



**Student Handbook**

**VETERINARY NURSE  
PATIENT BASED  
ASSESSMENT (SMALL  
ANIMAL)**

Royal College of Veterinary Surgeons

## The RCVS Student Handbook - Veterinary Nurse Patient Based Assessment

### About the handbook

The RCVS Student Handbook is primarily intended to prepare students in order that they are able to undertake the Veterinary Nurse Patient Based Assessment (VN-PBA).

The VN-PBA has been designed specifically as an alternative examination to the Objective Structured Clinical Examination (OSCE) to be used during the Covid-19 pandemic, whilst social distancing measures prevent OSCE delivery using the traditional methodology. It should be noted that this examination may not be suitable for apprentices preparing to enter the End Point Assessment and apprenticeship students are advised to seek advice from the Awarding Organisation they are registered with.

Student veterinary nurses (SVNs) most commonly complete the practical assessment of their licence to practise programme in the form of an Objective Structured Clinical Examination (OSCE). Where an Awarding Organisation (AO) or Higher Education Institution (HEI) does not feel it is safe or feasible to deliver the OSCE following the traditional methodology, due to the Covid-19 pandemic, this alternative assessment may be utilised.

In order to reduce the impact on the SVNs who were due to sit the OSCE, and therefore have had no opportunity to prove their practical competence before applying to join the RCVS Register of Veterinary Nurses, the VN-PBA has been designed to sample the RCVS Day One Skills (DOS) in an alternative manner. In order to facilitate this, the Student Handbook will provide the necessary tools, guidance and clarity for those wishing to undertake the adapted VN-PBA assessment.

## TABLE OF CONTENTS

	Page number
<b>Chapter 1: Introduction</b>	1
Patient Based Assessment	1
Location of examination and equipment requirements	1
Eligibility	2
<b>Chapter 2: The Examination Process</b>	3
VN-PBA case report submission	3
Prior to the examination	5
During the examination	5
<b>Chapter 3: Management of the Examination</b>	7
Examiners	7
Reasonable adjustments and examination appeals	7
Irregularities	7
Dress Code	7
Results	8
Resitting the examination	8

<b>References</b>	9
<b>Annex A Student case/Day One Skill Guidance</b>	10
<b>Annex B VN-PBA Case report submission instructions</b>	25

## Chapter 1:

## Introduction

### Patient Based Assessment

1. The VN-PBA is based on Case Based Discussions (CBDs) which are used widely within the medical profession (RCGP, 2020; RCOG, 2020; RPS, 2020). CBDs consist of a structured oral assessment where the student reviews cases and decisions that they have been involved with.
2. Medical students normally submit a case report, relating to one case with which they have been involved, to the examiner a few days before the scheduled assessment. The examiner considers the areas to be discussed and prepares a structured discussion accordingly. Medical students have in the region of 10 CBDs alongside other assessments throughout their programme of education.
3. The VN-PBA shares many features of the CBD, but in order to ensure that the examination can be completed in one event the VN-PBA will assess several cases rather than one.
4. For the VN-PBA you will use a template (which can be found in the VN-PBA Submission document) to provide details of around five to eight cases that you have been involved with. These completed case reports will help you prepare for the discussion and assist the examiner to prepare their questions.
5. The VN-PBA will sample all sections of the RCVS Day one Skills for Veterinary Nurses (DOS) in one examination. Students will be able to present cases they have been involved with since 1 June 2019.
6. The VN-PBA discussion will last for around 45 minutes.

### Location of examination and equipment requirements

7. In most cases, online meeting software with audio, video, screen sharing and recording capabilities will be used to facilitate the VN-PBA. The Awarding Organisation (AO) or Higher Education Institution (HEI) will tell you which platforms are suitable for the examination and if you are required to download any software. The VN-PBA can also be held on one site with both examiners and the student in the same room, but it is not envisaged that this will occur during the Covid-19 pandemic.
8. You will need to have access to a computer which meets the requirements outlined by the AO/HEI. Your computer should be fully charged or plugged into a power source.
9. You should also arrange to have access to a private room where the examination can be conducted without disturbance. You are advised to let other members of your household or workplace know that you are sitting an examination. Please remember to remove any posters from the walls, especially if they are related to veterinary practice.
10. The discussion will be recorded for quality monitoring purposes.
11. You will be allowed to have the following items in the examination:

- water in a bottle (with the label removed) or a clear glass
- case reports
- supplementary evidence
- pen
- plain paper
- calculator (not the calculator on your phone)
- current/in date passport or photo driving licence

12. You will not be allowed:

- any additional notes
- mobile phone
- to wear headphones because the examiner needs to make sure that no one else is communicating with you during the examination

### **Eligibility**

13. Your AO or HEI will provide you and your Centre with instructions about how to enter the examination. They will also set the final date for submission, fees and number of re-sits permitted. As a student you are responsible for entering the examination.

