

Cambridge Department of Veterinary Medicine, Cambridge University

Accreditation event report

27-31 May 2024

Report to the Council of the Royal College of Veterinary Surgeons (RCVS)
in accordance with Section 5 of the Veterinary Surgeons Act 1966

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List of panel members

Prof Susan Rhind, Co-Chair, RCVS

Dr Niall Connell, Co-Chair, RCVS

Dr Hannah Fitzsimmonds, RCVS

Prof Peter Hastie, RCVS

Dr Pred Prokic, RCVS

Dr Mary Thomson, RCVS

Mr Michal Tkacz, RCVS student representative

Dr Rowland Cobbold, AVBC representative

Dr Princess Moswa-Kato, SAVC representative

Also in attendance:

Mr Jordan Nicholls, RCVS staff

Dr Linda Prescott-Clements, RCVS staff

Ms Kirsty Williams, RCVS observer

Background

1. The Royal College of Veterinary Surgeons has a statutory duty to supervise veterinary degree courses under Section 5 of the Veterinary Surgeons Act 1966, “for the purpose of securing that the courses of study to be followed by students training to be veterinary surgeons and the standard of proficiency required for registration in the register shall be such as sufficiently to guarantee that persons registered in the register will have acquired the knowledge and skill needed for the efficient practice of veterinary surgery”. The Council of RCVS may appoint persons “to visit the universities for which recognition orders...are proposed to be made...and to report on the courses of study, staffing, accommodation and equipment available for training in veterinary surgery and the other arrangements and facilities for such training.”
2. For UK veterinary degrees, it is the UK’s Privy Council which grants recognition to a degree enabling it to be recognised for registration purposes. Recognition is based on advice from RCVS. The accreditation report is first considered by RCVS’s Primary Qualifications Sub-Committee (PQSC), then by the Education Committee (EC) which makes its recommendation to Privy Council.
3. Cambridge Department of Veterinary Medicine, Cambridge University had their previous revisit in 2020 where it had been awarded “full accreditation for the remainder of its seven-year cycle, subject to satisfactory annual monitoring reports”, with the next full visitation being due in 2025.
4. At the meetings in March and October 2023, PQSC reviewed the department responses from Cambridge University regarding the annual monitoring clarifications and additional evidence which the committee had requested. PQSC continued to have significant concerns regarding the programme, and the lack of progress made relating to previous accreditation reports and annual monitoring considerations. It was agreed by both PQSC and EC that an urgent full accreditation event was necessary, the next accreditation event was due in 2025, however, members agreed that an earlier visit was required due to concerns for the students on the programme.
5. Cambridge Department of Veterinary Medicine was contacted and informed that a full accreditation event would be taking place in 2024, on the new 2023 RCVS accreditation standards.
6. Stage one of the event involved consideration of evidence uploaded to the RCVS repository by the department to demonstrate how they were meeting each standard in the six domains. A substantial amount of information and evidence was considered by all members of the accreditation panel and staff within the RCVS Education Department.
7. Panel members completed their initial review of the evidence independently of each other and made an assessment of where it was agreed that standards were met or where further evidence and / or triangulation was required during the visitation stage of the accreditation event.
8. Following initial review of the evidence in the repository, the panel met to consider the evidence available for each standard, which informed their decision on which questions/areas of

exploration were needed on the visit, and which groups of stakeholders were required in order to collect this additional information or triangulate existing evidence.

9. Following this meeting, RCVS staff compiled a detailed list of questions for stakeholder groups, along with specific areas/facilities needing to be seen directly by panel members during the visit, including both on-site and off-campus facilities. This list was then used to draft a visit schedule in conjunction with the department.
10. The panel were present at Cambridge Department of Veterinary Medicine from Monday 27th to Friday 31st May 2024. The panel split into two groups for the tours, and also where accessibility was an issue, however, they remained together for all meetings with stakeholder groups, and the report represents the combined views of the whole team.
11. The evidence rubric can be seen at annex 1. This details the evidence gathered against each recommendation and suggestion, along with an indication if this has now been met or is still outstanding. Commentary and rationale to support any commendations, recommendations and suggestions is provided for context.
12. The department's response to this report can be found at annex 2 and contains a timeline/action plan for the addressing of the recommendations and suggestions, along with any timelines/plans for implementing.
13. The final schedule for the visitation, including the groups of stakeholders met with during the visitation, can be seen at annex 3.
14. The panel members would like to thank Professor Mark Holmes, and the team for the department's hospitality during the visit, and local arrangements. Administration, faculty, staff and students were very accommodating throughout, and their openness was appreciated. The panel was also grateful for all the work that staff had put into preparing the repository of evidence in stage one of the event, which formed the basis for discussions/triangulation during the visitation.
15. The findings in this report are based on the panel members' review. The panel members are not the decision-makers, and their commendations, recommendations and suggestions may be subject to amendment during the committee process.

Summary of findings

Domain 1: The Learning Environment

Commendation: The University farm is to be commended for providing a good learning environment for students. (1.3)

Commendation: The Department is commended for both small and large animal clinical skills facilities and access to these, and the support given by dedicated staff. (1.13)

Recommendation: The Department must continue its plans to implement a medical records system at the earliest opportunity.(1.1)

Recommendation: The Department must ensure a consistent policy in relation to wearing hard hats around horses. (1.2)

Recommendation: The Department must ensure consistent monitoring of formalin levels in the dissection room. (1.2)

Recommendation: The Department must ensure robust implementation of health and safety policies in relation to vehicles and all facilities.(1.2)

Recommendation: The Department must ensure that the teaching and learning in all environments is quality assured. (1.3)

Recommendation: The Department must ensure there is evidence of QA for all of the off-campus learning environments where core teaching is undertaken. (1.4)

Recommendation: The Department must ensure that there is evidence to support that all off-campus learning environments where core teaching is undertaken are quality assessed to ensure high standards of practice and animal husbandry. (1.4)

Recommendation: The Department must establish the workflow of the new farm and equine isolation facility and ensure the remedial works to ensure it's biosecurity. (1.9)

Recommendation: The Department must ensure that the move to a medical records system happens at the earliest opportunity and is configured to allow students to create draft records, search and retrieve records. (1.11)

Suggestion: The Department should consider extending the opening hours of library particularly in the West Hub. (1.12)

Domain 2: Organisation, Culture and Values

Recommendation: The Department must provide clarity on the future of the vet school regarding a definitive timeline for the completion of the General Board review. (2.1)

Recommendation: To ensure accountability for the whole programme, the Department must establish formal contracts with off-campus partners and have oversight of the pre-clinical years. (2.2)

Recommendation: The Department must increase efforts to engage with a range of stakeholders external to the university, especially in relation to the curriculum review. (2.3)

Recommendation: The Department must provide evidence that they actively and consistently promote, monitor and maintain a culture that does not discriminate, and enhances diversity throughout the programme. (2.4)

Recommendation: The Department must provide evidence that a holistic approach to embedding a positive and reflective learning culture throughout the programme has been implemented. (2.5)

Recommendation: The Department must ensure that the sustainability strategy is communicated to, and embedded within, the senior team and wider faculty. Opportunities to embed sustainability concepts throughout the curriculum must be explored. (2.6)

There are no commendations or suggestions for this domain.

Domain 3: Educational Governance and Quality Improvement

Recommendation: The Department must establish oversight of the autonomy and accountability over the entirety of the programme. (3.1)

Recommendation: The Department must ensure there are measurable and demonstrable improvements to the entire veterinary programme with respect to continued quality improvement. (3.2)

Recommendation: The HoS must ensure that the HoD has the ability to contribute to the budget setting process, and has autonomy over in budget spends according to the financial needs of the department. (3.3)

Recommendation: The Department and school must work with the central university to ensure funds are sufficient to sustain and enhance the entire veterinary programme for all current cohorts. This must result in the department having direct input into the setting and scope of all budgets relevant to the entire programme. (3.4)

Recommendation: The Department must ensure staff are sufficient in number to support all areas of the programme, and adequately trained to support the veterinary context teaching in years 1 and 2. (3.5)

Recommendation: The Department must implement a transparent and standardised process for student admissions, that is measurable, recorded and monitored. (3.6)

Recommendation: The Department must implement a more streamlined and effective committee structure with actionable and sustainable influence on educational governance. (3.7)

Recommendation: The Department must implement consistent and robust policies with mechanisms for recording and auditing animal use in teaching, as part of an effective QA plan for the programme. (3.8)

Recommendation: The Department must establish effective mechanisms to identify, record, monitor and support the progress and attainment of different student groups. (3.10)

Recommendation: The Department must complete a holistic curriculum review, covering both preclinical and clinical years, encompassing the entire veterinary programme. (3.11)

Recommendation: The Department must develop mechanisms to monitor attrition and progression in relation to selection criteria. (3.12)

Recommendation: The Department must put in place contracts with off-campus partner locations where core teaching takes place. (3.13)

Recommendation: The Department must complete the work to accurately and comprehensively map assessments against the D1Cs. (3.14)

There are no commendations or suggestions for this domain.

Domain 4: Supporting Students

Recommendation: The Department must work closely with the Colleges to ensure a more consistent and effective approach to student support. (4.1)

Recommendation: The Department must work closely with the Colleges to ensure appropriate and ambitious policies and targets for widening participation, across a wide range of diverse groups. Progress towards meeting targets must be evaluated. (4.2)

Recommendation: The Department must update the website to include accurate information on accreditation status and EMS costs. (4.3)

Recommendation: The Department must ensure that all learning materials comply with accessibility guidance. (4.6)

Recommendation: The Department must work with the Colleges to ensure consistency in support for reasonable adjustments. (4.6)

Recommendation: The Department must implement a more robust and consistent approach to addressing feedback/concerns from students. (4.7)

Recommendation: The Department must develop effective processes for closing feedback loops for students. (4.9)

Recommendation: The Department must ensure the relevant surveys are sent to students across the programme (all years). (4.10)

Recommendation: The department must ensure that students are provided with pig handling opportunities and assessment before attending any pig EMS placements. (4.12)

Recommendation: The Department must standardise its approach to the resolution of student grievances, across all areas of the programme. (4.14)

Suggestion: The Department should improve the transparency of criteria for selection, particularly for the 'pool' candidates, and in relation to non-academic criteria. (4.4)

Domain 5: Supporting Educators

Recommendation: The Department must develop and implement a clear plan to ensure all personnel involved in teaching complete a programme of quality assured teacher training. (5.1)

Recommendation: The Department must ensure all staff have regular appraisals and promotion criteria are transparent to all staff. (5.3)

Recommendation: The school must address staff morale and concerns around workload. (5.5)

There are no commendations or suggestions for this domain.

