;
 - v. producing a yearly informative newsletter for inspectors called REIN; and
 - vi. hosting an Annual Meeting open to external stakeholders, to encourage industry-wide collaboration.
18. The Chair noted that each local authority was structured differently and so working well across the board was challenging but efforts were ongoing to improve these collaborative relationships.
19. The Chair went on to briefly outline the yearly training designed and delivered by the RESC. The training was comprehensive and made up of a webinar series (mandatory for all), an in-person course day (mandatory for new applicants/optional to refreshers), and Q&A sessions (mandatory for refreshers).
20. The Chair then summarised recent topical matters, as follows:
 - a. Inspectors were audited by the RESC, but the guidelines did not currently contain the necessary mechanism to remove an inspector if they were not up to standard – a new removal mechanism was currently being drafted to remedy this situation.
 - b. The RESC was currently considering equine welfare through the lens of the perception of the industry, which was always evolving, particularly in relation to social licensing and horse involvement in sports, as well rider/horse weight ratios. The

RESC was being proactive in having these conversations, which were sensitive and difficult at times.

- c. The RESC was currently engaged in conversations around equine ID as there were lots of things happening in this area. It was an area to watch.
21. The Chair noted that the RESC currently only included one RCVS Council member, herself. This provided this Committee with access to experts in their field - all RESC members were active inspectors and were very skilled and knowledgeable.
22. The Committee asked several related questions, all of which were answered by the Chair of the RESC, as follows:
- a. It appears that there were enough inspectors to do the relevant work, which was great to hear but the same could not be said for breeding/boarded establishments and dangerous animal/pet shop inspections. There was a shortage of veterinary surgeons willing or able to do this work. Did inspectors perhaps have transferable skills in this respect, and could we do more to raise awareness of the shortage? *The Chair agreed that this question could be put to the RESC to gauge interest in assisting with this work and/or in developing standardised forms in a similar manner to that for Riding Establishments – on the basis that lack of access to forms that were compliant with the 10 Principles of Certification had been reported as one barrier to veterinary surgeons providing this service in relation to other licensed establishments.*
 - b. The Committee commented that the work around standardised forms was a great example of quality support provided by the College, which saved veterinary surgeons from having to worry about this aspect of their work.
 - c. Was the role of the inspector advertised to undergraduate student vets? *The Chair explained that a project was underway in collaboration with the British Equine Veterinary Association (BEVA) in relation to spreading the word to students (although they did have to have five years' post-qualification experience (PQE) to qualify as an inspector), as well as graduates up to five years PQE.*

Action: Chair of RESC/RESC secretary

Matters for report

AI 5 (a) Disciplinary Committee Report

23. The report was noted.

AI 6 Risk and equality

24. No risks were reported.

AI 7 Any other business and date of next meeting

The Certification subcommittee

25. The minutes of this agenda item can be found in the classified appendix at paragraphs 16 - 17.

The RSPCA

26. The Committee agreed to review the recent RSPCA wildlife toolkit with a view to sharing it as a resource. Feedback and gratitude, particularly in relation being proactive about providing this kind of guidance and support, would be provided by the Committee to the RSPCA following the review.

Action: Head of Legal Services (Standards)

27. The next meeting will be 11 June 2025.

Table of actions

Paragraph	Action	Responsibility
9.	Circulate a final version of the proposed new language relating to professional boundaries, incorporating Committee comments by email, for approval.	Standards and Advisory Lead
12.	Amend guidance relating to specialist in Chapter 23 of the supporting guidance, incorporating Committee comments.	Senior Standards and Advice Officer/Solicitor
15.	Consider Committee's provisional comments when drafting relevant paper.	Standards and Advisory Lead
22.	Guage interest from the RESC (prior to inspectors more broadly) about assisting with developing standardised forms for other establishment inspections and promoting the work to the inspectorate from a transferrable skills perspective.	RESC Chair/Secretary
26.	Provide feedback to the RSPCA on behalf of the Committee following its review.	Head of Legal Services (Standards)

Summary

Meeting	Standards Committee
Date	11 June 2025
Title	Practice Standards Scheme - General Update
Summary	An update on the Practice Standards Scheme (PSS)
Decisions required	No decisions required – For information only.
Attachments	Annex A - PSG Minutes 29 January 2025 Annex B - PSG Minutes 29 January 2025 (Classified)
Authors	Sarah Iddon Head of Legal Services- PSS s.iddon@rcvs.org.uk

Classifications

Document	Classification ¹	Rationales ²
Paper	Unclassified	n/a
PSG Minutes 29 January 2025	Unclassified	n/a
PSG Confidential Minutes 29 January 2025	Confidential	Confidential

¹Classifications explained

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An Update on the Practice Standards Scheme

Practice Standards Group (PSG) meetings

1. PSG last met on 30 April 2025. The minutes from this meeting are yet to be ratified. The minutes relating to the previous PSG meeting, held on 29 January 2025, are attached at **Annex A** and **B**.