To be eligible to apply to enter the VN-PBA you must:

- Be registered for an RCVS accredited veterinary nursing licence to practise qualification and be actively enrolled with the RCVS.
- Have completed all work-based assessments of the DOS and have had the evidence quality assured.
- Have passed all other examinations required by the AO/HEI.
- Have completed or made significant progress towards the completion of the minimum period of education and practical training outlined in schedule 1 of the RCVS VN Registration Rules.
- Have your examination application supported by your Centre.
- Provide a valid form of ID e.g. current/in date passport or photo driving licence, on the day of the examination.

## Chapter 2: The Examination Process

### VN-PBA case report submission

14. Prior to the examination you are required to prepare five to eight case reports along with supporting supplementary evidence, e.g. care plans, patient records, radiographs, SOPs. The case report template is provided in a separate document call the VN-PBA Submission document. Your case reports must relate to cases you have been directly involved with since 1 June 2019.
15. Ideally you should have managed the cases fairly independently, but under the supervision of an RVN or MRCVS. Supervision in this context means that the RVN or MRCVS is present on the premises and able to respond to a request for assistance if needed. You will be required to map the case reports to the DOS being sampled in the examination.
16. You have been provided with the list of the DOS being sampled in the examination; see Annex A. This document also provides details of the DOS you **will not** be examined on, as well as list of suggested supplementary evidence. You should use this document to help you to focus the information provided in your case reports.
17. Using the template provided, your case reports should provide a brief overview of the case in normally not more than 300 words. Ideally, each case will cover more than one clinical procedure/nursing intervention. For example, if you X-rayed a patient, applied a bandage and administered analgesia to a patient, this is counted as one case and all of the details must be included in the one case report.
18. You are not expected to provide lots of detail such as the list of equipment and how you prepared it or the anatomical landmarks you used to centre and collimate the radiograph. However, you should be aware that this information may form part of the discussion.
19. Your cases do not need to be textbook examples, with positive or expected outcomes. The examiner is not assessing the decisions made by veterinary surgeons or veterinary nurses who were supervising you.
20. Table 1 outlines the broad sections of the DOS that should be covered and the minimum number of cases to be produced for each. Please note: it is anticipated that each of your case reports will cover different sections of the DOS.

Day One Skills covering:	Minimum number of cases
Diagnostic imaging	3 different views
Administration of medication	2 different routes
Intravenous fluid therapy	2 cases
Anaesthesia	2 cases, using different breathing systems <i>Note: it is accepted that some practices will only use one breathing system, such as the Humphrey ADE. In this situation both case reports can be based on one breathing system.</i>
Nursing inpatients	2 different nursing interventions. Examples <u>may include</u> managing feeding, oral hydration, urinary and faecal excretions, assessing and monitoring wounds. Care plans should be referenced for both cases.
Dressings and bandages	1 case, which may or may not include assessing and monitoring of wounds, which may link with a 'nursing inpatients' case.
Laboratory techniques	2 cases to include taking and processing samples. One case must include sending a sample to an external laboratory.
Theatre practice	2 cases, of which at least one must include selection of surgical instruments and one must include the donning of surgical attire. These may or may not be the same cases.

**Table 1: Guidance for students on case completion**

21. You are encouraged to provide a range of supporting supplementary evidence such as case notes, radiographs and care plans. Supplementary evidence relates to the case and not your ability to nurse the case. These will assist you and the examiners during the discussion. Where you have made a specific entry on the supplementary evidence, such as an entry on a care plan or hospital record, you must highlight which entry is yours. You **must not** alter records or rewrite them. The examiners need evidence of what you did. Any evidence which appears to have been reproduced for the assessment will be discounted and your grade is likely to be reduced. Please note you are not required to submit witness statements; a senior member of the practice team will look at the evidence you are submitting and confirm your involvement.



22. Once you have completed the case reports and gathered your supporting supplementary evidence you must log this against the DOS using the matrix provided in the VN-PBA Submission document.
23. If you need to produce more than eight case reports you should speak to your Centre who will discuss your request with the AO/HEI. You should provide information at this time on how many additional case reports you feel that you need to produce.
24. The examiners will not judge you on the quality of the case reports. This document is simply to help you to prepare for the examination and to provide a basis for the discussion. If you have made typographical errors or exceeded the word count by a few words, then you will not be penalised.
25. You are required to submit your case reports, supplementary evidence and DOS matrix to a senior member of staff in your practice. Your Centre will assist you with identifying the most appropriate person. This person will sign a statement (contained in the VN-PBA Submission document), confirming that the cases you have provided are genuine and your involvement is recorded accurately. They will also indicate the level of entrustability they have in you as a student veterinary nurse and ensure that the practice GDPR processes have not been compromised. This member of staff will submit your work and their statement to your Centre. Guidance for submission is provided in Annex B
26. For security reasons, students are not permitted to submit their case reports directly to the Centre.
27. Centre staff will be responsible for ensuring that the student is eligible to undertake the adapted assessment, and has followed submission guidelines, e.g. naming of files. Your Centre will submit your completed file to the AO/HEI.

### **Prior to the examination**

28. Your examination entry will be confirmed and you will be provided with the date and time of your examination along with details about how to join the online meeting.