Domain 6: Curriculum and Assessment

Commendation: The Department is commended for their approach to clinical teaching in year's 4, 5 and 6, in particular the small group work in final year. (6.2)

Commendation: The Department is commended for their approach to research led teaching, with an excellent example being the BOAS group. (6.21)

Recommendation: The Department must continue to develop ILOs across the entire programme and map them accurately to D1Cs. (6.1)

Recommendation: The Department must consider the entirety of the programme in the review process and with respect to delivery of D1Cs. (6.3)

Recommendation: The Department must introduce methodologies which enable them to evidence the focus of the clinical teaching in the general practice context. (6.4)

Recommendation: The Department must complete the identification of the ILOs across the entire programme in a manner that shows a cohesive framework. (6.5)

Recommendation: Programme Learning Outcomes must be communicated to staff and students. (6.5)

Recommendation: The Department must develop more robust mechanisms to evidence how students' experience develops over time to ensure any competence gaps are addressed. (6.6)

Recommendation: The Department must develop core opportunities to teach and assess students in pig handling prior to EMS. (6.8)

Recommendation: The Department must investigate concerns regarding placements when they're raised, and take appropriate action to mitigate in future (or remove placements if appropriate to protect future students). (6.9)

Recommendation: The Department must ensure that EMS is individual to each student so they can tailor their experience based on their own learning needs. (6.11)

Recommendation: The Department must develop an integrated and holistic assessment framework at the programme level. (6.14)

Recommendation: The Department must take a more comprehensive approach to the evaluation of validity and reliability of assessments across the programme. (6.15)

Recommendation: The Department must review the assessment load across the whole programme and implement effective changes with a particular emphasis on the pre-clinical years to ensure a more balanced and manageable assessment load. (6.18)

Recommendation: The Department must implement a more comprehensive approach to moderation and standard setting across the entire programme. (6.19)

Recommendation: The Department must implement a system to provide a robust means of recording the quality and quantity of clinical experience. (6.20)

Suggestion: The Department could better align the teaching of skills and EMS and communicate this with students more effectively. (6.13)

Suggestion: The Department should establish a formally constituted assessment group that has overarching and coordinated strategic oversight and control of assessment for the whole programme. (6.14)

Annex 1: Accreditation rubric

Domain 1 - The Learning Environment														Comments	Recommendations	Suggestions	Commendations	
Standard	Repository Evidence					Further evidence needed on	Visitation Evidence			Recommended Outcome								
	Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3		Type	Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard Met	Partially Met	Not Met					
1.1	The spaces, infrastructure, physical and digital resources across the programme must provide an effective and safe learning and teaching environment, support student welfare, and meet the needs of educators and support staff.	Narrative describing facilities available	I	Staff/Student feedback surveys	O		Yes & Triangulation	Direct observation on tours	Discussions with various stakeholders				X	Some maintenance issues identified. Fire hazard identified in x-ray area. There is currently no clinical/patient record system with an effective retrieval / search function – future plans to introduce Provet system. Spaces – generally effective and safe, though some exceptions found in isolation facilities on the University farm. Infrastructure – mostly OK, except for the lack of a modern record keeping system. Physical resources – some facilities are dated but functional. Some key equipment such as the linear accelerator and the milking robot are reaching the end of service and may not be replaced. Digital resources – Department is making efforts to modernise, and support from IT colleagues appears good. However, upgrades are needed such as Provet, e-portfolio and improving AV resource consistency. Effective learning and teaching resources – students are not easily able to search patient records for their studies	The Department must continue its plans to implement a medical records system at the earliest opportunity.			
1.2	The learning environments across the programme must ensure the health and safety of students, staff and animals and comply with all relevant jurisdictional legislation including health, safety, biosecurity and UK animal welfare and care standards.	Biosecurity manuals	I	Safety Committee minutes	P	Incident logs	O	Yes & Triangulation	Direct observation on tours	Discussions with staff	Discussions with students			X	Some signage issues - contact details for emergency/first aid are not clear where to go. Some out of date drugs being used, other examples of drugs being discarded on the stable floor. Panel had biosecurity concerns within some of the facilities (equine, farm). Department supplied audit data (similar to RCVS PSS) for the RSPCA, however no animal evidence supplied for audits of the World Horse Welfare of Co/WA sites. Some ethical concerns – panel was presented with evidence from more than one source that any farm animal presenting with symptoms that would need isolation would automatically be euthanased, as there are no isolation facilities available onsite. Whilst appropriate footwear is mandated for students undertaking equine handling, hard hats are optional. Evidence seen of a lack of formalin monitoring during pre-clinical practical classes. Panel noted a partially bald tyre on the minibus used for student transportation on the farm rotation. Vehicles used for equine ambulatory practice were well maintained and fit for purpose with respect to student learning, safety, and biosecurity. However, some deficits were noted for the production animal service vehicle (e.g. unroadworthy tyres; poor containment of clinical waste within the vehicle; loose equipment and other materials). Lack of a formal monitoring system for tracking large animal use, and the policy on auditing of animal use is not being followed consistently.	The Department must ensure a consistent policy in relation to wearing hard hats around horses. The Department must ensure consistent monitoring of formalin levels in the dissection room. The Department must establish the workflow of the new farm and equine isolation facility and ensure the remedial works to ensure it's biosecurity. The Department must ensure robust implementation of health and safety policies in relation to vehicles and all facilities.		
1.3	All learning environments (within the school and off-site) must be quality assured to ensure appropriate standards of teaching, support and learning outcomes are achieved.	Equipment QA document (condition and use scored)	P	Student Survey results	O		Yes & Triangulation	Direct observation on tours	Discussions with staff				X	No contracts in place with many offsite learning environments and no clear evidence that formal quality assurance checks are being undertaken of teaching onsite. Ethical concerns regarding farm animals needing isolation and their automatic euthanasia. Panel commended the farm as being an excellent learning environment. On campus learning environments for the clinical years are quality assured through student feedback and a peer review of teaching initiative.	The Department must ensure that the teaching and learning in all environments is quality assured.		The University farm is to be commended for providing a good learning environment for students.	
1.4	The learning environments across all aspects of the programme must demonstrate good practice standards and promote high standards of animal husbandry and care at all times.	PSS approval for onsite facilities	I	Quality Improvement Clinical Governance (QICG) group ToR and sample minutes	P		Yes & Triangulation	Direct observation on tours	Discussions with staff	Discussions with stakeholders			X	The University farm appears to be a good teaching facility. RSPCA is checked through an in-house, RCVS PSS style, audit. However other external sites appear to have no QA. Biosecurity concerns over large animal isolation on campus, should it be required.	The Department must ensure there is evidence of QA for all of the off-campus learning environments where core teaching is undertaken. The Department must ensure that there is evidence to support that all off-campus learning environments where core teaching is undertaken are quality assessed to ensure high standards of practice and animal husbandry.			
1.5	Normal and diseased animals of the principal domestic and non-traditional/exotic species must be available for instructional purposes, either as clinical patients or provided by the school. The school must provide access to sufficient numbers and range of animals and animal material to provide the necessary quantity and quality of animal husbandry and clinical instruction to meet the programme learning outcomes and achieve the RCVS Day One Competences.	Live healthy animal numbers available for teaching	I	Post mortem numbers 2019-2023	I	Vet school graduate survey (5 years)	O	Yes & Triangulation	Direct observation on tours	Discussions with staff			X	Animal numbers across farm, equine and small appear sufficient. Postmortem (PM) number for farm and small animals appear fine, however there are limited equine PM cases. Currently no PM rotation in place, so only opportunity for students comes during 4/5th year. Department indicates that this will be implemented imminently. Animals used in teaching are not sufficiently monitored and audited (recommendation made under standard 1.2).				
1.6	There must be sufficient up-to-date and well-maintained learning and teaching equipment to support the programme effectively, readily accessible by students.	Equipment inventory for teaching	I	Staff facilities survey	P		Yes & Triangulation	Direct observation on tours	Discussions with staff	Discussions with students			X	Good range of clinical skills models seen for small animal, progress is being made with large animal models. Students report that resources are adequate, but have concerns around accessibility of presentations or other teaching resources (inconsistent, not always timely). Students expressed discontent with the removal of the vet school library, and are unhappy with the shorter opening hours of the new West Hub library.				
1.7	The school must ensure students have access to a broad range of diagnostic and therapeutic facilities, of sufficient standard and in number to enable learning outcomes to be met and achievement of the RCVS Day One Competences.	Diagnostic and therapeutic facilities list	I	Teaching venue inspection visit form	P		Yes & Triangulation	Direct observation on tours					X	Full range of diagnostic and therapeutic facilities visited.				
1.8	A supervised field service and/or ambulatory programme must be available as part of the programme, in which students are offered multiple opportunities to obtain clinical experience under field conditions.	8th year Professional Phase Structure Diagram 4th & 5th year Clinical Phase Structure Diagram	I	Staff Survey results report April 2023	O	Vet school graduate survey (5 years)	O	Triangulation	Direct observation on tours	Discussions with staff	Discussions with students		X	Ambulatory vehicles inspected, average group sizes around 5-6 students.				

