Visitation to the University of Central Lancashire

14 December 2017

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

Contents

List of Visitors

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RCVS Qualifications Manager

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Industry expert

Ms Lauren Moore
Student representative

Key Staff met

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Director of Academic Development

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HE Assistant Head of School / Course Tutor for BSc (Hons) VN top-up degrees – full and part-time / Module Tutor on all programmes

Summary of the Visitors' findings

- The report is presented to the RCVS following the re-validation event for the UCLan/ Myerscough College licence to practise qualification.

- The Visitors received a warm welcome from the staff and are grateful to all those who were responsible for preparing the self-evaluation report, arranging the schedule and providing supplementary information when requested. The enthusiasm, commitment and pride of staff in what they do made it an interesting and enjoyable visit.

The team found the following:

- The University of Central Lancashire is to be **commended** for its ongoing and strong commitment to the continuation of Veterinary Nurse Education.

- The University Centre (Myerscough College) has in place guides, policies and procedures relating to development and moderation of assessment materials. These are designed for use by staff and, where appropriate, students.

- The University Centre (Myerscough College) is to be **commended** for its financial investment in the Veterinary Nursing Teaching Suite.

- Where possible, the use of a range of teaching approaches is evident. The Course Programme Team is formed of a number of individuals who contribute towards delivery of the FdSc programme and provide a wealth of subject expertise and enthusiasm. A number of members of this team are Registered Veterinary Nurses, helping to promote the profession and act as role models to students.

- Monitoring of performance is good, with excellent support networks and resources in place to help low achieving students to succeed.

Standard 3 – Qualification design and delivery

Suggestions

a. Attention should be given to ensuring that the RCVS Day One Competences for Veterinary Nurses and RCVS Day One Skills for Veterinary Nurses are referenced in each module specification and student course handbook.

Actions

a. The University must ensure that documentation contains correct references to the correct modules, and removes ambiguity from the presence of the accreditation of prior experiential learning (APEL) modules in the paperwork.

b. Reference to LANTRA Veterinary Nursing National Occupational Standards must be removed from relevant documentation, including the VN Course Student Handbook. Appropriate reference should be made to the RCVS VN Registration Rules, RCVS Day One Competences (DOC) for Veterinary Nurses and RCVS Day One Skills (DOS) for Veterinary Nurses.

c. In order to comply with the QAA Veterinary Nursing Benchmarks, there should be reference to horse husbandry and nursing care of equines included in the programme.

d. Notional credits awarded for completion of placement needs to be clearly explained in the relevant module documentation and course materials.

e. Provide the RCVS with the raw data from the market research which supports the placement model.

f. The University must forward the written protocol for support of students during their placement time.

g. The University must forward information on how marks are distributed for each examination question.

Standard 4 – Qualification quality management

Actions

a. Forward to RCVS the missing QAA and HEFCE documentation.

b. Forward to RCVS the 'Myerscough Student Admission Policy'.

c. Provide a list of staff and their full job role, including any quality assurance tasks.

d. Forward to RCVS the training materials for the clinical coaches.

e. Forward to RCVS the CPD for the External Examiner along with CPD for the HE Assistant Head of School and Head of Area as the moderators for the VN FdSc.

f. Confirm how the ongoing suitability of the external examiner is managed annually.

g. Confirm to the RCVS that all students within the 2017 cohort have placements.

Standard 5 – Assessment

Suggestions

a. Use a recognised validation framework when gathering and reviewing evidence to confirm the validity of assessments and examinations.

b. Consider use of Bloom's taxonomy and verbs relevant to the level of study when formulating learning outcomes.

c. Include reference to the RCVS DOC and DOS for veterinary nurses in the APL policy.

Actions

a. The University must provide details of how the written examinations pass mark differentiates between those who are competent and those who are not.

b. For the MCQ and OSCE, the university must provide information about what item and test level analysis is carried out to gain an insight into item and test difficulty; index discrimination and performance of distractors, etc.

c. The university must have mechanisms in place to prevent students progressing into the third year if they have not passed all assessment elements within the first year.

d. Module information packs to be checked for accuracy and completeness. For example, p8 VN2029 had missing assessment guidance and p10/11 of VN2027 had a partially complete assessment criteria rubric. These must be sent to the RCVS.

e. The university to review their use of the JCQ guidance to ensure that the processes described within them, such as the security and confidentiality of examination materials, are suitable to use for the programmes they deliver. If this is not the case, they must provide their own documents to the RCVS for review.

f. The university to provide a written policy on examination security including the safe storage and transport of both paper based and electronic examination material.

g. The OSCE Examiner Handbook must answer the following:
   - Page 3 – what is the consequence to students who do not meet the criteria listed under the "attire" section?
   - Page 10 – who decides which tasks will be used? What mechanisms are used to pair the examiner with the task?
   - When will each examiner liaise with the member of staff responsible for delivery of the OSCE?
   - How will the examiner know how much equipment is required? Are they responsible for ordering the consumables? When will this be done?
   - Who operates the timing system?
   - On a number of occasions the examiners are told that they'*may say …...'* 'to the candidate.   To keep the exam consistent this should be changed to '*must say…'*.
   - In the section 'after the exam' page 13 it talks about examiners entering marks onto the Angoff spreadsheets. It is not clear what this means. Is there further guidance available? If so, could it be included here?
   - What happens to the examiner station feedback?
   - How are examiners selected? What training and standardisation mechanisms are used?
   - Who are the assistant examiners and moderators? What is their role?
   - It was unclear what happens to the exam papers after the exam. What kind of analysis to ensure validity and reliability is undertaken?
   - What is the global score used for?

h. Provide a plan showing how the assessment team will identify the areas of the Day One Skills that can feasibly be examined using an OSCE. This should then be used to develop OSCE stations which assess current techniques and methods in a format suitable for use in a level 5 examination. A schedule outlining the timeline for this development must be provided.

i. Submit details of the OSCE examination blueprint ensuring that the test content maps across the learning objectives/Day One Skills.

j. Provide details of the process that the assessment team went through to determine that the low pass rate in the OSCE is related to student issues as opposed to other factors such as OSCE station design, teaching issues or examiners expecting different standards.

Standard 6 – Centre approval and quality assurance

Actions

a. The University must supply evidence of Centre Standards monitoring at Myerscough College for 2016/17.

b. Provide evidence of the mechanism in place that will ensure the University annually performs checks on TPs against RCVS TP Standards.

c. The University must provide an up to date MoU between UCLan and Myerscough College to the RCVS to include regulatory obligations.