### **During the examination**

29. Just before your examination start time you will be required to access the meeting using the instructions provided by your AO/HEI. You will be required to wait in a virtual waiting area, please do not worry, as the examiners will allow you into the examination at the allotted time.
30. The examiners will introduce themselves and start the recording. One examiner will ask you to confirm your name and enrolment number, and will check this against your paperwork. You will then be asked to show your ID. Finally, you will be required to use the camera function to scan the room and the area around the computer. Remember: you must not have any additional notes or equipment in the vicinity of the examination. Your mobile phone must be switched off and placed outside the room.

31. You will also be asked to confirm that you have read the fit to sit policy and that you are fit and able to proceed.
32. There will be two examiners marking you during your examination. One examiner will lead the discussion and will tell you which case they want you to discuss and which DOS sections they will be covering. The second examiner will be marking you and making notes, they will not normally be involved in the discussion. You will be asked to introduce the case briefly; this should take no more than two to three minutes. You should tell the examiners a little bit about the patient and procedure you were involved with. As the examiner is judging your competence, you are advised to talk about **your** involvement with the case.
33. The examiner will ask you questions about the case and your involvement. You may refer to your case reports and supporting supplementary evidence if you wish. It may be necessary for the examiner to share an image or diagram with you on the screen, to assist them with their questioning. You may also be required to complete a calculation relevant to the case.
34. If you are unable to answer a question, the examiner may rephrase it. If you would like to move on you should indicate this to the examiner and they will ask you another question. You may return to a case later in the discussion if there is time.
35. Examiners are likely to ask you questions in relation to the following domains:
- Patient details/history
  - Gathering information, use of resources
  - Clinical and procedural skills: selection and preparation of equipment
  - Clinical and procedural skills: nursing care
  - Clinical and procedural skills: diagnostic investigation
  - Clinical and procedural skills: theatre practice and anaesthesia
  - Health and safety
36. During the examination both examiners will make notes to assist them in grading you.
37. Once your examination is over and you have left the meeting, you must not attempt to access the meeting again even if you have remembered something you had forgotten.
38. **After the examination, you must not discuss the content of the examination with anyone or publish information on social media until all students have complete the examination.** Any breaches in this will be investigated and may lead to an automatic fail in the assessment or in serious cases the student will be prevented from entering the register.

## Chapter 3

## Management of the Examination

### Examiners

39. Two examiners will grade you during the examination. Examiners are employed by the AO/HEI. They will be veterinary nurses or veterinary surgeons who are experienced in assessing students. Examiners will have attended training specifically in relation to the VN-PBA and have demonstrated that they are competent to undertake this role.
40. Examiners will not normally be someone you know i.e. your lecturer or your clinical supervisor. Where it becomes apparent during the examination that the examiner and student are known to each other, the examination will continue as planned but the grades will be checked by another examiner.

### Reasonable adjustments and examination appeals

41. Your AO/HEI reasonable adjustment, mitigation and appeals processes will all be applied in the normal way. It is your responsibility to ensure that you are familiar with these processes and, where necessary, submit applications in a timely manner.

### Irregularities

42. The AO/HEI and examiners will make every effort to prevent examination irregularities. There are however, some circumstances, which cannot be predicted.
43. Examiners have been provided with a process to follow in the event of a fire alarm, computer failure or other reason why you or one of the examiners are unable to continue to participate. If the problem is at your end, you should try and reconnect as soon as possible. The Examination Co-ordinator will phone you to check if the examination can continue. If one examiner has to leave, then the other examiner will continue and the recording will be used to ensure that both examiners' opinions are considered in the final result.
44. If you become upset, the examiner will pause the examination to allow you to compose yourself. In the event that you are unable to continue, the marks will be awarded for the areas covered in the examination up until that point. If you are rude then the examiner will terminate the examination.
45. If you feel unwell you should tell the examiner immediately and they will decide how best to proceed.

### Dress code

46. Examiners are not marking you for your personal appearance. You are not required to wear your uniform.

## **Results**

47. In order to pass the examination, you are required to achieve a minimum score in each domain and a minimum total score across all domains and DOS sections. This score is not published in advance.
48. Your examination result will be issued by the AO/HEI within their usual published timescales. You will be informed if you have passed or failed the examination. No further information will be provided.

## **Resitting the examination**

49. As with all other examinations, the number of attempts and re-sit criteria will be set by the AO/HEI. You will be expected to submit new case reports for each examination attempt. It should be noted that, due to the temporary nature of this examination, it is possible that the re-sit examination will be an OSCE. In addition, students who have already sat an OSCE may sit the VN-PBA providing they meet the entry criteria.

## References

Royal College of General Practitioners (2020) *CbD for MRCGP Workplace Based Assessment*.

Available at:

<https://www.rcgp.org.uk/training-exams/training/mrcgp-workplace-based-assessment-wpba/cbd-for-mrcgp-workplace-based-assessment.aspx> (Accessed: 20 May 2020).