Domain 1 - The Learning Environment														Comments	Recommendations	Suggestions	Commendations				
Standard	Repository Evidence						Further evidence needed on	Visitation Evidence			Recommended Outcome										
	Type - Input, Process or Outcomes							Type - Input, Process or Outcomes			Standard Met	Partially Met	Not Met								
	Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3											
1.9	Appropriate isolation facilities/provision must be available at all sites where clinical instruction is delivered, or be able to be supplied when needed, to meet the need for the isolation and containment of animals with communicable diseases. Students must receive instruction within this environment on how to provide for animal care in accordance with accepted best practices for prevention of spread of infectious agents.	I	Architectural plans for Equine and Farm isolation areas	I	Isolation protocols and checklists	I	Staff survey results	O	Yes	Direct observation on tours	Discussions with staff				X			The large animal isolation facility does not yet appear fit for purpose – drainage and biosecurity concerns. Department is compiling a 'snag list' for remediation works. Ethical concerns raised as a result of information presented to the panel, from multiple sources, that farm animals presenting with symptoms requiring isolation would automatically be euthanised. Small animal isolation is adequate and training is provided within this environment. Biosecurity concerns in equine as well as large animal.	The Department must establish the workflow of the new farm and equine isolation facility and ensure the remedial works to ensure its biosecurity.		
1.10	Clinical education in veterinary public health training must be complemented by direct exposure in commercially run, approved abattoirs.	I	Bristol VPH Placement Guide	I	Student feedback on Abattoir 2022 visit	O			Yes	Direct observation on tours	Discussions with staff	Discussions with students	X					Abattoir visits reported as useful by students, who appreciate the preparation beforehand with the use of virtual abattoir software. Veterinary public health appears well integrated with pathology.			
1.11	Patient medical records within all sites used for clinical teaching must be comprehensive and maintained in an effective retrieval system to efficiently support the teaching, research, and service programmes of the school.	I	Narrative describing patient medical records	I	UoC GDPR training module outline	P			Yes & Triangulation	Direct observation on tours	Discussions with staff	Discussions with students			X			Current paper-based record system is not efficient for retrieval of information and is not supportive of research. Edits cannot be made (although "additional notes" can be added), students reporting that it can be difficult to follow one case. Student feedback indicates use of and searchability of records is challenging in the current format. Department is attempting to modernise digital resources with plans to introduce Provet. Staff demonstration confirmed that three separate systems are required for one patient record.	The Department must ensure that the move to a medical records system happens at the earliest opportunity and is configured to allow students to create draft records, search and retrieve records.		
1.12	Students and educators must have timely access to literature and information resources relevant to the programme. An appropriately qualified individual must be available to support students and educators in the effective retrieval of information.	I	Narrative describing library resources	I	Year 4 & 5 Student survey	O			Yes & Triangulation	Direct observation on tours	Discussions with staff	Discussions with students	X					Vet school library has moved from the Department to the West Hub – location is very close, so access is not an issue, however the opening hours are now shorter. Plenty of library facilities available for the pre-clinical years – both departmental and individual College facilities. No reports of issues accessing digital resources. Wi-Fi access available at offsite locations.	The Department should consider extending the opening hours of library particularly in the West Hub.		
1.13	Students and educators must have timely access to non-animal resources relevant to the programme.	I	Clinical skills centre equipment list	I	Clinical skills centre details (available clin skills/species)	I			Yes & Triangulation	Direct observation on tours	Discussions with staff	Discussions with students	X					Good small animal clinical skills facilities available with 24 hour access. New large animal clinical skills resources available, which show potential for expansion.			The Department is commended for both small and large animal clinical skills facilities and access to these, and the support given by dedicated staff.
1.14	The school must establish post-graduate programmes such as internships, residencies, and advanced degrees (e.g., MSc, PhD), that enrich, complement, and strengthen the professional programme.	I	Details of post-grad programmes	I	PhD student training modules	P			Yes	Discussions with stakeholder groups			X					Interns and residents in small animal met with PhD students in place.			

Domain 2 - Organisation, Culture and Values																	
Standard	Repository Evidence						Further evidence needed on visitation?	Visitation Evidence			Recommended Outcome			Comments	Recommendations	Suggestions	Commendations
	Type = Input, Process or Outcomes							Type = Input, Process or Outcomes			Standard						
	Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Met	Met	Not Met				
2.1	The school demonstrates effective strategic & operational planning, including evidence that goals are being achieved in a timely manner.	Mission statement	I	list of items already delivered from the operating plan.	O	Strategic and teaching operating plan in place 2022-2025	I	Yes	Discussions with senior team	Discussions with staff			X	<ul style="list-style-type: none"> The ability to effectively implement the strategic plan is limited as the Board review of the Vet School continues (undertaken by Cambridge University), with no clear timeframe for delivery. The interim Head of Department does not appear to be party to the review, which is concerning as the potential outcomes of the review are wide-ranging and significant. Panel evidenced several examples of previous goals not being achieved in a timely manner. For example, implementation of the Provost record system and curriculum reviews. Operational planning appears to be limited to the clinical years of the programme, with little direct oversight of the pre-clinical part of the programme or ability to influence years 1-2. 	The Department must provide clarity on the future of the vet school regarding a definitive timeline for the completion of the General Board review		
2.2	The school must have a system in place to identify, actively monitor and address risks to any aspect of the vet programme.	Risk register provided by Vet School including current actions the School is doing to mitigate these risks.	I	Vet Med Business Continuity Plan	P	Audit trail of actions	O	Yes & triangulation	Discussions with senior team	Discussions with staff			X	<ul style="list-style-type: none"> Head of Department (HoD) reported that he is aware of some major risks that are ongoing but is unable to manage these as things are often out of their hands as a result of the Board review / College control. Panel evidenced that there was very little oversight from the Department of the pre-clinical part of the programme. Unable to evidence a clear, overarching, senior team dynamic oversight of risk. Panel noted no recognition of the central University review of the Department within the risk register. There is no recognition of risk around external placements / partner practices, and no formal agreements or contracts are in place. Health and Safety appears to be adequately monitored, evidence through detailed Health & Safety Committee minutes. 	To ensure accountability for the whole programme, the Department must establish formal contracts with off-campus partners and have oversight of the pre-clinical years.		
2.3	The school can demonstrate a culture which is inclusive, actively seeking and responding to feedback from stakeholders, and involving them in decisions relating to programme development, delivery, and enhancement.	QA strategic plan	I	Inclusivity form with anonymised responses	P	list of changes that have been implemented are provided	O	Yes & triangulation	Discussions with senior team	Discussions with staff	Discussions with stakeholders		X	<ul style="list-style-type: none"> Internal staff feedback is sought when considering more minor programme changes, however feedback loops are not always closed when things are actioned. There appears to be limited engagement with external stakeholders, for example during curriculum reviews. Limited discussions between pre-clinical and clinical make it challenging to demonstrate an inclusive culture where feedback is sought and considered regarding programme development, delivery and enhancement. 	The Department must increase efforts to engage with a range of stakeholders external to the university, especially in relation to the curriculum review.		
2.4	The school must actively promote and maintain a culture that does not discriminate and enhances diversity, consistent with applicable law. Diversity may include, but is not limited to, race, religion, ethnicity, age, gender, gender identity, sexual orientation, cultural and socioeconomic background, national origin, and disability. There must be reporting mechanisms in place for any individual to raise concerns about discrimination and harassment. Universities must be prepared to withdraw from teaching contracts with partner practices / organisations if they fail to respect the guidance for this standard.	Student AHMS handbook and EMS guidance	I	Minutes from the Equality and Diversity Committee	P			Yes	Discussions with senior team	Discussions with staff	Discussions with students		X	<ul style="list-style-type: none"> Diversity targets are in place with regards to social deprivation. There does not appear to be a directed approach to admissions targets in other categories, for example, ethnicity. Reporting mechanisms for students on placement exist, however the panel evidenced inadequate methods of follow up and inconsistency in approach with regards to discrimination. For example, the xxxx reported that it was "not their job" to follow up on such reports. Additionally, for placements where Black, Asian and students from ethnic minority groups have experienced discrimination, a "red flag" is added to the placement on the EMS database alerting such students to avoid. Problematic placements are not removed from the database despite issues, which may validate discriminatory behaviour in the eyes of other students. Evaluation of admissions processes in relation to equality, diversity and inclusion (EDI) appears to be done at a high level. Such evaluations are reported verbally to the Education Committee - data limited / unavailable. It was reported that it was not possible to have consistency in approach across 31 colleges. Department indicated that it would like to change the admissions process but is powerless to do so. Due to various systems being under College control, there appears to be inconsistent approach to accessibility (for example, wheelchair users, learning disabilities, etc.) Staff aware that they can raise concerns through their line manager or the HR department if needed, and that they would find the relevant policies online. Positive student feedback regarding adjustments made to schedule to accommodate religious needs. Staff commented to panel that, with regard to reported concerns on placements, students need to sometimes "man up" instead of reporting issues. 	The Department must provide evidence that they actively and consistently promote, monitor and maintain a culture that does not discriminate, and enhances diversity throughout the programme		
2.5	The school must demonstrate a positive learning culture that investigates, reflects, and learns from mistakes and adopts effective reporting mechanisms and sharing of best practice. Students and staff should feel safe in raising and reporting concerns, and these must be dealt with effectively.	annual review process	I	Examples of completed forms are provided	P	List of changes following feedback	O	Yes & triangulation	Discussions with senior team	Discussions with students			X	<ul style="list-style-type: none"> Staff indicate that they can raise any concerns with their line manager or HR if required. Interim HoD reported to be available and approachable. Students have multiple avenues for raising concerns, and would depend on who they felt most comfortable approaching (College, Director of Studies (DoS), supervisor, etc.) Positive experience reported in general by students in clinical years. Consistent evidence of reporting of concerns regarding pre-clinical years, and evidence suggested that these years are not prioritising the changes required. Evidence suggests that a learning culture is not yet embedded, and there does not appear to be an holistic approach to change. Pre-clinical areas are completely siloed. 	The Department must provide evidence that a holistic approach to embedding a positive and reflective learning culture throughout the programme has been implemented.		
2.6	The school must demonstrate a commitment to environmental sustainability, including consideration of the impact of delivering the programme on the environment.	job description for a new role the CUVS Environmental Officer	I	University waste strategy policy.	I	publishing reports of sustainability	O	Yes & triangulation	Direct observation on tours	Discussions with staff	Discussions with students		X	<ul style="list-style-type: none"> Students receive one lecture on sustainability. Some areas of the University farm prioritise environmental sustainability. VPH course mapping links to sustainability goals. Panel informed by senior team that there is a sustainability champion, and whilst on paper there is a sustainability strategy, this does not appear to have been communicated/implemented through the senior team and wider faculty 	The Department must ensure that the sustainability strategy is communicated to, and embedded within, the senior team and wider faculty. Opportunities to embed sustainability concepts throughout the curriculum must be explored.		