PSS update

2. The PSG meeting scheduled for 17 March 2025 was cancelled as more time was needed to collate the thinking and discussions from the last round of Working Groups on the Review of Standards work.
3. Seven full day meetings were held by each of the seven Working Groups during February and March to discuss and update the latest version of 'one core'; consider the two awards, Client services and the new ICU award; and consider in more detail how risk would be attributed and escalated as part of the assessment model.
4. Input into the 'one core' for the five yearly review of Standards is still required from the final stakeholders: HSE, Standards and Advice, Pig and Poultry.
5. PSS has been working with the RCVS IT department to begin to specify the changes that may need to be made to Stanley system as a result of the five-yearly review of Standards work to ensure that the timetables align. This is ongoing while discussion and decisions are being made about the framework and assessment model.
6. The communications plan is being developed with the RCVS Communications team to assist with how the Review will be communicated and presented to the profession and PSS members in 2026.
7. A new PSS Officer joined team in March 2025, to back fill a vacant position and to support the South Region.
8. A PSS Liaison Officer has been recruited and will start in June to provide administrative support to the team. This is a new role.
9. Further recruitment is underway a PSS Data and Monitoring Officer to support the PSS Team in providing data support and reports.
10. The Team will received communications training in May 2025 by VDS to ensure that the team are equipped to handle the types of situations encountered within the Team.
11. PSS continues to work with the VMD to develop training and targeted materials to address the top three common deficiencies. A blog has been developed and is now available on RCVS website/ PSS pages for practices to access. Work has begun on the next areas

Prescriptions and Storage, and these will be made available shortly.

[PSS training and resources - Professionals](#)

[Controlled drugs in veterinary practice: A VMD inspector's top tips – Veterinary Medicines Directorate](#)

12. VMD and Review Group members have been recording videos for internal training purposes on Medicines queries that have been escalated to Review Group recently - this is to align the messaging of PSS and the VMD inspectors.
13. The team requires more resource to meet current demand levels, and this is being discussed internally.

Scheme figures

14. Scheme membership – The number of practices that are members of the Practice Standards Scheme has reduced by 1% since January 2025.
15. New joiners - The number of total new joiners to the Scheme, since January 2025 (Q1) is 21.
16. Closures - The number of PSS premises closures in Q1 2025 was 47. Of those, 3 moved premises (and 2 have since rejoined), 7 premises merged with another PSS premises, 13 premises closed due to staffing issues, 8 premises closed due to loss of client / money issues and 16 did not give a reason for their closure.
17. Performance – The number of assessments has increased slightly over the last two years from 275 assessment in Q1 of 2023 to 305 in Q1 of 2025. The explanation in the increase in Q1 of 2025 is to meet current demand levels. The internal resource has been increased to match. The new average per quarter over the last two years has risen to 252 assessments per quarter. The number of assessments carried out in Q1 2025 was 305.
18. Accreditations - The number of accreditations held decreased slightly from 4,169 at the end of October 2024 and from 4,160 the end of 2024, to 4,154 by the end of March 2025. This is to be expected when viewed with the number of closures to date in Q1 2025 (47).
19. Awards achieved have also decreased again, from 11 in January 2025 to 4 achieved at the beginning of April 2025. This is mainly due to less demand as practices continue to focus on their routine accreditations. There are 165 practice premises that currently hold Awards. This has dropped again slightly from 173 in January 2025 and represents 3% of the April 2025 membership figures and 5% of the number of accreditations held. Only practise premises that hold an accreditation can apply and hold an award. The top three awards remain as:
 - i. Client Services– Small Animal,
 - ii. Team & Professional Responsibility - Small Animal
 - iii. In Patient Service - Small Animal.