Royal College of Obstetricians & Gynaecologists (2020) *Case-based discussions (CbD)* Available at:

<https://www.rcog.org.uk/en/careers-training/about-specialty-training-in-og/assessment-and-progression-through-training/workplace-based-assessments/case-based-discussions-cbd/> (Accessed 20 May 2020)

Royal Pharmaceutical Society (2020) *Case Based Discussions (CBD)*. Available at:

<https://www.rpharms.com/professional-development/foundation/foundation-assessment-tools/case-based-discussions> (Accessed: 20 May 2020)

## Annex A

### Student case/Day One Skill guidance

#### Section 1 - Legislation affecting practice

	Day One Skills	Guidance	Assessed in PBA
1.1	Comply with Health and Safety requirements and local risk factors	Comply with legislative requirements	Yes
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials		Yes
1.3	Take appropriate action and report injury to self or others		No
1.4	Carry out a risk assessment for one area of the practice and instigate appropriate action Note; you are only required to 'instigate appropriate action' i.e follow a risk assessment produced by someone else.		Yes
1.5	Comply with the requirements for reporting notifiable diseases and reportable diseases and injuries under RIDDOR	Professional discussion in relation to notifiable diseases and reporting is an acceptable assessment method for this skill	No
<p>For the case reports submitted, be prepared to provide information, discuss, answer questions and give examples on the following.</p> <p>Health and safety considerations and potential risks when carrying out the clinical skill/nursing intervention (1.1, 1.4) Using risk assessments for at least one area of the practice (1.4) Standard operating procedures and manufactures guidelines you consulted when carrying out the clinical skill/nursing intervention (1.2)</p> <p><i>You are not required to provide information on the following</i></p> <p><i>Details of the specific health and safety legislation (1.1)</i> <i>Reports of injury to self or others or carry out first aid to humans (1.3)</i> <i>Carry out a risk assessment (1.4)</i> <i>RIDDOR (1.5)</i></p>			

	<p><b>Suggested supporting supplementary evidence:</b></p> <p>Standard operating procedure(s) Manufacturer guidelines</p>
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## Section 2 - Communication

	Day One Skills	Guidance	Assessed in PBA
2.1	Communicate effectively using a variety of different methods	Communicate with clients, work colleagues, other veterinary professionals and the public. Communication models should be followed where applicable	Yes
2.2	Create accurate and legible written communications according to practice policy	Records to include: patient records and reports, laboratory reports, admission and consent forms, client home care plans and instructions	Yes
2.3	Access and store client and practice records according to practice policy and data protection laws		No
2.4	Admit patients	Obtain written and verbal informed consent; Respond appropriately to economic status of clients to include insurance and charity referrals	No
2.5	Conduct effective nursing consultations	History taking and appropriate examination; Identifying patients for referral to a veterinary surgeon; Application of treatments; Programmes of preventative medicine; Implant a microchip	No
2.6	Provide discharge information and guidance to owners	Advise clients on safe and correct routes of administration and potential side effects; Demonstrate to clients safe techniques for administering medication; Advise clients on the storage and disposal of medication; Wound care advice; Bandage advice	No
2.7	Complete appropriate paperwork for referral and diagnostic services	To include laboratory samples, clinical histories and hereditary tests	No
2.8	Practise evidence-based nursing	Appraise literature; Discuss findings with practice team	No
2.9	Collaborate with inter-professional colleagues to improve professional practice and relationships	Consult the veterinary team in the event of unexpected medical or surgical complications, serious complaint,	No

		accident or anaesthetic death; Consider mitigating circumstances; Ensure effective protocols are in place; Communicate changes to the practice team	
2.10	Communicate effectively expressing appropriate empathy and sympathy	Prepare the owner for loss; Support the owner through the euthanasia process; Provide follow-up support for a bereaved owner; Maintain and adapt professional approach to the circumstances	No
<p>For the case reports submitted, be prepared to provide information, discuss, answer questions and give examples on the following.</p> <p>Communication with colleagues (2.1) Record keeping methods you have used for the cases submitted (2.2)</p> <p><i>You are not required to provide information on the following</i></p> <p><i>Description of communication models you followed (2.1)</i> <i>Access or storage of patient records (2.3)</i> <i>Admitting or discharging patients (2.4)</i> <i>Conducting nurse consults (2.5)</i> <i>Referring patients (2.7)</i> <i>Appraise literature (2.8)</i> <i>Consult with veterinary teams to improve professional practice and relationships (2.9)</i> <i>Support owners through the euthanasia process (2.10)</i></p>			
<p><b>Suggested supporting supplementary evidence:</b></p> <p>Patient records Laboratory reports Care plans</p> <p>Your entries on these documents must be highlighted to make your entry clear. Please also consider the RCVS Code of Professional Conduct supporting guidance 5 Communication between Professional Colleagues: <a href="https://www.rcvs.org.uk/setting-standards/advice-and-guidance/code-of-professional-conduct-for-veterinary-nurses/supporting-guidance/communication-between-professional-colleagues/">https://www.rcvs.org.uk/setting-standards/advice-and-guidance/code-of-professional-conduct-for-veterinary-nurses/supporting-guidance/communication-between-professional-colleagues/</a></p>			