Domain 3 - Educational Governance and Quality Improvement														Comments	Recommendations	Suggestions	Commendations	
Standard	Repository Evidence					evidence needed on Visitation?	Visitation Evidence			Recommended Outcome								
	Type	Input, Process or Outcomes	Supporting evidence # 2	Type	Supporting evidence # 3		Type	Input, Process or Outcomes	Supporting evidence # 3	Standard	Partly Met	Not Met						
Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type	Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard	Partly Met	Not Met	Comments	Recommendations	Suggestions	Commendations			
3.1	The school must be part of an accredited institution of Higher Education and be recognised and autonomous within that institution with accountability for the quality of the veterinary programme (including the RCVS standards being met).	Programme specification	I				Yes	Discussions with senior team	Discussions with staff				X	Department is part of an accredited institution of Higher Education. There is no autonomy or accountability for the pre-clinical programme and as of the visitation, little autonomy evidenced over the clinical programme. Whilst this is an accredited institution with a recognised department, the remainder of Standard 3.1 cannot be met.	The Department must establish oversight of the autonomy and accountability over the entirety of the programme.			
3.2	The school demonstrates a commitment to continuous quality improvement across all accreditation standards and aspects of the programme, informed where possible by measurable outcomes and stakeholder engagement.	Various Quality Assurance roles within faculty	I	Aims and Strategic Priorities of Depo. Vet. Med.	I	Outcomes List for Equip	O	Yes & triangulation	Discussions with senior team	Discussions with staff	Discussions with students			X	Student feedback is collected, however change appears to happen in silos rather than holistically. There is little external stakeholder engagement from the department e.g. seeking input into their curriculum review. Due to the programme being under review by the Board, the focus is on immediate plans rather than continuous quality improvement (CI). Recommendations and suggestions made as a result of RCVS accreditation visits since 2015 have not been addressed. Formal records in the dissection lab stopped in 2019, and began again 1 week before the RCVS visitation. Staff reported the pre-clinical curriculum review as "going through the motions" and that "nothing will change" – it was further noted that each subject area is doing their own reviews independently, with no central oversight.	The Department must ensure there are measurable and demonstrable improvements to the entire veterinary programme with respect to continued quality improvement.		
3.3	The head of school or dean must be an MRCVS. They must have appropriate knowledge and expertise of the veterinary profession, academic affairs and leadership, and have control over the budget for the veterinary programme.	HoD MRCVS status	I	HoD CV	I		Yes	Discussions with senior team	Discussions with staff				X	HoD is interim, no indication of how long this is for. Appears to be no stability of leadership. HoD has little control over the budgets currently. Longer term, much of the budget control rests within the Colleges for large amounts of the programme (admissions, wellbeing, academic support. This will have a direct impact on their influence over the direction of the programme). Budget is set by the University, with little transparency as to how. Each year, departments traditionally receive an amount of money to support the core salaries and running costs of the department. This is known as a Chest Allocation. Significant financial losses are recorded annually. Viability of the Department forms part of the general Board review. HoD reported "very little input to Chest Allocations". HoD has some autonomy on creation of and recruitment to staff posts. Large ticket items such as the linear accelerator and making robots are coming to end of life and there are plans in place for their replacements. Allocation of funds reported as a "total surprise" to the HoD (for example, funds for the new roof on one of the farm buildings) Note – subsequent dialogue confirmed the previous HoD had been informed and was part of the decision-making process. HoD stated that this funding model, whilst good for providing annual funding for projects, does not allow for longer term planning, as future available budgets are not known and cannot be taken into account. Head of School (HoS) (Cambridge School of Biological Sciences, under which the Department of Veterinary Medicine sits) has the authority to delegate finances to the HoD.	The HoS must ensure that the HoD has the ability to contribute to the budget setting process, and has autonomy over budget spends according to the financial needs of the department.			
3.4	Finances must be reviewed regularly in line with strategic plans and be sufficient to sustain and enhance all aspects of the veterinary programme(s) for the duration of all current cohorts, including teaching and learning, infrastructure, teaching resources and students' staff support.	End of year financial summary reports	O	Chest Allocation reports (main source of funds from central university).	I	Financial overview document	I	Yes & triangulation	Discussions with senior team	Discussions with staff			X	Finances are regularly reviewed, but there is no opportunity to influence the budget. The deficit is accumulating, however there are no plans to address this in the short term. Staff CPD costs and student EMS costs are supported from within the Department's own budget.	The Department and school must work with the central university to ensure funds are sufficient to sustain and enhance the entire veterinary programme for all current cohorts. This must result in the department having direct input into the setting and scope of all budgets relevant to the entire programme.			
3.5	The managerial, academic and support staff must have the necessary skills and experience for their role and be sufficient in number to support the effective design, delivery and quality assurance of all aspects of the programme.	Staff list	I	Job descriptions of multiple roles included	I	Staffing changes in academic year 2022-2023	P	Yes	Discussions with senior team	Discussions with staff	Discussions with students			X	The expertise of staff appear to support the programme, however there is limited control over staffing numbers. Staff have the experience to support the design, delivery and QA of the programme, but processes to facilitate this are not consistent. Concerns raised by multiple stakeholders regarding staffing within different areas being insufficient in number and the resulting impact on workload of existing staff, as well as the affect this has on staff wellbeing. Concerns raised by students regarding the ability of some lecturers in contextualising content to be relevant to veterinary, during the pre-clinical years. Not all pre-clinical staff have completed (or are working towards) a quality assured programme of teacher training.	The Department must ensure staff are sufficient in number to support all areas of the programme, and adequately trained to support the veterinary context teaching in years 1 and 2.		
3.6	The school must demonstrate that the recruitment, selection and appointment of students, educators and staff are open, fair, transparent and free from bias.	Admissions policy (students)	I	Code of Practice, Access and Inclusion for Disabled Students and Equality and Diversity policies	I	Undergraduate admissions statistics 2022	O	Yes & triangulation	Discussions with senior team	Discussions with staff	Discussions with students			X	EDI policy consistency is challenging across the College system – results in a lot of variation. Some indications of a positive outreach strategy – each College is given a region of the country to target. HoD commented that the process for recruiting students through the Colleges "is not fair". No evidence found regarding openness or fairness of staff / educator recruitment.	The Department must implement a transparent and standardised process for student admissions, that is measurable, recorded and monitored.		
3.7	The school must have effective and transparent educational governance systems, with formal committee structures, which develop and continually monitor, assure, and enhance the quality of veterinary education and the student experience across all aspects of the programme.	Various committees and formal structure of the group/committees evidenced, including Student Consultative Committee	I	Outcomes List for Equip	O	Annual Review Process	P	Yes	Discussions with senior team	Discussions with staff				X	A complex systems of committees and reporting lines. Senior staff members indicated that they fail to understand this, and would like to change things to be more intuitive. Evidence shown to demonstrate a lack of effectiveness and transparency.	The Department must implement a more streamlined and effective committee structure with actionable and sustainable influence on educational governance.		
3.8	The school must have robust mechanisms for quality assurance and improvement, embedded into policy and processes, which routinely gather data to demonstrate that organisational and educational objectives are being met and opportunities for improvement are identified and responded to.	Staff survey responses	O	Outcomes List for Equip	O	Quality Assurance Plan	I	Yes & triangulation	Discussions with senior team	Discussions with staff				X	Mechanisms for QA and QI of the programme include a committee and a QA plan, however there is limited evidence available on their effectiveness. Quality data regarding animal use is very poor. Department had planned to record non-invasive use of teaching horses in 2022, but reported that this was "a journey" and currently wasn't robust.	The Department must implement consistent and robust policies with mechanisms for recording and auditing animal use in teaching, as part of an effective QA plan for the programme.		
3.9	Mechanisms for quality assurance and improvement must encompass both internal and external review and data collection and analysis.	External subject reviews 2017-2020 on some teaching modules. Internal review processes evidenced with Annual Review Reports	P	Blank template for External Examiner Report	I	Various survey results included (NSS, MED, RCVS Grad, Vet School Grad)	O	Yes & triangulation	Discussions with staff					X	Quality data included Module Evaluation Questionnaires (MEQs), results from the National Survey or Students (NSS) and the graduate survey data provided by the RCVS.			