Standard 1 – Organisation

> **A senior member of AO or HEI staff (the official correspondent) responsible for the overall delivery of RCVS-approved licence to practise qualifications, in veterinary nursing, must be designated.**
>
> **Details of the location(s) at which the qualification is to be administered must be provided.**
>
> **Licence to practise qualifications must be accredited by a UK University/HEI or by an AO recognised by the UK national regulatory authorities.**
>
> **Applications must be made by the principal or chief executive of the AO or HEI.**

1.1.   The licence to practise qualification is administered across two sites:
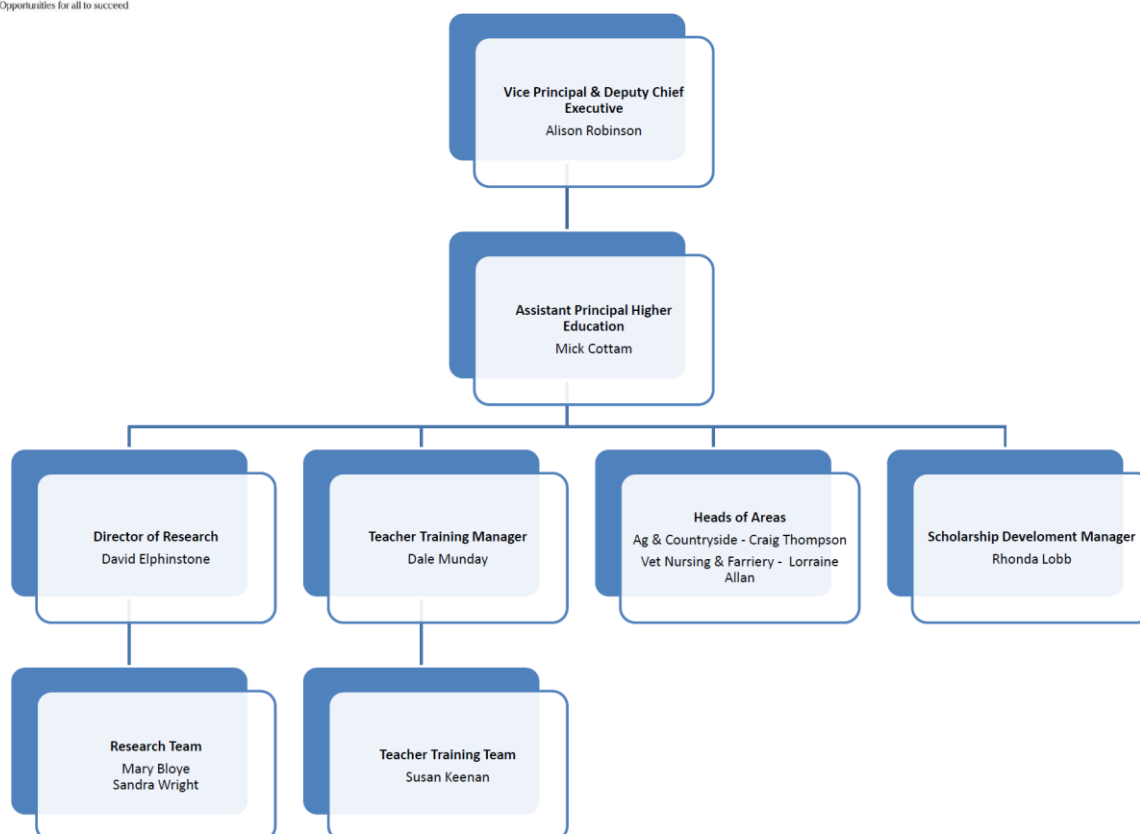
The University of Central Lancashire:
Flyde Road
Preston
PR1 2HE
Tel: 01772 201201

Myerscough College:
St Michaels Road
Preston
PR3 0RY
Tel: 01995 640611; Fax: 01995 642333

1.2.   The completed application has been submitted by Lyndsey McPhail, UCLan Principal Lecturer and Divisional Leader, in her role as the official correspondent to RCVS in relation to the licence to practise qualification.

1.3.   The regulatory authorities are noted as the Higher Education Funding Council for England (HEFCE) and the Quality Assurance Agency for Higher Education (QAA)

Myerscough College
Opportunities for all to succeed

1.7.   The school is currently part of the University of Central Lancashire's (UCLan) partnership provision. While UCLan award and quality assure the qualification, Myerscough College supplies the niche vocational veterinary nursing expertise and resources.

1.8.   The University and College enjoy a close working relationship in the provision of the suite of veterinary nursing qualifications.

1.9.   UCLan and Myerscough College not only provide the Licence to Practise qualification, but also a veterinary nursing top up degree and the RCVS Diploma in Advanced Veterinary Nursing.

Suggestions

None

Actions

None

Standard 2 – Sustainability

> **Finances must be demonstrably adequate to sustain the educational programmes.**
>
> **AOs and HEIs must be able to demonstrate that the delivery of the proposed qualification is cost effective.**
>
> **AOs and HEIs must demonstrate that there is a sufficient need for all new qualification(s).**

2.1 There are 60 students forecast for academic year 2018/19, across two cohorts, according to the *HE Course Costing Model.* The contribution to the partner college would be £599,610. The foundation degree charges students £9,250 per academic year, with £1,500 for the placement year. The financial statements confirmed the Centre made a surplus in 2016.

Table 2.1: Myerscough Budgetary Forecast and Maintenance

TOTAL Guided Learning Hours (whole study programme excluding placement hrs)	2400
Forecast Student Numbers	60
Cohorts	2
Tuition Fee Per Student - See Table 2.1.1	£20,000
Income Details	
Total Grant Income	
Tuition Fee Income	£1,200,000
Other Funds	
Total Income	**£1,200,000**
Cost Details	

Delivery Hours Per Cohort	Cost per Hour (inc. On-Costs)		Total
Instructors		£23.74	
Placement Officer	6,660	£22.42	£149,326
Coach		£33.67	
Lecturer	1,856	£55.31	est 2 cohorts	£205,295
Senior Lecturer / Asst Head / ATP	266	£106.14	est 2 cohorts	£56,469
Other		20.00	

Total Pay	**£411,090**	
Course Materials	£4,500	
Travel Costs	Ave 100 miles * 2 visits + accommodation + subsistence	£9,300
Awarding Body Registration / Exam Fee	£3,000	
Building maintenance	£6,000	
Equipment maintenance	£7,500	
Consumables	£6,000	
Maintaining animal collections	£3,000	
UCLan accreditation fees	£150,000	
Total Non-Pay	**£189,300**	
Contribution	**50%**	**£599,610**

towards College overheads - utilities / admin / management / marketing / insurance etc

Table 2.1.1: Tuition fees

Foundation Degree = £9,250

Honours Degree = £9,250

Sandwich = £1,500

2.2.   The panel acknowledges that the University has a well-established programme that has been running since 2000.

2.3.   At this time, finances appear to be adequate to sustain the educational programme and currently there is evidence of a good relationship between the University and the Centre (delivery site).