### Section 3 - Handling and restraint

	Day One Skills	Guidance	Assessed in PBA
3.1	Evaluate behavioural and environmental factors when approaching and handling animals	Recognition of and minimising fear and distress	No
3.2	Transport animals using approved manual handling and lifting procedures		No
3.3	Select and wear appropriate personal protective equipment		Yes
3.4	Demonstrate techniques for approaching and catching animals		No
3.5	Lead and move animals using the most appropriate equipment for the species		No
3.6	Use appropriate restraint methods suitable for the patient and situation with due consideration for animal welfare	Maintain patient's emotional homeostasis and wellbeing; Recognise signs of distress and act accordingly to minimise this; Restrain for clinical examination, sample collection, administration of medicines and introduction of an appropriate airway management device	Yes
	<p>For the case reports submitted, be prepared to provide information, discuss, answer questions and give examples on the following.</p> <p>Restraint methods you used or instructed others to use including any PPE required (3.3, 3.6)</p> <p><i>You are not required to provide information on the following:</i></p> <p><i>Evaluate behavioural and environmental factors when approaching and handling animals (3.1)</i></p> <p><i>Transport animals using approved manual handling and lifting procedures (3.2)</i></p> <p><i>Demonstrate techniques for approaching and catching animals (3.4)</i></p> <p><i>Lead and move animals using the most appropriate equipment for the species (3.5)</i></p>		
	<p><b>Suggested supporting supplementary evidence:</b></p> <p>Patient records Laboratory reports Care plans</p> <p>Your entries on these documents must be highlighted to make your entry clear.</p>		

## Section 4 - Nursing care

	Day One Skills	Guidance	Assessed in PBA
4.1	Use an appropriate model of care to deliver the nursing process and create care plans for a range of disorders and diseases	Interpret nursing care plans and carry out appropriate nursing interventions	Yes
4.2	Carry out a nursing assessment ascertaining information about the patient's normal routine	Food and fluid intake; Urination and defecation; Behaviour (response to pain, strangers, commands etc.); Mobility; Sleep and rest; Maintain your own hygiene levels	Yes
4.3	Perform a clinical examination and record findings	To include temperature, pulse, respiration, weight and capillary refill times/mucous membranes	Yes
4.4	Provide husbandry to animals within a veterinary setting; accommodation, nutrition and excretions	Consider age, species, condition, demeanour and enrichment. Undertake a nutritional assessment according to WSAVA guidelines. Calculate food requirements based on disease and life stage/lifestyle. Manage assisted feeding to include hand feeding, oral hydration and managing and maintaining assisted feeding tubes	Yes
4.5	Groom and bathe patients according to their needs		No
4.6	Assess, monitor, manage and report the status of wounds		Yes
4.7	Apply dressings appropriate to type of wound		Yes
4.8	Apply bandages appropriate to species and condition		Yes
4.9	Administer medicines prescribed by the veterinary surgeon in accordance	To include oral, topical, subcutaneous, intramuscular and intravenous	Yes

	with instructions from the manufacturer		
4.10	Monitor for adverse medication reactions and alert veterinary surgeon		Yes
4.11	Provide fluid therapy to in-patients	Select appropriate fluids according to veterinary surgeon instructions; Select and prepare administration equipment; Place intravenous catheters into appropriate veins; Intravenous catheter management; Calculate amount and rate of fluid to administer; Observe and monitor patients receiving fluids	Yes
4.12	Assess pain and alert the veterinary surgeon	Score and evaluate pain using a validated system; intensity of pain and associated anxiety and behaviour	No
4.13	Perform basic physical therapy techniques to aid mobilisation	To include passive movement and active exercise	No
4.14	Administer first aid for a range of situations within the limits of law and the expertise of the student		No
4.15	Assist with a range of emergency care techniques		No
<p>For the case reports submitted, be prepared to provide information, discuss, answer questions and give examples on the following.</p> <p>Care plans you have contributed to/used (4.1)          Nursing assessments including clinical examinations (4.2, 4.3)          Providing husbandry to patients. Examples include managing feeding, oral hydration, urinary and faecal excretions including appropriate calculations (4.4)          Assessing, monitoring, managing and reporting wounds including application of dressing and bandages (4.6, 4.7, 4.8)          Administration of medication and monitoring for adverse reactions. Completing appropriate calculations (4.9, 4.10)          Providing intravenous fluid therapy including appropriate calculations (4.11)</p> <p><i>You are not required to provide information on the following</i></p>			

	<p><i>Discuss the theory associated with care plans or discuss the different types of nursing care plans (4.1)</i></p> <p><i>Provide information relating to grooming or bathing animals (4.5)</i></p> <p><i>Provide information on pain scoring (4.12)</i></p> <p><i>Explain physical therapy techniques (4.13)</i></p> <p><i>Discuss cases where you have administered or assisted with the administration of first aid or emergency care (4.13, 4.14)</i></p>
	<p><b>Suggested supporting supplementary evidence:</b></p> <p>Care plans</p> <p>Patient records</p> <p>Data sheets for commercial diets, medications and intravenous fluids</p> <p>Standard operating procedure(s)</p> <p>Your entries on these documents must be highlighted to make your entry clear.</p>