20. Candidates - The current number of 'candidates' as of 2 April 2025 is 207, a reduction since January 2025, when 215 were reported. This is the number of practices either waiting for the first assessment (as they are a brand-new practice that has joined the Scheme or are an acquisition that requires a new assessment) or has had their first assessment and is not yet compliant within PSS. This figure is relevant as it has an impact in the Accreditations figures and non-compliance figures. Candidates do not pay annual fees until they are accredited/ compliant. PSS Rules set out that that new practices are to be assessed within six months, and within 12 months for an acquisition.
21. Non-compliance - This rule was introduced in January 2024. We anticipate that the number of non-compliant practices not achieving at least Core accreditation within 12 months from the date of their last assessment will continue to fall as practices begin to understand the stricter approach to compliance that PSS is taking to uphold the integrity of the scheme. For 2024, there was a total of 106 non-compliant practices that required a re-start assessment. In Q1 2025 there are 19 and in Q2 there are 6.
22. Top 10 deficiencies – medicines and non-medicines: for Q1 2025 based on 345 assessments.
23. For non-VMR deficiencies, it appears that there are issues with PAT testing across all species. Farm Animal have issues with consent and Equine have issues with PPE. Small Animal has issues with premises being in good decorative order, clean and well maintained and Equine still have RPA and related issues, which are all areas for us to target improvements.
24. For VMR related deficiencies there is quite a lot of commonalities across all species and the areas to target here might be monitoring / recording of temperatures, anything related to Controlled Drugs and protocols for handling cytotoxics/ hormones and drugs used under cascade.
25. Feedback survey - After each PSS assessment, a survey is sent to the practice premises to gain feedback on the process, to identify any areas that require improvement. Overall, the feedback is very positive and continues to improve. From 1016 responses provided it shows practices are very satisfied with the Scheme and service provided:
 - the PSS standards with 4.5 out of 5,
 - the online system 3 out of 5,
 - the service 4.5 out of 5, and
 - the Scheme in general 4.5 out of 5
26. The notable areas for improvement, are primarily aimed at the online system 'Stanley' and the amount of preparation work required for practices which are being addressed as part of the five-yearly review of the standards.

END OF PAPER.

Summary	
Meeting	Practice Standards Group
Date	29 January 2025
Title	Minutes of meeting
Summary	Minutes of the Practice Standards Group meeting held on 29 January 2025
Attachments	Annex A – PSG Actions updated Confidential appendix
Author	Amanda Radford PSS Senior Officer a.radford@rcvs.org.uk / +442072020753 Sarah Iddon Head of Legal Services - PSS s.iddon@rcvs.org.uk / T +442081485561

Classifications		
Document	Classification¹	Rationales²
Minutes	Unclassified	n/a
Classified appendix	Confidential	1, 3
Annex A	Unclassified	n/a

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Practice Standards Group

Minutes of the meeting held on Wednesday, 29 January 2025

Members:

Belinda Andrews-Jones	Chair & VN Council
Adam Mugford	BAVECC
*Andrew Parker	SPVS
Lyndsay Huges	BVNA
Tim Mair	BEVA
Jim Hughes	BSAVA
*Anna Judson	BVA
*Stuart Saunders	VMG
James Adams	BCVA
*Holly Witchell	VN Council
**Bob Partridge	BVHA
Carol Westrop	Lay member

**Denotes absence*

*** part of meeting*

In attendance

Sarah Iddon	RCVS Head of Legal Services – Practice Standards Scheme (HoLS – PSS)
Alice Duvernois	PSS Lead Assessor (PSS LA)
Amanda Radford	PSS Senior Officer
Ashley R Doorly	RCVS Knowledge
Pam Mosedale	RCVS Knowledge
Anne Lawson	PSS Assessor

Welcome and introductions

1. The Chair welcomed everyone, and Carol Westrop introduced herself as the new Lay Member.
2. Pam Mosedale and Ashley Doorly from RCVS Knowledge joined the meeting as guests as they had provided some input into the Review.

Apologies for absence

3. Apologies for absence were received from Andrew Parker (SPVS).

Declarations of interest

4. Adam Mugford (BAVECC) confirmed that he is an honoree lecturer at the Royal Veterinary College.
5. The Chair reminded the Group to complete and return the declarations of interest forms which can be obtained from HoLS-PSS.