Suggestions

None

Actions

None

Standard 3 – Qualification design and delivery

Licence to practise qualifications must address the RCVS Day One Competences for Veterinary Nurses and RCVS Day One Skills for Veterinary Nurses and, in the case of HE programmes, relevant benchmark statements.

Licence to practise qualifications must contain the minimum Guided Learning Hours (GLH) as defined by the body entrusted for setting GLH for your sector. Prior to registration students must complete 2,990 hours in duration, actively engaged in training (GLH and clinical placement), excluding annual leave and absence.

Programmes of study delivered by Centres must incorporate a minimum of 1,800 hours of clinical work experience, to be gained in a veterinary practice registered with the RCVS as a Training Practice (TP) or an Auxiliary Training Practice (aTP). This must be in addition to the GLH as set by the relevant bodies. It is the AO/HEIs responsibility to ensure these requirements are being met.

Work-based learning requirements must articulate with the RCVS Day One Skills for Veterinary Nurses and be recorded and assessed in a format that is readily auditable and accessible to students, clinical supervisors and quality assurance personnel.

Methods of summative assessment must be detailed within the modules. Assessments need to be valid and reliable and comprise a variety of approaches. Direct assessment of RCVS Day One Skills for Veterinary Nurses must form a significant component of the overall process of assessment.

3.1.   All modules are mapped to the RCVS Day One Competences for Veterinary Nurses (DOC) and the RCVS Day One Skills for Veterinary Nurses (DOS) along with the Veterinary Nursing Benchmarks. There were discrepancies between the module names and codes and assessment elements shown in the student handbook and programme specification. The number of modules cited in the 'course structure delivery and assessment' and the 'VN module descriptors' did not match. This was because some modules were created specifically for recognition of APEL module equivalents for the purposes of topping up.

3.2.   In order to comply with the QAA Veterinary Nursing Benchmarks, there should be reference to horse husbandry and nursing care (to demonstrate students' knowledge and competence) as per the QAA statement 3.3:

'Additionally they will also have at least a basic level of knowledge and competence in the husbandry and nursing care of the following:

- *Horses*
- *endemic UK wildlife*
- *exotic species not commonly seen in the UK'*

3.3.   The DOC and DOS were not referred to within the module specifications, which does not allow full transparency to the students.

3.4.   The programme is compliant with the RCVS Veterinary Nurse Registration Rules 2017.

3.5.   The bulk of clinical placement is scheduled as a 32 week block in year two. However, the 'Veterinary Nursing Placement' module explains that this 32 week block is held 'between years 1 and 2'. This contradicts the plan in the 'FdSc course assessment and structure' document, which has a diagram depicting year two as a block placement of 32 weeks, with 10 weeks   of placement in years 1 and 3.

3.6.   The 32 week placement carries a notional credit weighting of 120 credits, which does not count towards the credit requirement of the programme. This must be fully explained in the student facing documentation. The placement time is further split with 5 weeks in year 1 semester 1 and 5 weeks in year 1 semester 2, and 7 weeks in year 3 semester 1 and 3 weeks in year 3 semester 2.

3.7.   It was not clear what level of support the students should expect while they are on clinical placement.

3.8.   The clinical placement structure was designed based on student feedback which identified that students appreciated having a short placement in year 1 semester 1 to solidify their basic handling and restraint skills. Furthermore, the course team reported that practices supported this structure.

3.9.   The Nursing Progress Log (NPL) will be the tool used to record achievement of the DOS. Targets for completion have been set as follows:

20% completion Year 1
80% completion Year 2
100% completion Year 3

3.10.   Targets are flexible according to individual practice circumstances.

3.11.   The modules 'Form and Function and 'Veterinary Pharmacology' have 50% MCQ examination and 50% short answer and essay questions. All module learning outcomes (LO) are to be assessed using both assessment methods.

3.12.   The modules 'Anaesthesia' and 'Diagnostic imaging' have a 'spotter' assessment. This is similar to a 'steeple chase', and includes 10 stations with approximately 3 minutes per station. It is worth 50% and assesses one LO.

3.13.   There is another 45 minute spotter in the module 'Medical and Critical Care Veterinary Nursing' along with a 2 hr 15 minute written examination. Both assessments are worth 50%.

3.14.   It was not clear how the marks were distributed for each theory question. The level of complexity also varied widely.

Suggestions

a. Attention should be given to ensuring that the RCVS Day One Competences for Veterinary Nurses and RCVS Day One Skills for Veterinary Nurses are referenced in each module specification and student course handbook.

Actions

a.   The University must ensure that documentation contains correct references to the correct modules, and removes ambiguity from the presence of the APEL modules in the paperwork.

b. Reference to LANTRA Veterinary Nursing National Occupational Standards must be removed from relevant documentation, including the VN Course Student Handbook. Appropriate reference should be made to the RCVS VN Registration Rules, RCVS Day One Competences for Veterinary Nurses and RCVS Day One Skills for Veterinary Nurses

c. In order to comply with the QAA Veterinary Nursing Benchmarks, there should be reference to horse husbandry and nursing care of equines included in the programme.

d. Notional credits awarded for completion of placement need to be clearly explained in the relevant module documentation and course materials.

e. Provide the RCVS with the raw data from the market research which supports the placement model.

f. The University must forward the written protocol for support of students during their placement time.

g. The University must forward information on how marks are distributed for each examination question.