Domain 3 - Educational Governance and Quality Improvement														Comments	Recommendations	Suggestions	Commendations	
Standard	Repository Evidence						evidence needed on Visitation?	Visitation Evidence			Recommended Outcome							
	Type - Input, Process or Outcomes							Type - Input, Process or Outcomes			Standard	Partly Met	Not Met					
	Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Met	Met	Not Met					
3.10	The school must evaluate students' performance, progression and outcomes with respect to information on equality and diversity and provide support for groups where disparities are identified.		Awarding Gaps VetST summary	O	Awarding Gaps by Student Characteristic graph	P		Yes & triangulation	Discussions with senior team	Discussions with staff	Discussions with students			X	Repository contained evidence of awarding gaps by student characteristic. No evidence of support for WP students or those belonging to an ethnic minority group, where lower progression rates are evidenced (particularly within pre-clinical exams). HfO confirmed that there is no targeted additional support for identified groups of students. Panel saw no data analysis in support of this standard for the clinical years.	The Department must establish effective mechanisms to identify, record, monitor and support the progress and attainment of different student groups.		
3.11	The school must regularly review curricula, using available quality assurance data and feedback from students, educators and stakeholders, to ensure standards are being met and maintained.		Clinical Curriculum Review Group minutes	I	Teaching Operations Committee minutes	I	Proposed Remit MVMCR 'Deep Dives'	I	Yes	Discussions with senior team	Discussions with staff	Discussions with stakeholders		X	The review of the pre-clinical curriculum is being done in silos and is more of an update to content than a structured review. Staff mentioned that "nothing will change". Large scale reviews of the pre-clinical and clinical curricula are separate, demonstrating that this is not a cohesive programme. Reviews are not "regular", and take a long time, can take years to report. Curriculum reviews have been a focus of recommendations from accreditations for several years, yet still have not been addressed. No input is sought in this area from external stakeholders.	The Department must complete a holistic curriculum review, covering both preclinical and clinical years, encompassing the entire veterinary programme.		
3.12	The school must have effective processes in place to monitor attrition and progression rates in relation to admissions and selection criteria and student support if required.		Procedure for Withdrawal document	I				Yes	Discussions with staff				X	Department states that attrition from the programme is low. Staff are monitoring attrition and progression holistically, but not as it relates to selection criteria.	The Department must develop mechanisms to monitor attrition and progression in relation to selection criteria.			
3.13	The school must have effective processes in place to ensure that a continual commitment to student learning and teaching is demonstrated within all locations where clinical teaching takes place.		Staff Training in Teaching Overview Paid IFME course available to all staff and Senior Clinical Training Scholars	I	Abattoir Placement Agreement Teaching Venue Inspection Visit report example	I	Leavers Surveys for the past 5y, RSPCA MEQ + RCVS Grad Outcomes Surveys	O	Yes & triangulation	Discussions with senior team	Discussions with staff	Discussions with stakeholders		X	No contractual agreements are in place with any partner sites where core teaching takes place off campus. Teaching provided within the veterinary hospital was reported to be a good experience.	The Department must put in place contracts with off-campus partner locations where core teaching takes place.		
3.14	The school must demonstrate that only students who are fully Day One Competent are able to graduate.		E-portfolio content overview with mapping to DTCs	I	Summary of the examination system for preclinical and clinical years	I	RCVS and Vet School Graduate Surveys	O	Yes & triangulation	Discussions with senior team	Discussions with staff			X	Insufficient evidence provided to fully meet the standard. Whilst outcomes data does suggest that the graduates are competent, mapping is not consistently accurate and therefore staff cannot be assured that students are meeting all Day One Competences	The Department must complete the work to accurately and comprehensively map assessments against the DTCs.		

Domain 4 - Supporting Students													Recommended Outcome	Comments	Recommendations	Suggestions	Commendations		
Standard	Repository Evidence						Further evidence needed on	Validation Evidence			Recommended Outcome								
	Supporting evidence # 1	Type	Type = Input, Process or Outcomes	Supporting evidence # 2	Type	Supporting evidence # 3		Type	Type = Input, Process or Outcomes	Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3						Standard	Partially
4.1	Effective processes must be in place to support the physical, emotional and welfare needs of students.	Health and Wellbeing Plan 2022 - 2025	I	Flowchart signposting support for students	P	Annual Pastoral Survey 2022-2023	O	Yes & Triangulation	Discussions with staff	Discussions with students			X			-Panel found that support for students is inconsistent. Some evidence of very good support services in place, however panel also presented with examples of ineffective support. -Levels of support are dependant on which College you attend, and the individuals within, which shows that the systems are not effective. -Variations in levels of support are significant across the Colleges.	The Department must work closely with the Colleges to ensure a more consistent and effective approach to student support.		
4.2	The school must have a strategy for widening participation which considers all aspects of diversity and engages students from different ethnic and social backgrounds. The school must be proactive in their marketing to attract a diverse cohort of applicants and regularly review, and provide evidence of, their progress towards targets.	Proposal from VSCAC re applicants with disabilities	I	Admissions Strategy Committee minutes 2022-2024	P			Yes	Discussions with staff	Discussions with students			X			-Department has introduced a £75 Engineering and Science Admissions Test (ESAT) which all students have to undertake when submitting an application to the vet school. -Department reports that students can apply for financial aid if required. -University set targets are in place for widening participation (WP), no targets considered for other aspects of diversity. -University has outreach systems across all regions, but no evidence provided of data analysis to evaluate if this is effective.	The Department must work closely with the Colleges to ensure appropriate and ambitious policies and targets for widening participation, across a wide range of diverse groups. Progress towards meeting targets must be evaluated.		
4.3	The school must provide accurate and current information regarding the educational programme easily available for prospective students. The information must include the accreditation status of the degree course (whether by RCVS or other relevant accrediting bodies), selection and progression criteria, the demands of the course and the requirements for eventual registration/licence, including fitness to practise.	Admissions Presentation for prospective students	I	Website information	I			Yes	Discussions with staff	Discussions with students			X			-AVBC and SAVC accreditation is not referenced on the vet school website. -Insufficient detailed information regarding approximate EMS costs are not on the website.	The Department must update the website to include accurate information on accreditation status and EMS costs.		
4.4	Selection and progression criteria must be clearly defined, defensible, consistent and free from discrimination or bias. The criteria must also include relevant factors other than academic performance. The academic requirements for entering the programme must be sufficient for the student to cope with the demands of the programme upon entry.	Selection Policy	I	Admissions Strategy Committee minutes 2022-2024	P	University of Cambridge Vets 2024 Applicant Survey	O	Yes & Triangulation	Discussions with staff	Discussions with students	Discussion with external stakeholders		X			-The process is clearly defined, however, discussions with senior team members confirmed that there is scope for bias. -Mixed messages arising from sessions regarding the importance of the personal statement in admissions. -The process considers contextual flags. -The process appears more susceptible to bias for "pool" candidates (candidates that did not get into the College of their choice go into a pool from which other Colleges can assign their remaining places).	The Department should improve the transparency of criteria for selection, particularly for the 'pool' candidates, and in relation to non-academic criteria.		
4.5	The school must demonstrate their selection and progression criteria and processes are effective in identifying students with the potential to achieve the RCVS Day One Competences. This must be achieved through regular and effective training for staff involved and the routine collection and analysis of selection and progression data, to enable them to evaluate, reflect and adjust the selection and progression criteria where necessary.	Admissions training for staff details	I	Admissions Strategy Committee minutes 2022-2024	P			Yes	Discussions with staff	Discussions with students			X						
4.6	There must be clear policies and procedures as to how applicants with disabilities or illness will be considered and, if appropriate, accommodated on the programme, taking into account the requirement that all students must be capable of meeting the RCVS Day One Competences by the time they graduate.	UoC Code of Practice Access and inclusion for disabled students	I	Student adjustment case studies	P	Details of attainment within Student Support Document (SSD) group	O	Triangulation	Discussions with senior team	Discussions with staff	Discussions with students		X			-Some student reports of extremely good support, whereas others reporting delays or issues with accessing relevant support across the Colleges. Effectiveness of support appears very inconsistent. -There is limited oversight from the Department in this area as responsibility rests with the individual Colleges. -Panel heard of inconsistencies in staff making accessibility adjustments to lectures/presentations.	The Department must ensure that all learning materials comply with accessibility guidance. The Department must work with the Colleges to ensure consistency in support for reasonable adjustments.		
4.7	Students must be actively supported to develop resilience, self-reflection and professional values in line with the RCVS Code of Professional Conduct and must not be subject to behaviour which undermines their professional confidence, performance or self-esteem at any sites where teaching and / or learning takes place.	Euthanasia communication skills practical	I	E-Portfolio exercise	P	Vet School Graduate Survey	O	Triangulation	Discussions with senior team	Discussions with staff	Discussions with students		X			-Student reports of racism and concerns evidenced as not being taken seriously or explored effectively. -Some reports and evidence presented where students were subjected to behaviour which undermines their resilience and self-confidence.	The Department must implement a more robust and consistent approach to addressing feedback/concerns from students.		
4.8	Students must receive continuous and effective educational support to enable them to achieve the learning outcomes of the programme and the RCVS Day One Competences, including the provision of regular, constructive and meaningful feedback on their performance and progress in a timely manner.	Rotation handbooks	I	Examples of completed CRAFs and DOPs with feedback	P	VSCS Survey Lent 2024	O	Yes & Triangulation	Discussions with staff	Discussions with students			X			-Educators provide feedback on student performance during small group teaching. -The feedback appears to be mostly informal in the clinical years, though students report this as being effective. -Overall, the educational support and tutoring systems appear effective, partly due to there being multiple options through the Director of Studies (DoS), the Veterinary School Clinical Supervisor (VSCS) and tutors.			
4.9	Effective processes must be in place by which students can convey their needs and wants to the school. The school must demonstrate how student feedback is considered and acted upon.	Teaching-related committees Remits and Roles July 2023	I	Feedback mechanisms (module and programme levels)	P	Student Voice Annual Clinical Phase Course Survey 2023 results	O	Triangulation	Discussions with senior team	Discussions with staff	Discussions with students		X			-Processes are in place, and utilised by students, however their feedback is not consistently acted upon or communicated back (the feedback loop is not always closed). -Students reported that they often had to close the feedback loops themselves rather than there being an effective plan/process in place to ensure this happens.	The Department must develop effective processes for closing feedback loops for students.		