Minutes and actions of previous meeting

6. The minutes and actions of the meeting in October 2024 were approved by the Group.

Practice Standards Scheme (PSS) Update

Scheme Update

7. HoLS-PSS updated the Group following the last Standards Committee meeting on 3 December 2024. Standards Committee agreed with all suggested recommendations put forward by PSG (as summarised below) and were generally pleased with the direction and progress being made with the Review.
 - a. That there be one Core across all three species, with species specific elements at the end of each module.
 - b. A risk-based approach to assessing Core is applied according to three priority levels.
 - c. The presentation principles (as set out in the paper for PSG and subsequently to Standards Committee) to aid the PSS team in the drafting of the updated Standards; and,
 - d. A deeper review of PSS Awards should take place after the review of the Standards.
8. HoLS-PSS confirmed that PSS Assessors had considered and provided their input to the 'one Core' in December 2024 and some of their recommendations had been incorporated.
9. HoLS-PSS confirmed to the Group that RCVS Knowledge had made suggestions relating to the new 'one Core' Standards which had been incorporated into the latest version.
10. HoLS-PSS confirmed that other organisations (HSE, Standards and Advice, Pig and Poultry, and the Association of Veterinary Anesthetists (AVA) had been contacted for their input but had not yet responded.
11. RCVS IT department had been contacted to begin to specify the changes that may need to be made to Stanley system. HoLS-PSS confirmed that a specification was being put together which would be shared with the Group at the next meeting.

Action: HoLS-PSS to present Stanley IT Specification at the next meeting.

12. HoLS-PSS stated that two new assessors had been recruited (replacing two departing assessors) and will join the South Region and start their training in February with a view to assessing solo in Q2 2025.

PSS were in the process of recruiting a further Officer to support the South Region to 'back-fill' this position as the Officer was successfully recruited into the role of Lead Officer in September 2024.

13. The new Registrar had been announced by RCVS and will join at the end of March 2025.
14. HoLS-PSS confirmed that training is planned for assessors on mental health in February and VDS training later in the year.
15. Shadowing continues with the VMD inspectors and the PSS Assessors which had proved successful to ensure we are aligned with medicines inspections.
16. HoLS-PSS provided some details on the closures figures that are routinely presented to the Group as part of the Scheme figures paper. The Group has asked at its October PSG meeting for more information on the reasons for the closures to understand if practices were leaving the Scheme because they no longer wished to be a part of it or because the practice had closed to the public. In 2024 there were a total of 158 closures, of which 47 rejoined, concluding that these were acquisitions. 16 practice premises had not rejoined. 95 were permanent closures. The HoLS-PSS agreed to provide more information on the 16 practice premises that had not rejoined the Scheme and report back to the Group at the next meeting.

Action: PSS to investigate the 16 closures to try to discover the reasons why they have not rejoined the Scheme and report back at the next meeting.
17. HoLS-PSS confirmed that the team had continued to plan and book assessments ahead of time to ensure preparation times for practices were optimized. Practices were notified and assessment dates arranged for those due in Q1 and Q2. Q3 practices will be notified around March time and Q4 in June 2025. PSS reported it was therefore two quarters ahead with its assessment planning and this has helped to reduce delay requests.
18. The Group were advised by HoLS- PSS that changes to the Guidance notes at SA 10.1.20, Farm 8.1.20, EQ 9.1.20 were made to the labelling of POMVs to help with the difficulties in the farm sector in complying with RCVS guidance on mutual clients. The changes mean that details of the prescribing vet (in addition to the supplying vet) be included on the label of prescribed medicines (as is the case with cascade meds) to help vets to identify other vets involved in the care and mean they are able to comply with their obligation to share relevant clinical info (or raise a concern if the other vet is not cooperating). This change was approved by Standards Committee in September 2024 and the VMD.
19. It was asked by the Group if it was common that changes already approved by Standards Committee can bypass PSG for comment and discussion. The HoLS-PSS confirmed that PSG is a subgroup of Standards Committee and there are instances where decisions are made within Standards Committee that require implementation by PSS. PSG would be informed of the changes and if objections were raised these could be fed back to Standards Committee.
20. HoLS-PSS raised that as a result of two suicides using veterinary medicines and the respective Coroners' Offices asking (Regulation 28 Report to prevent future death) for more preventative measures to be put in place, RCVS has suggested a new specific Standard be implement at Core level to require practices within PSS to have an individualised suicide prevention plan in place to ensure safeguarding measures to prevent incidents and protect staff. HoLS-PSS confirmed that the details and any changes will be shared with PSG by way of an update.

21. It was raised by the Group that PSG would require sight of any recommended changes before implementation otherwise it could be considered that the organisations that make up PSG are in full support of any changes. The HoLS-PSS confirmed that it is likely to be a new Standard requiring practices to put in place a suicide prevention plan having carried out a risk assessment to ensure that practices have robust processes in place to protect staff. The HoLS-PSS agreed to provide an update and share any recommended changes with PSG at its next meeting.

Action: HoLS-PSS to provide an update on any recommendations or decisions to implement changes to the Standards or guidance around suicide prevention, at the next meeting.