Standard 4 – Qualification quality management

> **AOs and HEIs must be compliant with all criteria stipulated by their accrediting national regulatory authority.**
>
> **Student selection criteria must be in place including the minimal acceptable qualifications to be achieved prior to commencing the qualification. The number of students registered for the qualification must be consistent with the resources available including the availability of sufficient Training Practices to enable the required clinical experience to be undertaken**
>
> **AOs and HEIs must allow the RCVS access to people, premises and records relevant to the management and delivery of the accredited qualification, and must cooperate with RCVS quality assurance activities in relation to the delivery and assessment of such qualification(s).**
>
> **AOs and HEIs must employ sufficient suitably qualified staff to administer and quality assure the qualification(s).**
>
> **Quality assurance personnel must demonstrate, maintain and provide evidence to RCVS of relevant occupational and academic competence in relation to the evaluation of assessment materials and decisions.**

4.1.   Compliance with the appropriate accrediting national regulatory authority criteria along with student selection criteria could not be confirmed as the relevant documents were not submitted with the application.

4.2.   The market demand was reported as: 2015/16 = 3.7 applicants per place and 119% of places filled / 2016/17 = 3.5 applicants per place and 100% of places filled / 2017/18 = 3 applicants per place and 84% of places filled (the target was increased by 10 applicants for this last intake).

4.3.   Placement details for the 2017 cohort indicated there were 8 students without placements. All second and third years were reportedly in a placement.

4.4.   Access to people, premises and records relevant to the management and delivery of the proposed programme was permitted.

4.5.   Curriculum vitae and continued professional development records for all staff were provided however, as this was out of context with their role within the programme, it was difficult to ascertain whether the CPD is sufficient for each job role.

4.6.   Training and standardisation of clinical coaches, supporting assessment of the DOS in clinical placement, is essential to ensure quality and consistency of decisions across clinical placements. Training materials for the Clinical Coaches involved in the programme was not supplied.

4.7.   The 'FdSc Reflective Summary' states:

Moderation of all assignments, written examinations and practical's is undertaken by the HE Assistant Head of School unless they are her modules, in which case the Head of Area is the moderator.

4.8. CPD for the External Examiner was not supplied. At the validation event, the Director of Academic Development could not confirm who monitors the CPD or continuing suitability of External Examiners.

Suggestions

None.

Actions

a. Forward to RCVS the missing QAA and HEFCE documentation.

b. Forward to RCVS the 'Myerscough Student Admission Policy'.

c. Provide a list of staff and their full job role, including any quality assurance tasks.

d. Forward to RCVS the training materials for the clinical coaches.

e. Forward to RCVS the CPD for the External Examiner along with CPD for the HE Assistant Head of School and Head of Area as the moderators for the VN FdSc.

f. Confirm how the ongoing suitability of an external is managed annually.

g. Confirm to the RCVS that all students within the 2017 cohort have placements.

Standard 5 – Assessment

Qualification assessment strategies must be appropriate, valid and fair. A pass must be achieved in each assessment assessing the RCVS Day One Competences for Veterinary Nurses and RCVS Day One Skills for Veterinary Nurses.

Reasonable adjustment, mitigating circumstances, fitness to practise policies and an appeals procedure must be in place, taking into account the licence to practise requirement for all students to achieve all competences contained in the RCVS Day One Competences for Veterinary Nurses and RCVS Day One Skills for Veterinary Nurses.

Mechanisms must be in place to allow Accreditation of Prior Learning (APL) to be taken into consideration.

Appropriate security arrangements must be in place to safeguard the integrity of assessment processes.

The design and quality assurance of assessments must be carried out by personnel who are specifically qualified to execute these functions.

There must be procedures in place to maximise the fairness, validity and reliability of assessment outcomes, including but not limited to academic peer review of assessment content, proofing of scripts, supervision and invigilation, maintenance of records and moderation processes.

There must be 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 fairly treated.

All modules or units of a qualification that address the RCVS Day One Competences for Veterinary Nurses and RCVS Day One Skills for Veterinary Nurses must include unseen independent examination as an element of the assessment strategy.

Independently assessed Objective Structured Clinical Examination (OSCE), or a similarly robust, objective and evidence-based form of examination, must be employed to test the safe and effective acquisition of clinical skills.

Practical assessment must be carried out by individuals who are specifically qualified to evaluate practical skills and performance, and who have sufficient occupational experience and qualifications to support safe and effective judgements of clinical competence.

5.1.   Assessment strategies appear to be fair and appropriate. There are a number of mechanisms in place to ensure validity. These could be improved by using a recognised validation framework.

5.2. The External Examiner report for 2016/17 identified a concern with a student failing a unit from a first year module being able to access the third year. This could have significant implications for the student if they did not pass the module, yet completed the course.

5.3. Some module information packs appeared to be incomplete.

5.4. It was unclear from the information provided what the rationale is for setting the pass mark for the written examinations. For instance, how does the centre ensure that those achieving 40% are minimally competent and those achieving 39% are below the expected level of competence?

5.5. Additionally, it was unclear for the MCQ and OSCE examination what item and test level analysis is being carried out.to gain an insight into performance of the items and test.

5.6. A sample assignment for the 'Comparative form, function, health and welfare' module: 'Exotic and Equine digestion and nutrition' contained a learning outcome which was to compare digestive tracts and reminds students to 'Remember the focus of this assignment is on the comparative differences between species'. Both animals are hindgut fermenters, which would make the comparisons of the anatomy very similar.

5.7. The OSCE examination uses the Angoff method to set the pass mark. Examples of this were provided.

5.8. The pass rate for the 2017 OSCE was 24% with12 nurses passing and 38 failing. This is of concern. The tasks are similar to those used in the level 3 Diploma examination where there is a pass rate in the region of 70%. The course team indicated that the low pass rate is due to an issue with students but provided no evidence of the analysis they have carried out to show that this is the case.

5.9. The university has the following procedures in place:

- appeals
- equality, diversity and inclusion
- extenuating circumstances
- fitness to study
- fitness to practise

5.10. The university indicated it uses the following documents produced by the Joint Council for Qualifications (JCQ):

- Instructions for conducting examinations
- General regulations for approved centres
- Adjustment for candidates with disabilities and learning difficulties – Access arrangements and reasonable adjustments

These documents have been developed by a consortium of Awarding Organisations involved in qualifications delivered at secondary and further education level. The university has no input into the development or review of these documents. It is therefore questionable

whether these documents are suitable for the qualification being accredited. For instance, does the university fully adhere to processes detailed when conducting examinations and considering access to assessments for students undertaking a HE level qualification?