Domain 4 - Supporting Students														Comments	Recommendations	Suggestions	Commendations
Standard	Repository Evidence						Further evidence needed on	Visitation Evidence			Recommended Outcome						
	Type = Input, Process or Outcomes		Supporting evidence # 2		Supporting evidence # 3			Type = Input, Process or Outcomes	Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard	Partially				
Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Met	Met	Not Met					
4.10	The school must provide students with a mechanism, anonymously if they wish, to offer suggestions, comments, and complaints regarding the compliance of the school with the RCVS standards for accreditation and that Day One Competences are being met. All such feedback from students must be reported to the RCVS as part of the annual report.	Accreditation Compliance Form 2024	I				Yes	Discussions with senior team	Discussions with staff	Discussions with students		X		-Mechanisms for raising concerns regarding compliance with RCVS standards is in place, via an email sent to students in year 4-6. No data presented of outcomes. -The email to students also references compliance with AVMA standards, despite not being AVMA accredited, and there are no mentions of SAVC or SAVC standards. -Panel could not establish whether students in years 1-3 are communicated with regarding this standard.	The Department must ensure the relevant surveys are sent to students across the programme (all years).		
4.11	The basis for decisions on progression (including academic progression and professional fitness to practise) must be explicit and readily available to the students. The school must provide evidence that it has effective processes in place to identify and provide remediation and appropriate support (including termination) for students who are not performing adequately in any area of the programme.	Various student policies relating to marking, assessment and results	I	Examples of remediation	P		Yes	Discussions with staff				X		-The basis for decisions on progression is clear. -Remediation efforts appear to be effective.			
4.12	The school must ensure that students are competent and sufficiently experienced in animal handling before they begin clinical placements and / or workplace learning, and that they are fully briefed regarding all relevant Health and Safety matters.	Various animal handling assessment criteria/information for students	I	Examples of 1st Year animal handling assessments	P	OSCE analysis	O	Triangulation	Discussions with senior team	Discussions with staff	Discussions with students		X	-Students are provided with animal handling experience and this is assessed for the majority of UK species, with the exception being pigs, where experience/assessment was inconsistent.	The department must ensure that students are provided with pig handling opportunities and assessment before attending any pig EMS placements.		
4.13	Mechanisms for dealing with student misconduct and/or the exclusion of students from the programme, either for academic reasons, misconduct or under fitness to practise procedures, must be explicit.	UoC Guidance on sanctions oct_19, and UoC statutes on FIP and MVSPF procedures	I	Veterinary FIP case studies	P		Yes	Discussions with senior team	Discussions with staff			X					
4.14	The school must have in place effective processes for the resolution of student grievances.	Department student complaints policy	I				Yes	Discussions with senior team	Discussions with staff	Discussions with students		X		-Processes are in place, but these are not consistently effective. -Reports of students concerns being dismissed, students being warned that they were making too many complaints, and reports of students being encouraged not to pursue complaints formally.	The Department must standardise its approach to the resolution of student grievances, across all areas of the programme.		
4.15	School policies for managing appeals against decisions, including admissions, academic and progression decisions, must be transparent and publicly available.	Undergraduate admissions appeals and complaints policy and procedure	I	UoC procedure for review of decisions of university bodies procedure	I		Yes	Discussions with senior team	Discussions with staff	Discussions with students		X					

Domain 5 - Supporting Educators														Comments	Recommendations	Suggestions	Commendations		
Standard	Repository Evidence					Further evidence needed	Visitation Evidence			Recommended Outcome									
	Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3		Type	Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Standard Met	Priority Met	Not Met						
5.1	The school must ensure that all educators who are involved with student teaching have successfully completed, or are working towards, a quality assured programme of teacher training, which effectively prepares educators for their roles.	I	List of academic staff and their qualifications at	I	2023-2024 Teaching Guide Section 6	I	List of SCTS and JCTS and teaching undertaken.	I	Yes	Further evidence provided on visit	Discussions with senior team	Discussions with staff and other stakeholders		X		-Good evidence presented that staff undertaking teaching in years 4-6 are attending relevant training sessions, with many taking part in the Integrated Foundations of Medical Education (IFME) programme. -Some inconsistency of messaging regarding training of teachers in the pre-clinical departments, including supervisors, interns, residents and final year vet students are all involved in teaching and have not all attended training.	The Department must develop and implement a clear plan to ensure all personnel involved in teaching complete a programme of quality assured teacher training.		
5.2	All educators involved in teaching and / or supporting students' learning within the programme must demonstrate their continued competence and effectiveness.	I	Staff training and development courses lists	I	MEQ results	I		Yes	Discussions with senior team	Discussions with staff			X			-Whilst CPD is supported financially within the Department, some staff under workload pressures (resulting from staff shortages) indicate that it is difficult to find the time to undertake CPD. -Peer observation of teaching has been implemented. This is not currently mandatory, however most staff are engaging with the process.			
5.3	An appraisal system for all staff must be in place. The school must provide evidence that it has a comprehensive, effective and publicised programme for the professional development of staff. Promotion criteria must be appropriate, clear and explicit.	P	HR team plan for staff review and development	P	Appraisals tracking document 2022	P		Yes	Discussions with senior team	Discussions with staff			X			-There is an appraisal system in place but it does not appear to be consistently used by all line managers. Some reported holding annual appraisals, others less frequently. -Promotion criteria are not clear, and is stated as an "annual competition". -The current workload model is not understood and needs to be updated/implemented consistently. -Some staff reported not having appraisals for a number of years, and feedback indicates that one reason for staff attrition is the "lack of access to promotion schemes".	The Department must ensure all staff have regular appraisals and promotion criteria are transparent to all staff.		
5.4	The school must support educators by dealing effectively with concerns of difficulties they face as part of their educational responsibilities. Effective processes must be in place to support the physical, emotional and welfare needs of staff.	I	Draft (Feb 2024) Staff Wellbeing Guide	I	Terms of Reference for Wellbeing and Mental Health Oversight Groups	P	Cambridge Dignity at Work Policy	I	Yes	Discussions with staff				X		-The majority of junior staff reported being able to report any concerns to their line managers or HR.			
5.5	Academic positions must offer the security and benefits necessary to maintain stability, morale, continuity, and competence of the educators. Educators and staff must have a balanced workload of teaching research and service depending on their role, and must have reasonable opportunity and resources for participation in scholarly activities.	I	Summary of employee benefits for all UoC staff	I	Staff turnover records	P	Workload data for 2022/3 (incomplete)	O	Yes & triangulation	Discussions with senior team	Discussions with staff			X		-There is a sliding scale of protected time for staff in the pre-clinical years. -HOJ stated that staff morale was low due to the uncertainty of the future of the vet school following the Board review. This was witnessed multiple times in meetings with staff. -The lack of a definite timeline for the conclusion of the Board review appears to be exacerbating poor morale within staff. -The announcement of the removal of the equine referral service occurred during the visitation. -Current staff vacancies are increasing the workload on remaining staff.	The school must address staff morale and concerns around workload.		
5.6	The school must provide staff with a mechanism, anonymously if they wish, to offer suggestions, comments, and complaints regarding compliance of the school with the RCVS standards for accreditation and that Day One Competences are being met. All such feedback from staff must be reported to the RCVS as part of the annual report.	P	Process for raising a complaint is detailed.	P				Triangulation		Discussions with staff				X					