## Section 5 - Laboratory techniques

	Day One Skills	Guidance	Assessed in PBA
5.1	Discuss with the veterinary surgeon and prepare for an appropriate sampling strategy	Strategy to include: personal protective equipment (PPE), clipping and preparing sample site, preparation of patient and equipment; calibration of equipment. Strategies prepared for: blood, urine, faeces, skin/hair and tissue biopsies	Yes
5.2	Take appropriate samples	Samples to include: blood, urine, faeces, skin, hair pluck, bacterial swabs	Yes
5.3	Carry out haematological analysis	To include: biochemistry, haematology, packed cell volume, total solids and smear	Yes
5.4	Carry out urinalysis	To include: specific gravity, sediment analysis	Yes
5.5	Carry out faecal analysis.	May include; gross visual analysis; microscopic analysis; quantitative examination; Baermann technique or commercial test kits	No
5.6	Carry out skin and hair analysis	To include: hair pluck, tape strips and coat brushings	Yes

5.7	Use a microscope	To include: low magnification, high magnification and oil immersion. Record Vernier Scale readings	Yes
5.8	Prepare samples for external analysis	To include: accurate completion of documentation, correct packaging and labelling, correct preservation and storage	Yes
5.9	Record laboratory test results and communicate accurately to the appropriate clinician		Yes
<p>For the case reports submitted, be prepared to provide information, discuss, answer questions and give examples on the following.</p> <p>Strategies used and discussions you have had when preparing to take laboratory samples (5.1)          Preparing and using equipment (5.1, 5.2, 5.3, 5.4, 5.6, 5.7, 5.8)          Taking samples (5.2)          Haematological analysis (5.3) and/or Urinalysis (5.4) and/or Hair and skin analysis (5.6)          Use of microscope (5.7)          Preparing samples for external analysis (5.8)          Informing others of the test results (5.9)</p> <p><i>You are not required to provide information on the following</i></p> <p><i>Provide any evidence for faecal sample collection or analysis (5.1, 5.2, 5.5)</i></p>			
<p><b>Suggested supporting supplementary evidence:</b></p> <p>Patient records          Laboratory reports</p> <p>Your entries on these documents must be highlighted to make your entry clear.</p>			

## Section 6 - Diagnostic imaging

	Day One Skills	Guidance	Assessed in PBA
6.1	Prepare and use radiography equipment to produce a diagnostic image		Yes
6.2	Use appropriate personal protective equipment (PPE) and radiation monitoring equipment in accordance with practice local rules		Yes
6.3	Position a patient to obtain a diagnostic image of the area of interest	A variety of species and positions would be expected	Yes
6.4	Process images according to practice procedure		No
6.5	Record exposures and results of images according to practice procedure	Appraise the quality of the image	Yes
6.6	Prepare and support animals during endoscopy investigation		No
6.7	Prepare and support animals during ultrasound investigation		No
<p>For the case reports submitted, be prepared to provide information, discuss, answer questions and give examples on the following:</p> <p>Preparing and using radiographic equipment (6.1)            Personal protective equipment (6.2)            Positioning patient including anatomical landmarks for centring and collimation (6.3)            Appraising the quality of the image (6.5)</p> <p><i>You are not required to provide information on the following</i></p> <p><i>The type of X-ray machine used i.e. traditional or digital (6.1)</i>  <i>Provide details of how the radiograph was processed (6.4)</i>  <i>Provide details of the exposure factors used (6.5)</i>  <i>Endoscopy and ultrasound (6.6, 6.7)</i></p>			
<p><b>Suggested supporting supplementary evidence:</b></p> <p>Patient records            Radiographs</p>			

Your entries on these documents must be highlighted to make your entry clear.

## Section 7 - Dispensing

	Day One Skills	Guidance	Assessed in PBA
7.1	Ensure safe handling and management of pharmaceuticals in accordance with legislation	Store, handle and dispose of medicines in line with legislative guidelines and specific requirements found in the Summary of Product Characteristics (SPC) and with reference to their drug category. To include; Controlled drugs and cytotoxic/cytostatic/certain hormonal medicines which require special handling and disposal	No
7.2	Interpret prescriptions and prepare medicines for dispensing.	Calculate drug dosages and confirm with colleague; Package and label in accordance with legal requirements	No
7.3	Maintain appropriate records	Controlled drugs (CDs) Medicines records	No
This section of the DOS will not be assessed in the VN-PBA.			

## Section 8 - Infection control

	Day One Skills	Guidance	Assessed in PBA
8.1	Recognise clinical signs of common notifiable and zoonotic diseases and undertake strategies to prevent spread and infection		No
8.2	Formulate and implement an appropriate infection control strategy according to practice protocol	Constitute appropriate cleaning and disinfectant solutions; Prepare, clean and maintain patient accommodation that maximises the welfare of hospitalised patients to include isolation accommodation; Prepare, clean and maintain examination rooms, preparation	Yes

		area and operating theatre to include periodic deep clean and after infected cases	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation		Yes
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment	Comply with the World Health Organisation hand washing method; Use and dispose of PPE	Yes
8.5	Carry out effective barrier nursing	Taking into account accommodation, PPE, equipment and patient condition	Yes
<p>For the case reports submitted, be prepared to provide information, discuss, answer questions and give examples on the following.</p> <p>Infection control and hygiene strategies used (8.2, 8.4)  Disposal of hazardous and non-hazardous waste (8.3)  Discuss how you carry out effective barrier nursing (8.5)</p> <p><i>You are not required to provide information on the following</i></p> <p><i>Recognise signs of common notifiable diseases (8.1)</i></p>			
<p><b>Suggested supporting supplementary evidence:</b></p> <p>Patient records  Care plans  Data sheets for disinfectants and other cleaning material  Standard operating procedure(s)</p> <p>Your entries on these documents must be highlighted to make your entry clear.</p>			