5.11.   Additionally, the university indicated that they follow the assessment security and confidentiality arrangements outlined in the JCQ General regulations for approved centres and JCQ Instructions for conducting examinations documents. These state that Centres must be able to demonstrate that the appropriate security systems are in place to prevent unauthorised access to the test/examination materials. No information was provided to indicate what the university's security arrangements are. Furthermore, sensitive and confidential information was submitted to the RCVS by non-secure means as part of the re-accreditation application.

5.12.   Documentation regarding the APL policy stated:

' The module/unit tutor will assess the evidence within three weeks of submission clearly mapping to the specified assessment criteria and ensuring that evidence is valid, sufficient and current in relation to expected industry competence. The evidence should be consistent with non-RPL evidence submitted as part of a learning programme/framework.'

5.13.   The inclusion of reference to the DOC and DOS within the APL policy was discussed at the validation event.

5.14.   The university has in place guides, policies and procedures relating to the development and moderation of assessment materials which included information on the following:

- Writing the assessment brief
- Using assessment criteria
- Pre-assessment Internal Verification
- Assessment Feedback
- Post-Assessment Moderation
- Information for Students

5.15.   The minimum requirements for moderation samples for both internal and external moderation purposes comprise:

- 10% of all work submitted for a particular element of assessment
- inclusion of at least 3 pieces of work from the batch
- inclusion of work awarded the highest marks, marks in the middle range and the lowest marks

5.16.   Moderation expectations are the same for re-assessments as for first assessments, therefore 10% of reassessments or three pieces, whichever is greater, should be moderated within a module and a Higher Education Post-Assessment Moderation Form completed and saved, as above.

5.17.   A numerical grading band system was available (p8 UCLan Assessment Handbook), together with level descriptors (UCLan Assessment Handbook Appendix 2, p36).

5.18.   The OSCE Examiner Handbook is a comprehensive document, which provides details to students and examiners about their role. It contained a lot of useful information but this document alone does not cover all the processes that need to be in place for the delivery and quality assurance of this type of examination.

5.19.   The RCVS Examinations Manager delivered examiner training in 2016 and observed the OSCE exam. The team committed themselves to writing new examination material, which does not appear to have been completed.

5.20.   The OSCE blueprint was not submitted. It was clear that a number of Day One Skills are not assessed via the OSCE. There are also some OSCE stations which cover techniques/methods which are no longer in regular use in veterinary practice, such as the use of back tying surgical gowns. Factors like these adversely affect the meaningfulness and accuracy of the examination results and the legitimacy of the decisions made upon the examination results (i.e is someone who enters the register with this qualification able to safely don a surgical gown of the type normally used in practice?).

Suggestions

d.   Use a recognised validation framework when gathering and reviewing evidence to confirm the validity of assessments and examinations.

e.   Consider use of Bloom's taxonomy and verbs relevant to the level of study when formulating learning outcomes.

f.   Include reference to the RCVS DOC and DOS for veterinary nurses in the APL policy.

Actions

k.   The University must provide details of how the written examinations pass mark differentiates between those who are competent and those who are not.

l.   For the MCQ and OSCE, the university must provide information about what item and test level analysis is carried out to gain an insight into item and test difficulty; index discrimination and performance of distractors etc.

m.   The university must have mechanisms in place to prevent students progressing into the third year if they have not passed all assessment elements within the first year.

n.   Module information packs to be checked for accuracy and completeness. For example, p8 VN2029 had missing assessment guidance and p10/11 of VN2027 had a partially complete assessment criteria rubric. These must be sent to the RCVS.

o.   The university to review their use of the JCQ guidance to ensure that the processes described within them, such as the security and confidentiality of examination materials, are suitable to use

for the programmes they deliver. If this is not the case, they must provide their own documents to the RCVS for review.

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r. Provide a plan showing how the assessment team will identify the areas of the Day One Skills that can feasibly be examined using an OSCE. This should then be used to develop OSCE stations which assess current techniques and methods in a format suitable for use in a level 5 examination. A schedule outlining the timeline for this development must be provided.

s. Submit details of the OSCE examination blueprint ensuring that the test content maps across the learning objectives/Day One Skills.

t. Provide details of the process that the assessment team went through to determine that the low pass rate in the OSCE is related to student issues as opposed to other factors such as OSCE station design, teaching issues or examiners expecting different standards.

Standard 6 – Centre approval and quality assurance

Centres/delivery sites approved for the delivery of the accredited qualification must address the requirements for personnel, resources and facilities stipulated within the RCVS Standards and procedures for the approval and monitoring of Centres.

AOs and HEIs must conduct a site visit, including an audit of facilities and resources, before approving any Centre/delivery site to deliver a licence to practise qualification.

AOs and HEIs must conduct a minimum of one site visit to each approved Centre/delivery site and/or its affiliated Training Practices, annually, based on a documented risk assessment policy.

Centres delivering a licence to practise qualification must be notified to the RCVS.

AOs and HEIs must set in place binding agreements with Centres that articulate both their national and professional regulatory obligations.

6.1.   The Centre approval criteria are checked by the External Examiner with a template that is based on the RCVS Centre Standards, however, there was no such report for academic year 2016/17.

6.2.   There is evidence that the External Examiner has completed RCVS Centre Standard checks, however there was no evidence to show that TPs are visited annually by the University to check Standards.

6.3.   The Memorandum of Understanding (MoU) between UCLAN and Myerscough College expired in July 2017, there is no mention of RCVS or PSRB requirements; however, there is reference to PSRB requirements in the External Examiner report template

Suggestions

None

Actions

a.   The University must supply evidence of Centre Standards monitoring at Myerscough College for 2016/17.

b.   Provide evidence of the mechanism in place that will ensure the University performs checks on TPs against RCVS TP Standards annually.

c.   The University must provide an up to date MoU between UCLan and Myerscough College to the RCVS to include regulatory obligations.