22. RCVS Knowledge asked the Group if anyone had any questions or comments on the suggested changes put forward by RCVS Knowledge. HoLS-PSS reconfirmed that the suggested additions from RCVS Knowledge had been implemented into the 'one Core' and the document is currently with the Groups' respective organisations for comment.

Scheme figures update

23. HoLS-PSS presented the Scheme figures. The number of practices that were members of the Practice Standards Scheme remained at 66% of all UK eligible practices stating that the figure is generally somewhere between 65% and 70%. Typically, the percentage may fall due to the increase in closures at the beginning of the year, before Annual Fee Invoices are issued. However, the number of new joiners for 2024 had again slightly increased to 124 from 116 the previous year.
24. HoLS-PSS provided more details regarding practice closures, explaining that the market share of the six largest organisations had fallen to 48%, with 34% of practices being non-PSS and 18% being all other PSS practices. IVC still had the majority of practices in the Scheme and Linnaeus the lowest. In addition, there has been an increase in the size of some small organisations such as DNA Vet Care and Dogs Trust.
25. The number of practices by species showed that small animals remain the largest species group with 52%.
26. HoLS-PSS stated that assessment figures for Q4 2024 had increased and represented the typical assessment delivery level compared to the decrease seen in Q2 of 2024, which was due to the restructuring of the internal team. The aim in 2025 was to carry out an average of 250 assessments per quarter, but figures for 2024 (Q1 320, Q3 212 and Q4 284) showed that PSS were delivering slightly below average for the year.
27. PSS were planning to deliver more assessments in 2025 with a target of 1400 assessments for the year. The Group were assured that the team are resourced and able to deliver more assessments to meet the growing need.
28. Accreditations remained steady and there has been a slight reduction in Candidates (practices waiting to receive their first assessment either as a new practice joining the scheme or as a result of an acquisition) which is an improvement as it means the team are assessing those practices that come on to the Scheme more quickly than had be the case previously.
29. There has been improvement in non-compliant practices in the Scheme. The 12-month Rule came into effect in January 2024. This is where practices that are not accredited within 12 months from the

date of their assessment are re-started. Initially there were very high figures with some 400 practices before launch of this Rule. This was reduced to 106 by the end of 2024. This is an achievement for the whole team.

30. HoLS-PSS shared that feedback from practices demonstrates that practices are encouraged by having clear parameters around expectations as it gives practices something to work towards to ensure that they are focused on the process. The 12 -month Rule has been well received by the profession.
31. HoLS-PSS led the discussion on the Deficiencies Data and confirmed that PSS are working closely with the VMD to produce material to target those top 10 most common deficiencies.
32. The issue of not be able to achieve Hospital status was raised regarding dentistry equipment and specialist referral practices, as examples. The PSS LA stated that this was something the Working Groups would have to consider. It was pointed out that there is VHSA without dentistry, but problems arise particularly with Referral and Specialist practices that concentrate on one area and therefore cannot achieve Hospital status. It was also pointed out that there was an issue with practices not being able to achieve GP status because of dentistry too. It was noted that it has been known that practices buy equipment to meet the requirement and therefore meet GP status.
33. PSS LA stated that PSS was unable to rectify this restriction and general flaw in the current model unless the Scheme allowed for exemptions or a change in the PSS model.
34. It was raised by the Group that trends in deficiencies should be communicated to the profession. HoLS-PSS confirmed that this area was being given some initial thought as part of the Review of Standards and its communications plan. It was mentioned that there used to be a newsletter and this stopped some time ago.
35. It was stated that a lot more could be done to showcase what PSS were seeing in terms of trends and what it was doing to tackle the deficiencies.

Action: HoLS-PSS to consider as part of the Communications plan how PSS can report more widely on trends and actions to tackle deficiencies, such as a regular newsletter.

Matters for Discussion and Decision

Five-yearly review of the Standards – update

36. This information is available in the classified appendix.

Matters Arising

37. There were no matters arising.

Risk and Equality

38. There were no new items to add to the Risk Register.

Dates of the next meetings

17th March – 2-4pm (if needed)

30^h April – 10-12pm

17 July – 10 -12pm

[8 September – if needed re five-yearly review of Standards] – 10-12pm

8 October – 10-12pm

[Any other business](#)

39. PSS LA raised with the Group the need to be more explicit in the Standards and PSS Rules for practices contracting out their out-of-hour (OOH) service provision to ensure that practices contract with practices at the equivalent accreditation level. The Chair advised that this should be discussed at the next meeting.

Action: Requirements for OOH to be discussed at next meeting

[Close.](#)