## Section 9 - Theatre practice

	Day One Skills	Guidance	Assessed in PBA
9.1	Check and clean surgical instruments	Identify common surgical instruments; Identify and report damage to equipment and instruments	Yes
9.2	Prepare, package and monitor the sterilisation of instruments and materials		Yes
9.3	Prepare the theatre for use based on equipment and procedure		No
9.4	Position patients appropriately on the operating table in accordance with the planned procedure taking into account patient condition		No
9.5	Prepare the surgical site appropriately for the procedure in accordance with veterinary surgeon's preference		No
9.6	Assist as circulating nurse	Open and pass sterile materials direct to scrubbed personnel; Prepare ancillary and powered equipment	No
9.7	Prepare hands and arms using appropriate method		Yes
9.8	Prepare for surgical assistance wearing appropriate attire	Don gown and gloves (closed gloving method) in an aseptic manner to assist with surgery	Yes
9.9	Put on surgical gloves (open gloving method) in an aseptic manner to assist with sterile procedures	Maintain sterility	Yes
9.10	Maintain sterility of self and others during procedures		Yes
9.11	Assist with draping patient maintaining sterility		No

9.12	Monitor and record materials during surgery		No
9.13	Handle and pass instruments and equipment aseptically during surgery		No
<p>For the case reports submitted, be prepared to provide information, discuss, answer questions and give examples on the following.</p> <p>Instrumentation, including recognition of instruments and their use (9.1)          Cleaning, packaging and sterilisation of instruments (9.1, 9.2)          Preparing hands and arms prior to donning surgical clothing (9.7)          Preparing for surgical assistance by wearing surgical attire (9.8, 9.9)          Maintaining sterility of self and others during surgical procedures (9.10)</p> <p><i>You are not required to provide information on the following</i></p> <p><i>Prepare the theatre for use (9.3)</i>  <i>Position patients in the theatre or prepare the surgical site (9.4, 9.5)</i>  <i>Assisting as a circulating nurse (9.6)</i>  <i>Draping patients (9.11)</i>  <i>Monitor and record materials during surgery (9.12)</i></p>			
<p><b>Suggested supporting supplementary evidence:</b></p> <p>Patient records          Care plans          Standard operating procedure(s)</p> <p>Your entries on these documents must be highlighted to make your entry clear.</p>			

## Section 10 - Anaesthesia

	Day One Skills	Guidance	Assessed in PBA
1.	Assess the patient's anaesthetic risks	To include ASA guidelines, behaviour and temperament	No
2.	Prepare for anaesthesia	Check and prepare the anaesthetic machine in accordance with practice protocol; Select and prepare breathing system/circuit and pollution control system in accordance with practice protocol; Select and prepare monitoring equipment according to the patient's condition; Prepare materials and equipment required for induction of anaesthesia to include pharmaceutical agents (according to veterinary surgeon direction) and appropriate airway management device	Yes
3.	Prepare patients for anaesthesia	Administer prescribed premedicants and assess the patient's response; Introduce airway management device (check position and secure airway management device)	No
4.	Maintain and monitor the patient during the anaesthetic process	Measure temperature, heart rate, central and peripheral pulse, respiratory rate; Evaluate depth of anaesthesia; Monitor equipment (systems/circuits and tube, gases and volatile agents, patient monitors); Interpret and report observations to the directing veterinary surgeon (Inconsistencies, patient	Yes

		monitors); Calculate and administer inhalation anaesthesia under veterinary direction (Change the depth or level of inhalation anaesthesia under veterinary direction)	
5.	Complete anaesthetic monitoring records		Yes
6.	Supervise recovery from anaesthesia	Disconnect patients from anaesthetic equipment and materials; Position patients for recovery; Remove airway management device at appropriate stage of recovery; Maintain accurate recovery records; Communicate post operative and/or anaesthetic recovery progress to the supervising veterinary surgeon	No
<p>For the case reports submitted, be prepared to provide information, discuss, answer questions and give examples on the following.</p> <p>Checking and preparing the anaesthetic machine (10.2)          Selecting and prepare all equipment required for anaesthesia including relevant calculations (10.2)          Maintenance of anaesthesia, to include recording (10.4, 10.5)</p> <p><i>You are not required to provide information on the following</i></p> <p><i>Assessing the patient's anaesthetic risk (10.1)</i>  <i>Preparing patient for anaesthesia (10.3)</i>  <i>Details of the patient's anaesthetic recovery (10.6)</i></p>			
<p><b>Suggested supporting supplementary evidence:</b></p> <p>Patient records          Anaesthetic records          Practice standard operating procedures</p> <p>Your entries on these documents must be highlighted to make your entry clear.</p>			