Standard 7 – Self evaluation and reporting

> **AOs and HEIs must evaluate the delivery of a licence to practise qualification across all approved Centres and provide a report to the RCVS annually or when otherwise required to do so.**

7.1.   There is sufficient monitoring and response to any findings in place for the FdSc Veterinary Nursing. Annual self-assessment reports (SARs) have been received by RCVS

Suggestions

None

Actions

None

University response

Response from the University of Central Lancashire to RCVS Visitation Report December 2017

Standard 3 – Qualification design and delivery

Actions

a. The University must ensure that documentation contains correct references to the correct modules, and removes ambiguity from the presence of the accreditation of prior experiential learning (APEL) modules in the paperwork.

b. Reference to LANTRA Veterinary Nursing National Occupational Standards must be removed from relevant documentation, including the VN Course Student Handbook. Appropriate reference should be made to the RCVS VN Registration Rules, RCVS Day One Competences (DOC) for Veterinary Nurses and RCVS Day One Skills (DOS) for Veterinary Nurses.

c. In order to comply with the QAA Veterinary Nursing Benchmarks, there should be reference to horse husbandry and nursing care of equines included in the programme.

d. Notional credits awarded for completion of placement needs to be clearly explained in the relevant module documentation and course materials.

e. Provide the RCVS with the raw data from the market research which supports the placement model.

f. The University must forward the written protocol for support of students during their placement time.

g. The University must forward information on how marks are distributed for each examination question.

University Response

The weblinks to both the DOC and DOS have been included in the Module Content boxes of each module descriptor of the FdSc Veterinary Nursing course. They have also been included in the programme specification document, which is included in the student course handbook. Mapping of the

modules to the DOC, DOS and QAA VN Benchmark Statement have also been included in the student course handbook.

Dip HE CVN student course handbook and programme specification now state 'Students entering with 1 year post-registration experience <u>do not</u> have to study these level 4 modules' next to where the level 4 modules are listed.

On the Dip HE CVN course structure it now states 'Students entering with 1 year post-registration experience <u>do not</u> have to study the level 4 modules detailed in the student course handbook and programme specification. They enter straight into year one of the course at HE Level 5'.

There is no reference to LANTRA's NOS in any of the documentation.

Weblinks to the RCVS DOS / DOC / VN Registration Rules 2014 have been inserted into the FdSc VN student course handbook and programme specification.

Equine, exotic and wildlife species have now been included in the content of modules *VN1015 Applied Animal Health and Welfare*, *VN1016 Veterinary Nursing In-Patient Care* and *VN1024 Anatomy, Physiology and Preventative Healthcare* (FdSc VN Year 1 modules) to ensure the students learn about the husbandry and nursing care requirements of these species to comply with the QAA VN Benchmark Statement.

This has been inserted into the *VN2033 Veterinary Nursing Placement* module descriptor in the Module Aims section: '**Please note**: the successful completion of this module is an essential requirement for progression on the programme, but the credits are *notional* and are therefore not counted towards the overall qualification classification'.

It has also been inserted into the FdSc VN student course handbook and programme specification.

* Further evidence has been submitted to the RCVS

Standard 4 – Qualification quality management

Actions

a. Forward to RCVS the missing QAA and HEFCE documentation

b. Forward to RCVS the 'Myerscough Student Admission Policy'

c. Provide a list of staff and their full job role, including any quality assurance tasks.

d. Forward to RCVS the training materials for the clinical coaches

e. Forward to RCVS the CPD for the External Examiner along with CPD for the HE Assistant Head of School and Head of Area as the moderators for the VN FdSc.

f. Confirm how the ongoing suitability of the external examiner is managed annually.

g. Confirm to the RCVS that all students within the 2017 cohort have placements.

University response

The External Examiner Nomination Form' External Examiner CV' *submitted.

The Head of School has been involved in VN education for over 40 years and lead the design and delivery of the first HE VN courses at Myerscough College / UCLan. She holds D32/33/34 qualifications, and having been involved in HE VN course design and delivery specifically for over 20 years now is extremely experienced in relation to the writing, internal verification and moderation of a wide range of HE assessments. She has held the post of External Examiner for many other HEIs over the years, so her HE quality assurance experience is second-to-none.

The HE Assistant Head of School has been involved in VN education since 2005, predominantly HE teaching. She has been writing, internally verifying and moderating a wide variety of HE assessments for 13 years now, and has held / still holds the post of External Examiner for 5 other HEIs spanning 10 years, from 2008 to present day. The HE Assistant Head of School has been an OSCE examiner since 2010, working in this role for the RCVS and then City & Guilds and Central Qualifications, so has extensive experience in all aspects of quality assurance of all types of HE VN assessments.

It is normal practice for UCLan quality assurance mechanisms to be adjusted to reflect any additional requirements from a Professional Statutory and Regulatory Body. Whilst it is not current practice to monitor whether the External Examiner for the RCVS accredited Diploma in Veterinary Nursing is appropriately registered, UCLan is able to introduce procedures to annually seek confirmation from the External Examiner that this is the case.

The University is currently in the process of reviewing its terms and conditions for External Examiners and will seek to incorporate within these the need for currency of professional qualifications/registration throughout the term of their appointment.

* Further evidence has been submitted to the RCVS

Standard 5 – Assessment

Actions

a. The University must provide details of how the written examinations pass mark differentiates between those who are competent and those who are not.

b. For the MCQ and OSCE, the university must provide information about what item and test level analysis is carried out to gain an insight into item and test difficulty; index discrimination and performance of distractors etc.

c. The university must have mechanisms in place to prevent students' progressing into the third year if they have not passed all assessment elements within the first year.

d. Module information packs to be checked for accuracy and completeness. For example, p8 VN2029 had missing assessment guidance and p10/11 of VN2027 had a partially complete assessment criteria rubric. These must be sent to the RCVS.

e. The university to review their use of the JCQ guidance to ensure that the processes described within them, such as the security and confidentially of examination materials, are suitable to use for the programmes they deliver. If this is not the case, they must provide their own documents to the RCVS for review.

f. The university to provide a written policy on examination security including the safe storage and transport of both paper based and electronic examination material.

g. The OSCE Examiner Handbook must answer the following:
   - Page 3 – what is the consequence to students who do not meet the criteria listed under the "attire" section?
   - Page 10 – who decides which tasks will be used? What mechanism are used to pair the examiner with the task?
   - When will each examiner liaise with the member of staff responsible for the delivery of the OSCE.?
   - How will the examiner know how much equipment is required? Are they responsible for ordering the consumables? When will this be done?
   - Who operates the timing system?
   - On a number of occasions the examiners are told that they' *may say ……..'* to the candidate. To keep the exam consistent this should be changed to '*must say…'.*
   - In the section 'after the exam' page 13 it talks about examiners entering marks onto the Angoff spreadsheets. It is not clear what this means. Is there further guidance available? If so could it be included here?
   - What happens to the examiner station feedback?
   - How are examiners selected? What training and standardisation mechanism are used?
   - Who are the assistant examiners and moderators? What is their role?