Domain 6 - Curriculum and Assessment																					
Standard	Repository Evidence						Further evidence needed on	Visitation Evidence			Recommended Outcome			Comments	Recommendations	Suggestions	Commendations				
	Supporting evidence # 1	Type	Type = Input, Process or Outcomes	Supporting evidence # 2	Type	Supporting evidence # 3		Type	Supporting evidence # 1	Type = Input, Process or Outcomes	Supporting evidence # 2	Supporting evidence # 3	Standard Met					Partial Met	Not Met		
6.1	Veterinary programmes must be designed and delivered to ensure that students, upon graduation, have achieved the programme learning outcomes (targeted at FHEQ level 7 or equivalent) and the RCVS Day One Competences.	Examination strategy document	I	Multiple course handbooks	I	Graduate Outcomes Survey	O	Yes & triangulation	Discussions with senior team		Discussions with staff			X				Intended Learning Outcomes (ILOs) in years 4-6 appear to be written better than the ILOs in pre-clinical years. Still some work to do overall. -ILO updating is still a work in progress for the pre-clinical years 1-2. -The process of ILO mapping to D1Cs is not effective. -There is not sufficient oversight of the entire curriculum and what is being taught.	The Department must continue to develop ILOs across the entire programme and map them accurately to D1Cs.		
6.2	The curriculum shall extend over a period equivalent to a minimum of five academic years and must include a sufficient quantity and quality of hands-on clinical education to ensure students are prepared to meet the requirements of the veterinary role upon graduation.	Summary of Cambridge Veterinary Programme	I	Clinical Curriculum Review Group (CCRG) minutes	P	Graduate Outcomes Survey	O	Yes & triangulation	Discussions with senior team		Discussions with staff	Discussions with students	X					-Clinical exposure is in years 4, 5 and 6, in small groups.		The Department is commended for their approach to clinical teaching in year's 4, 5 and 6, in particular the small group work in final year.	
6.3	Veterinary programmes must be underpinned by pedagogical theory or based on best educational practice, involving input from educators, students, employers and other relevant stakeholders, and subject to regular evaluation and review.	Annual Review Process description	I	Student representation on the CCRG committee	P			Yes	Discussions with senior team		Discussions with staff			X				-There appears to be two separate curricula (pre-clinical and clinical), with no real integration between the two. -Curriculum review appear to be very slow and not making progress. -Panel felt that if oversight of content being taught was limited, it was challenging for staff to ascertain whether the programme was current. -Pedagogical research has started to be undertaken.	The Department must consider the entirety of the programme in the review process and with respect to delivery of D1Cs.		
6.4	The majority of clinical education delivered by the School must focus upon casework in the 'general practice' context, reflecting the reality of veterinary practice in society.	Example Clinical Student Timetable	I	MEQ Final Year Student Feedback	O			Yes	Discussions with senior team		Discussions with staff	Discussions with students	X					-Little evidence of standard being met during the pre-clinical curriculum. Vet students and medical students are often taught together, and students report that there is little consistent veterinary context provided in these lectures. -The RSPCA experience is rated very positive by students for it's general practice context. -Department appears to be progressing in the right direction, with more primary care teaching / cases planned (in particular for small animal and equine).	The Department must introduce methodologies which enable them to evidence the focus of the clinical teaching in the general practice context.		
6.5	The curriculum must describe appropriate learning outcomes which represent and effectively align the required knowledge, skills, and behaviours of a veterinary surgeon with teaching, learning and assessment activities within a cohesive framework.	Veterinary Science Topics Programme Specification 2023-24.	I	Various course handbooks	I			Yes	Discussions with senior team		Discussions with staff	Discussions with students		X				-Some progress made in years 4-6, but mapping needs to be working and effective in order for the standard to be met. -No evidence that the Programme Learning Outcomes (PLO) are communicated to staff and students. (AVBC) -Appears to be a lack of sharing of the general curriculum model with staff and students. Some reports of difficulty in recognising how some teaching or some modules fitted into the whole programme.	The Department must complete the identification of the ILOs across the entire programme in a manner that shows a cohesive framework. Programme Learning Outcomes must be communicated to staff and students (AVBC).		
6.6	Under all teaching situations students must be actively engaged in the case. In the majority of cases, students must be actively involved in the investigation and management of the patient (including practical aspects of diagnosis and treatment, as well as clinical reasoning and decision-making).	Clinical Rotation Assessment & Feedback Form	I	Rotation Feedback	O	Leavers Survey Data 2023	O	Yes & triangulation	Discussions with senior team		Discussions with staff	Discussions with students	X					-Panel noted that students are not yet able to make new patient records. Reports also received regarding difficulties in preparing for casework due to the current formats used for patient records. -Students can view pricing estimates and limits on a patient record, however they do not communicate with the client regarding finances. -With primary care cases in particular, students reported being engaged in the cases. -There is currently no mechanism to track cases and progress (such as an e-portfolio or case log system).	The Department must develop more robust mechanisms to evidence how students' experience develops over time to ensure any competence gaps are addressed.		
6.7	The programme must give students the opportunity to learn and practice alongside other members of the veterinary team in an holistic manner that reflects the reality of veterinary practice in society.	Various rotation descriptions highlighting interactions with vet team	I	VetGDP graduate and advisor survey	O			Triangulation	Direct observation on tours		Discussions with staff	Discussions with students	X					-'Knowledge' is taught in professional course during years 1-2. -Multiple opportunities for working alongside Registered Veterinary Nurses RVNs. -Students also learn alongside other members of the veterinary team, such as farmers, or technicians in labs.			
6.8	Students must be supported to gain experience which consolidates their learning throughout the programme through the completion of Extra Mural Studies (EMS). This must be delivered in line with RCVS EMS Policy.	EMS Policies	I	EMS completion data 2021-22 & 2022-23	O	Preclinical and clinical feedback forms from both student and provider	P	Triangulation	Discussions with staff		Discussions with students		X					-No core pig handling provided. -Pig AHEMS is currently mandatory, though students are not assessed beforehand.	The Department must develop core opportunities to teach and assess students in pig handling prior to EMS.		
6.9	There must be an appropriate structure and resources in place to ensure the oversight, coordination and quality assurance of EMS. There must also be sufficient administrative support in place to assist the students	List of VSCSs and support staff.	I	EMS policies highlight process of booking placements and support for students	P	VSCS Surveys	O	Triangulation	Demonstration of EMS database		Discussions with staff	Discussions with students	X					-Oversight of clinical EMS appears robust. -There is limited oversight of pre-clinical EMS. -Emergency contacts are available and provided to students in advance of placements. -Concerns from students are not consistently investigated and / or feedback given to the placement provider. -Concerns about inappropriate behaviours do not result in placements being removed from a database – a flag is added to the record, for example 'Placement not suitable for BAME students'.	The Department must investigate concerns regarding placements when they're raised, and take appropriate action to mitigate in future (or remove placements if appropriate to protect future students).		
6.10	The school must have processes in place to ensure that students are supported in the identification of relevant learning outcomes for their EMS placements, and record and reflect on their achievement.	EMS talk for 4th years.ppt	I	Clinical EMS Aims, Objectives and Reflections form	O	AHEMS Handbook	I	Yes & triangulation	Discussions with senior team		Discussions with staff	Discussions with students	X					-Students are provided with 'suggested' ILOs for EMS through a template. -The Department has plans to introduce 'MyProgress' software. -Students are asked to reflect on their EMS, and assessment (feedback) forms are collected for each placement.			
6.11	The EMS experience must be individual to the student, and they must be able to tailor their experience based on their own learning needs.	AHEMS Handbook	I	EMS talk for 2nd year.ppt.	I	4th & 5th year Annual Clinical Phase Vet Med Course Survey 2023 EMS feedback Qs	O	Yes & triangulation	Discussions with senior team		Discussions with staff	Discussions with students		X				-Students appear to be somewhat limited in scope for making EMS their own. Strict species requirements are imposed, ILOs are suggested.	The Department must ensure that EMS is individual to each student so they can tailor their experience based on their own learning needs.		

Domain 6 - Curriculum and Assessment																				
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	Type = Input, Process or Outcomes							Type = Input, Process or Outcomes			Standard Met	Partially Met	Not Met							
	Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3										
6.12	There must be a system in place which allows for feedback from EMS providers of students' performance during EMS placements to be communicated with relevant academic staff.	O	Process for dealing with problems on EMS placements	O	Student EMS Assessment form	O	Triangulation	Discussions with EMS staff	Discussions with EMS providers			X						Providers are asked to feedback on students who have attended their placement.		
6.13	The school must demonstrate that EMS placements consolidate skills which have previously been taught during the programme.	I	Objectives of AHEMS and CEMS document	P	Principles of Animal Management course prior to AHEMS	O	Triangulation	Discussions with students	Discussions with stakeholders			X						Students reported that teaching is a 'little out of sync' with EMS, which means that they experience many things on EMS before being formally taught it. More efficient communication of the timetable was cited by students as a possible solution to this, allowing them more time to plan ahead. Students reported attending EMS placements before receiving the 'Introduction to EMS' lecture.	The Department could better align the teaching of skills and EMS and communicate this with students more effectively.	
6.14	The school must develop and implement a comprehensive and robust assessment strategy, at the programme and modular/unit level, which provides evidence that students meet the requirements for progression across the programme and the Day One Competences upon completion.	I	Commentary on assessments	P	Pass marks for assessment contributing to "finals"	O	Yes & triangulation	Discussions with senior team	Discussions with staff				X					No assessment strategy in place at the overall programme level. -Assessments appear to be mostly modular, particularly in the pre-clinical area, though also seen in many aspects of the clinical programme. -Assessment blueprinting appears to be ad hoc with gaps identified through the recent blueprint / mapping exercise, and the gaps filled with additional assessment tasks. -Assessment methods are not always appropriate for the D1C that is being assessed. For example, a reflective essay to assess performance, or a case log where no performance standard is applied (only requirement is to complete 2 cases). -Performance assessments are carried out using OSCEs and DOPs. Some are compulsory, but others are optional. This impacts on the validity and assurance of how these D1Cs are assessed. -There is no dedicated assessment committee (AVBC requirement).	The Department must develop an integrated and holistic assessment framework at the programme level.	The Department should establish a formally constituted assessment group that has overarching and coordinated strategic oversight and control of assessment for the whole programme.
6.15	The validity, reliability and educational impact of assessments must be appropriate to their purpose (high/low stakes) and evidenced through relevant evaluation data.	O	Reliability data for written exams	I	Narrative of exam formats		Yes	Discussions with senior team / academic staff					X					-Pass mark for exam is 60%, which is higher than other schools at Cambridge. -Structured assessment of performance in the clinical years is via OSCEs and DOPs. Some are optional, however, which will limit the validity/reliability. -Farm and equine performance assessments content validity appears limited. - Reported to panel that there is a need to expand the question banks	The Department must take a more comprehensive approach to the evaluation of validity and reliability of assessments across the programme.	
6.16	The assessment tasks and grading criteria for each unit of study in the programme must be clearly identified, and available to students in a timely manner well in advance of their assessment. Requirements to pass including the effect of barrier assessments must be explicit.	I	Narrative / pass mark data				Yes	Discussions with senior team / academic staff	Discussions with students			X						-Pass/fail criteria is published (predclinical), but not always liked by students who indicated that grades were preferred.		
6.17	Assessments must be designed and carried out by individuals with appropriate expertise in the area being assessed, who have been trained in their role as an assessor and understand what is required to make the process robust, including honesty, fairness, consistency, and judgements free from bias.	I	OSCE docs	I	Description of staff training		Yes	Discussions with Junior staff	Discussions with senior staff	Discussions with staff at RSPCA site			X					-OSCE training and support appears to be good. -Training also in place for writing Short Answer Question (SAQ) papers. -Unconscious bias training is required for all involved in assessment.		
6.18	Assessment load must be sufficient to provide both formative and summative feedback to support students' progress, and to evidence achievement, remaining cognisant of workloads for staff and students.	I	Assessment blueprint / schedule				Yes	Discussions with students	Discussions with staff	Presentation			X					-Pre-clinical years have a heavy assessment load. -Fewer formal assessments are carried out during the clinical years.	The Department must review the assessment load across the whole programme and implement effective changes with a particular emphasis on the pre-clinical years to ensure a more balanced and manageable assessment load.	
6.19	The school must have appropriate moderation processes in place to ensure parity within and between individual units of study, across the programme, with other institutions; and to ensure that each student is treated without bias.	O	External examiner reports 22-23	I	Examination Strategy document 2023		Yes	Discussions with staff	Discussions with students				X					-Little evidence presented of standard setting in years 4-6. -Initial failure rates during the pre-clinical programme appears high. -The failure rate for vet students is consistently higher than the medical students. -Department uses external examiners. Some are medical (OSCE) -A double marking policy has been implemented.	The Department must implement a more comprehensive approach to moderation and standard setting across the entire programme.	
6.20	There must be a system for students to keep a record of the quality and quantity of their clinical experience and reflect on their development of clinical and non-clinical skills over the duration of the programme. These records must be regularly reviewed by an educator to inform an individualised development plan. Consolidated data must contribute to the quality improvement of the programme.	I	Narrative mentions trial of a case log				Yes	Discussions with academic staff	Curriculum mapping demo					X				-Students are not taught how to reflect as a formal process, and little evidence of real reflection was produced. -The Department's Black Book recording system has recently been phased out. -No current evidence to show that the standard has been met, but the panel recognises the plans for improving this through further development of the eportfolio and implementation of MyProgress software.	The Department must implement a system to provide a robust means of recording the quality and quantity of clinical experience.	
6.21	The school must demonstrate a commitment to research led teaching throughout the veterinary programme.	I	Research lecture doc				Yes	BOAS showcase session					X					-The Brachycephalic obstructive airway syndrome (BOAS) showcase demonstrated research led teaching in this area. -Students recognised the expertise of teaching staff.	The Department is commended for their approach to research led teaching, with an excellent example being the BOAS	

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	Type - Input, Process or Outcomes							Type - Input, Process or Outcomes			Standard	Partial					
	Supporting evidence # 1	Type	Supporting evidence # 2	Type	Supporting evidence # 3	Type		Supporting evidence # 1	Supporting evidence # 2	Supporting evidence # 3	Met	Met	Not Met				
6.22 All students must be trained in scientific method and research techniques. All students must have opportunities to participate in research programmes.	Research project examples	O	Curriculum description	I			Triangulation	Discussion with academic staff	Discussions with students	Showcase session	X			-All students undertake a research project, and complete an intercalated degree.			