## Annex B

### VN-PBA Case report submission information

#### Introduction

1. This document is intended to provide guidance to the nominated senior member of the practice team on how to submit their student's veterinary nurse case reports to their Centre.
2. The VN-PBA has been designed specifically as an alternative examination to the Objective Structured Clinical Examination (OSCE) to be used during the Covid-19 pandemic, whilst social distancing measures prevent OSCE delivery using the traditional methodology. It should be noted that this examination may not be suitable for apprentices preparing to enter the End Point Assessment.
3. The purpose of the examination is to determine a student veterinary nurse's (SVN) competence across a range of RCVS Day One Skills (DOS) for veterinary nurses in order that a RCVS accredited licence to practise veterinary nursing qualification can be awarded.
4. In order to reduce the impact on the SVNs who were due to sit the OSCE, and therefore have had no opportunity to prove their practical competence before applying to join the RCVS Register of Veterinary Nurses, the VN-PBA has been designed to sample the RCVS Day One Skills (DOS) in an alternative manner. In order to facilitate this, the Student Handbook will provide the necessary tools, guidance and clarity for those wishing to undertake the adapted VN-PBA assessment.

#### VN-PBA case report submission

5. Prior to the examination your student is required to prepare five to eight case reports and supporting supplementary evidence e.g. care plans, patient records, radiographs, SOPs etc, for cases they have been directly involved with since 1 June 2019.
6. Ideally, they should have managed the cases fairly independently, under the supervision of an RVN or MRCVS. Supervision in this context means that the RVN or MRCVS is present on the premises and able to respond to a request for assistance if needed. They will be required to map the case reports to the RCVS Day One Skills for Veterinary Nurses (DOS) being sampled in the examination.
7. The student's Centre will assist them to identify the most appropriate person in their practice to submit their case reports to. The Centre will confirm that you have been selected for this role.
8. You are required to check the documents presented by the student and confirm that the case reports, supporting supplementary evidence and DOS matrix cases are genuine, and the student was actively involved in the clinical procedure or nursing intervention they describe.

You also need to check that the student has not included any information which would go against the practice GDPR policy. These documents will be shared with a number of individuals during the examination.

9. Additionally, you are also required to consider the student's current ability to carry out the clinical procedures and nursing interventions outlined in the case reports and confirm the level of entrustability you currently have in the student completing each section of the DOS. There are six levels of entrustability as outlined in Table 1. For each section of the DOS, please indicate the level of entrustability you would apply to the student.
10. The case reports submitted are used purely to assist the student and examiner to focus the discussion during the examination. Students are not required to produce textbook cases with positive or expected outcomes. The examiner is not judging the decisions made by the veterinary surgeon or veterinary nurse who was supervising the student.
11. The template provided (in the VN-PBA Submission document) must be completed in full and submitted along with the case reports, supporting supplementary evidence and DOS matrix to the Centre. For security reasons, students are not permitted to submit their case reports directly to the Centre.

Table 1: Levels of entrustability

0	Opportunity to perform the skill not available in the workplace	There is no opportunity for the student to perform the skill at the practice.
1	The student has knowledge to perform the skill but is not permitted to practice the skill	Concern about the student's <u>current</u> ability means that they are not currently permitted to perform this skill.
2	The student is only permitted to perform the skill under direct proactive supervision	Direct supervision means that the vet or nurse is present in the room working alongside the student and providing constant instruction, supervision and support.
3	The student is permitted to perform the skill with indirect supervision	Indirect supervision means that the supervisor is not in the room but is in the immediate vicinity and able to provide support. The supervisor may check work product (lab tests, bandage application etc) and double check findings and decisions. The student may frequently ask for support. The practice team is not confident that as a newly registered nurse supervision will not be required.

4	The student is able to perform fully, with distant supervision	<p>Distant supervision means that supervisor is available but trusts the student to perform the skill without intervention or checking.</p> <p>The student is <u>currently</u> able to perform the skill with little intervention from the supervisor but will request assistance for more complex interventions. The practice team is confident that as a newly registered nurse supervision will not be required.</p>
5	The student is able to supervise more junior students, nursing care assistants and other lay people carrying out the skill	The student is currently providing supervision to other students carrying out this skill.

## VN-PBA Case report submission form

Student Name						
Student Number						
MRCVS/RVN Name						
RCVS Number						
Case report number	Level of entrustability (please tick)					
1 Legislation affecting practice	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
2 Communication	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
3 Handling and restraint	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
4 Nursing care	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
5 Laboratory techniques	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
6 Diagnostic imaging	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
7 Dispensing	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
8 Infection control	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
9 Theatre practice	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
10 Anaesthesia	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
<b>Declaration</b>  I have read the case reports presented by the student. I can confirm that I have checked that the cases are genuine, and the student was actively involved in the clinical procedure or nursing intervention they describe. I have ensured that the information provided meets the practice GDPR policy.						
Signature				Date		