- It was unclear what happens to the exam papers after the exam. What kind of analysis to ensure validity and reliability is undertaken?
- What is the global score used for?

h. Provide a plan showing how the assessment team will identify the areas of the Day One Skills that can feasible be examined using an OSCE. This should then be used to develop OSCE stations which assess current techniques and methods in a format suitable for use in a level 5 examination. A schedule outlining the timeline for this development must be provided.

i. Submit details of the OSCE examination blueprint ensuring that the test content maps across the learning objectives/Day One Skills.

j. Provide details of the process that the assessment team went through to determine that the low pass rate in the OSCE is related to student issues as opposed to other factors such as OSCE station design, teaching issues or examiners expecting different standards.

University Response

We adopt the School of Health assessment criteria for HE Level 4, 5 and 6 (see 3 associated attached documents), and the minimum pass mark is 40%.

Myerscough School of Veterinary Nursing was awarded direct accreditation status by the RCVS a number of years ago as the RCVS were satisfied that our degree students passing modules with a minimum of 40% were of equivalent calibre to those FE students passing assessments with a minimum of 65%, therefore demonstrating their equivalent competences.

The OSCE requires 8 out of 12 stations to be successfully achieved in order to pass the assessment, which equates to a minimum pass mark of 67%.

Once all examinations have been undertaken, the module tutors analyse the students' performances in the MCQs of their written examinations by analysing how many students got each question right or wrong. This has always been undertaken to identify any rogue questions, to assess any question ambiguities, and to inform / develop the subsequent year's examination. Anything of note is reflected upon in the module reviews.

For the OSCE, please see the response to bullet point 10 in Action g below regarding the process for calculating and recording individual student grades, and the various ways The HE Assistant Head of School checks the accuracy of the results. In addition to this, The HE Assistant Head of School reviews the students' performances in each of the OSCE tasks on the 'Angoff Spreadsheets' following the OSCE to identify if there are any tasks with unusually high fail rates, and she also analyses the student achievement for each step of each task to identify any anomalies. This information, in combination with the station examiner feedback informs any changes that are made to tasks for future use.

As per the UCLan Academic Regulations:

G12.9 Approval of additional module attempts on all programmes shall be at the discretion of the appropriate Course Assessment Board, which will not withhold such approval unless, in its academic judgement, the student lacks any reasonable prospect of success in subsequent attempts. In the latter case, the student will be obliged to withdraw from the programme, and any future re-admission will be at the discretion of the relevant Head of School.

For some reason, when The HE Assistant Head of School 's computer saves documents with tables in them it has started deleting some content, randomly, which appears to be what has happened with the VN2027 MIP. Hopefully that has not happened on this occasion.

The VN2029 MIP had intentionally had the assessment guidance information removed from the end of the MIP pertaining to assignments because the module is assessed via 1 x written examination alone. The standard assessment guidance has been reinserted into the MIP and attached for you to review.

We have reviewed our use of JCQ guidance and are satisfied that the processes are suitable for these programmes. I copy of the sign-off form confirming our procedures meet JCQ guidelines is attached.

As detailed above, we follow the JCQ guidance on this and the sign-off form detailed above provides evidence that our procedures meet JCQ guidelines. We have also cross-checked that our processes are in line with the University (UCLan) requirements.

Bullet point 1.

If they do not meet the professional 'attire' requirements their OSCE time is rescheduled for one of the subsequent sittings. This has never happened, but there is flexibility in the OSCE timetable to accommodate this.

Bullet point 2.

The HE Assistant Head of School decides which tasks will be used informed by which have been used before / how frequently. Pairing the examiner to the task – based upon their prior experience as OSCE examiners (both externally and internally) / their subject teaching / their familiarity with the tasks.

Bullet point 3.

The staff teaching the OSCEs throughout the academic year work with the examiner guidelines in mind, which is what the OSCE examiner on the exam day works from. They liaise with The HE Assistant Head of School initially if there are any queries, who liaises with the relevant teaching staff as required.

Bullet point 4.

Each task has an associated equipment list. They are responsible for checking consumables for their station/s. Orders are processed by the VN Technician at least a week prior to the OSCE examinations.

Bullet point 5.

The HE Assistant Head of School and available assistants operate the timing system. The HE Assistant Head of School trains people to use it as required.

Bullet point 6.

We will change the instructions so the examiners 'must say…' things for consistency purposes.

Bullet point 7.

Each examiner accesses the associated database for their OSCE task and inputs the results for their selection of students – the formulae are pre-prepared to calculate the results for every task. The examiners then transfer the relevant information to each student's results letter before giving the mark sheets back to The HE Assistant Head of School . The HE Assistant Head of School colloquially calls these databases the 'Angoff spreadsheets' – the staff all know what this terminology means. A guidance document is created for the examiners to follow re: recording their station results and transferring the results to the student letters.

See attached document: Standard 5 Action g Bullet Point 7 Recording OSCE Results Guidance

Bullet point 8.

The HE Assistant Head of School   collates the examiner station feedback, reviews it, discusses it with the examiners where required, amends any tasks as required, and communicates this to the whole team via email and it forms a standardisation event at the start of the next academic year.

Bullet point 9.

The examiners are selected from the departmental staff. Those who were here at the time attended the RCVS training event in 2016. Those who were not here are trained by The HE Assistant Head of School . At the start of each academic year, the staff members are split into small groups according to their examining preferences / expertise / what they examined during the last round of OSCEs and they work together to check any amendments that have been made, suggest any further changes that are required, and then we discuss this all as a group before The HE Assistant Head of School   finalises the final amendments. This is all done before the new cohort of year 3 FdSc students returns at the end of October and starts their OSCE revision sessions.

Bullet point 10.

Assistant examiners are the departmental staff who are available at the time as they are not examining a stations themselves, and the VN Technician. The staff members assist as required in certain stations (e.g. bandaging), and they and the VN Technician help The HE Assistant Head of School   to work the central timer, monitor the stations for any problems during the exam, move the students around the stations, and ensure all stations are set-up before the next task commences.

The HE Assistant Head of School   +/- Lorraine Allan are the moderators. We make our way around the stations during each OSCE exam so we have observed each station, after which we check the examiner's mark sheet, score and comments box to ensure it is reflective of the student's performance. This is recorded on a moderation form, and example of which was emailed to the RCVS as part of the application paperwork.

Bullet point 11.

Exam papers: Once the examiners have inputted their results to the 'Angoff spreadsheets' and populated the relevant student result letters, the mark sheets are passed to The HE Assistant Head of School .

•   checks that each mark sheet definitely has a 'yes' or 'no' ticked for every step of the methodology, that for every 'no' there is a comment justifying why 'no' was awarded, and that a global score has been ticked. If there are any anomalies the examiners are questioned immediately for clarification (at the end of each OSCE day before the examiners leave).

•   The HE Assistant Head of School then checks every mark sheet has been entered correctly onto the 'Angoff spreadsheets'.

•   The HE Assistant Head of School then checks that those results have been accurately transferred to each of the student results letters.

•   The HE Assistant Head of School then amends each of the student's results letters to the 'pass' or 'fail' wording, saves and PDFs them.

•   The HE Assistant Head of School then collates the 12 mark sheets for each student together, scans them, staples the hard copies together and keeps the hard copies in a box in the locked store cupboard.

•   The scans of the yes/no ticks are emailed to the students along with their official pass/fail letters within 15 working days of the examination.

Bullet point 12.

The global score is for the examiners to use to differentiate between the quality of the performances despite what is reflected in the mark sheets. The Angoff Spreadsheets / databases ultimately determine the pass or fail for each student in each task, but the global score provides The HE Assistant Head of School with an overview of how well the students performed from the perspective of a qualified and experienced professional. As part of the analysis of the performances following the OSCE, The HE Assistant Head of School looks at the global scores for each task to ascertain whether there are tasks that the students are all outstanding in, or are all just barely competent at. This then allows The HE Assistant Head of School to look into any aspects of the teaching of these tasks that could be improved, or where it might be appropriate in tasks to include elements of slightly greater difficulty to tests the students further.

See attached document: 'Standard 5 Action h and i Blueprint Link to DOS Plans for Future Tasks'

This document shows the Blueprint for the 2016/17 OSCE – tasks and examiners allocated – and the table at the end shows how the subject areas and tasks therein currently link to / cover the DOS.

The table at the end also identifies aspects of the DOS we could potentially develop into OSCE tasks to facilitate even greater coverage of the DOS in future, and our immediate timeline for auctioning this.

Having analysed the students' results (50 students x 12 tasks each = 600 tasks undertaken and subsequently quality assured and reviewed), they did not achieve the required pass mark in 197 of the tasks, which is 33%.

This demonstrated to The HE Assistant Head of School and the team that in 67% of the tasks the students were achieving the pass marks which are high (ranging between 83 and 91%), meaning they

were performing well overall in the tasks however they failed to achieve the critical steps = automatic fail despite the % achieved. Many of the students who did not achieve the pass marks only missed by a maximum of 5%; there were very few students who were way off the mark in this respect.

Feedback from all of the examiners following the OSCE indicated a general lack of attention to detail on the students' behalves, for example not disposing of urine / blood / sharps at the end of tasks which are critical for them to do in relation to health and safety, and a rather relaxed (or, more accurately, complacent / whimsical) attitude within the stations. We have high and appropriate standards, which are emphasised to them throughout their OSCE practice sessions during the academic year, and they did not meet them. Of course we were disappointed with these results, however we are categorically not ashamed of this low pass rate as we strive to ensure we produce the best RVNs to enter the profession and will not compromise our standards or good name in the sector.

The students had plenty of OSCE practice sessions on their timetable (2 hours every Monday afternoon specifically associated with their VN2030 module within which the OSCE is located as an assessment, and then embedded throughout the other modules as well), and the tutors reported that towards the end of the year the students were reluctant to stay for the entirety of these sessions as they were *'fine with these tasks'.* They were of course advised and encouraged to stay by the tutors and make the most of the time available to them, however they are also adults and are responsible for, and have to take ownership of, their own learning and success.

When those students who needed to resit were brought in for feedback and revision, their discussions with The HE Assistant Head of School during the feedback session generated comments such as: *'I did not think you would be so strict' 'I thought I would be okay because I am doing these things every day in practice' 'I did not really revise them – I just focused on my written exam revision' 'I thought I would be okay because we had had so much practice time throughout the year' 'I only forgot to dispose of the urine – I failed for that?'.*

As previously discussed, all of the tutors teaching the students are standardised in the required tasks, The HE Assistant Head of School runs through all of the tasks with all of the tutors before they teach them to make sure everything is clear, examiners are allocated according to their strengths / areas of expertise and preferences, and all examiners follow the explicit examiner guidance documents when assessing candidate performance to ensure parity in their marking.

We have robust internal verification and moderation procedures prior to and following the OSCE, and the RCVS visited us the first year we ran the OSCE in this format following the 2013 Periodic Course

Review and overall were very pleased with the conduct of the examination – no areas for concern and just a couple of actions which were acted upon for the following year.

Standard 6 – Centre approval and quality assurance

Actions

    a. The University must supply evidence of Centre Standards monitoring at Myerscough College for 2016/17.

    b. Provide evidence of the mechanism in place that will ensure the University performs checks on TPs against RCVS TP Standards annually.

    c. The University must provide an up to date MoU between UCLan and Myerscough College to the RCVS to include regulatory obligations.

University Response

No separate report was produced by the External Examiner for this purpose. Having reviewed all of the relevant documentation during her visit everything was in place, as in previous years, and she incorporated everything she needed / wanted to say about this in the main External Examiner report produced for UCLan.

As above. The External Examiner reviews all relevant documentation annually produced by the Placement Officers when they approve / re-approve TPs against the RCVS TP Standards. As per her External Examiner report for 16/17, these are the comments relating to practice placements:
1. This is managed extremely effectively by the internal teaching team and also by the internal verification team who when they visit the students also undertake an OSCE task with the students in their work places and so the students are fully aware of what is expected of them and have a copy of all of the potential tasks they could be examined on from the start of the academic year.
2. Excellent – students are placed in RCVS approved training practices with a named clinical coach who is a member of the practice team and a named college verifier who visits the student on the placement.
3. The paperwork and QA mechanisms around placement are clear and robust.
She visited practices with the Senior Placement Officer during her first year as External Examiner, and does not feel it necessary to visit our practices annually.