**UNIVERSITY OF
CAMBRIDGE**

Department of Veterinary
Medicine

Professor Mark Holmes
Dean and Head of Department
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14 October 2024

Mr Jordan Nicholls
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Dear Jordan

Response to Accreditation Event Report. 27-31 May 2024

Please pass on my thanks to everyone who worked on the thorough visitation report. We are grateful for their insights and their help to ensure that we provide an education to our students to a standard that the public deserves and expects for a graduate to be admitted to membership of the Royal College of Veterinary Surgeons.

In responding to the accreditation visit report I would like to draw the RCVS's attention to three aspects of the Veterinary course in Cambridge that provide context to some of the specific comments made to recommendations below.

Veterinary students in Cambridge receive foundational teaching in the biological sciences that underpins the practice of veterinary medicine alongside medical and other students at this world leading research university. We pride ourselves that a combination of the superb cohort of students we get each year and their opportunity to learn alongside medical and natural sciences students, but still within a separately structured preclinical veterinary course, provides these young people with a foundation that supports them well beyond the first few years of practice. It is essential to allow for their intercalated degrees within the Cambridge academic system, and for many of our students this is a significant step on the path to careers as academics, researchers, and future leaders of the profession. While we recognise that a greater separation of clinical and preclinical studies can have some educational disadvantages for training or developing skills for veterinary practice, we do not intend to change this at Cambridge. Instead, we will seek suitable alternative approaches to ensure we can respond effectively to the recommendations resulting from the RCVS accreditation visit across the whole course, recognising that ensuring consistency can present challenges in the Cambridge context.

Not only is Cambridge a collegiate university but its history means that each of the Colleges is an autonomous self-governing institution. Although the central university is also autonomous and forms the main authority for the structure and assessment of our courses, no student can be enrolled on a course without being a member of a college. Student admissions, pastoral care, and academic progress are the responsibility of the colleges, in collaboration with the Department. We

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recognise that this can add to the complexity of how the education and pastoral care of the students is delivered, and can present challenges when assembling evidence that the admissions process is conducted consistently for students applying for Veterinary Medicine. We believe that a combination of our core collegiate university processes, the oversight of our own Admissions Committee, a well-supported admissions moderation process, and a robust process for “pooling” candidates not initially admitted by the college they applied for, help ensure a fair and consistent process in the main. In common with the institutional view and that of colleagues across the collegiate university, we also believe that it can and should be improved. The changes that are needed will require the coordination of a greater number of concerned parties and other stakeholders than is the case for most other universities, but there is the will and the support to make structural improvements. Evolutionary change will happen and is broadly welcomed.

The third comment that I would like to make is that you will notice that many of our responses involve a reinvigoration of the University’s Veterinary Education Committee (the body responsible for whole course oversight of the preclinical and clinical programmes). This committee is set in University Statutes and is clearly intended to provide holistic oversight and management of the whole course. It reports to both the Faculty of Biology (responsible for governance of all biological Departments in the School of Biological Sciences other than Veterinary Medicine) and the Faculty of Veterinary Medicine (responsible for the governance of this Department). We are currently reviewing its composition, terms of reference, working groups and calendar to ensure that all the relevant evidence addressing the RCVS standards is collated, examined, and acted upon across the entire course. What we are trying to do is focus on a sustainable process of course-wide quality assurance and approval rather than just ticking off a ‘to-do’ list of actions. Some of this work involves substantial cultural changes that will challenge well-established norms and practices for colleagues, and we will need to support them with this over time. Nonetheless, we are committed to these changes in order to transition from a reactive response to accreditation events, to an approach which embraces the value of RCVS accreditation as a valuable and integral part of our management cycle and continuous quality assurance process.

Each veterinary school has its strengths and weaknesses, and RCVS accreditations help to ensure that every student who graduates is fit to practice with day one competencies from whichever Vet School they graduate. Our students are embarking on a career that may last 40 or 50 years, a career that may encompass many different activities and roles. We do not feel that all veterinary schools should be the same. We cannot predict what additional problems and challenges they will face in the 2030’s 2040’s or 2050’s. However, if biology teaches us anything it is that diversity is a strength and not a weakness.

Yours sincerely

A handwritten signature in black ink, consisting of a series of loops and a long horizontal stroke at the end.

Domain 1: The Learning Environment

Recommendation: *The Department must continue its plans to implement a medical records system at the earliest opportunity. (1.1)*

The Department continues to progress the implementation of our new Practice Management System (PMS), which is recognised as a strategic priority. Since the visitation, we have concluded the data mapping exercises across the existing data resources and are now in the data migration and testing phase. Initial configuration work across the clinical practices is also nearing completion, along with integration work with our diagnostic facilities. It is our expectation that we will move to the testing and training phases in the coming months, and realistically anticipate achieving 'go-live' within the 2024-25 academic year.

Recommendation: *The Department must ensure a consistent policy in relation to wearing hard hats around horses. (1.2)*

Following a survey of UK Vet School practice and in discussion with teaching lead for equine practice, the Department's Safety Committee has instituted new policy confirming that hard hats (and gloves) must be worn at all times by students when trotting up or lungeing. Safety equipment is available at all times for other procedures on a risk-assessed basis according to horse behaviour and the procedure in question. The Department is in the process of reviewing recommended practice for students on EMS with horses to recommend that hard hats are worn.

Recommendation: *The Department must ensure consistent monitoring of formalin levels in the dissection room. (1.2)*

We have worked closely with our colleagues responsible for the coordination of the preclinical programme to understand the nature of previous issues with formalin monitoring which relate to a supplier-identified fault with a previously used system which was replaced in 2023-24. We now understand that this product fault (identified in 2023) led to invalid readings of single use formalin cartridges for the period 2019-23. Unfortunately, it seems that a member of staff incorrectly understood that these inaccurate readings should be discarded rather than retained which has created a gap in the record. The new system should ensure a more accurate record going forward and we understand that current staff are made aware of the important of maintaining this record.

Recommendation: *The Department must ensure robust implementation of health and safety policies in relation to vehicles and all facilities. (1.2)*

Our Safety Committee has confirmed that all those using departmental vehicles are required to undergo driver training before being insured and allowed to drive. The Committee also confirms that an appropriate risk assessment for tractor use is in place and that our Facilities team maintain vehicles in a safe and roadworthy state.

Recommendation: *The Department must ensure that the teaching and learning in all environments is quality assured. (1.3)*

We do not operate a dispersed model. Almost all of our teaching is delivered by members of the Department (including at the RSPCA clinic), but we recognise the value of better documenting our relationship with partners who offer our students access to their facilities as part of their learning. We are in the process of confirming new/updated Memorandum of Understanding with our partners at College of West Anglia which includes an annual review of facilities and any changes to our requirements. We are also drafting letters of agreement with our partners at the RSPCA (covering our working relationship and including notification that the team is planning to apply to Practice Standards) and World Horse Welfare. Our agreement with the University of Bristol regarding use of their Abattoir was recently updated and evidence was provided as part of the visitation event.

Recommendation: The Department must ensure there is evidence of QA for all of the off-campus learning environments where core teaching is undertaken. (1.4)

Recommendation: The Department must ensure that there is evidence to support that all off-campus learning environments where core teaching is undertaken are quality assessed to ensure high standards of practice and animal husbandry. (1.4)

The Department's Teaching Operations Committee has constituted a Teaching Venue Inspection Visits Group to design and implement a cycle of inspections of each of our preclinical and clinical learning environments. A list of venues to be reviewed has been established and details of venues to be inspected during the academic year 2024-25 has been agreed.

Recommendation: The Department must establish the workflow of the new farm and equine isolation facility and ensure the remedial works to ensure its biosecurity. (1.9)

As we complete snagging and put our new Large Animal Unit into full use, our Safety Committee continues to work closely with large animal clinical leads to identify any remedial works required in the isolation facility to ensure effective biosecurity measures can be maintained. Our lead clinician in the Farm team has been appointed as the responsible person for this area to ensure appropriate works are followed through with our Facilities team.

Recommendation: The Department must ensure that the move to a medical records system happens at the earliest opportunity and is configured to allow students to create draft records, search and retrieve records. (1.11)

The Department is continuing to make progress with the implementation of our new medical records system (PMS), which is recognised as a strategic priority. We confirm that User set-up work has been concluded, which includes a designated Student user profile type, specifically configured to enable students to create draft records. It remains our realistic expectation that we will achieve 'go-live' within the 2024-25 academic year.

Suggestion: The Department should consider extending the opening hours of library particularly in the West Hub. (1.12)

Cambridge students have access to a variety of libraries and librarians around the University (<https://www.libraries.cam.ac.uk/>), including the University Library (a legal deposit library), well-resourced college libraries (with material accessible to students from across all colleges) and the West Hub library.

In addition, the Department, colleges and all of these libraries provide a range of excellent study space which provides excellent spaces, much of which is accessible 24/7.

We are confident that our library provision is second to none.

Domain 2: Organisation, Culture and Values

Recommendation: *The Department must provide clarity on the future of the vet school regarding a definitive timeline for the completion of the General Board review. (2.1)*

The General Board Review timetable is out of our hands, but we understand that a draft/interim report is due to be received by the General Board soon and we hope that this will provide a clearer picture of the timetable.

In the meantime, we are communicating regularly with our staff on this matter, including through termly all staff meetings. The Royal College should be aware that the report is only one part of a complete reassessment of the delivery of veterinary education and research at the University of Cambridge that may continue for several years.

Recommendation: *To ensure accountability for the whole programme, the Department must establish formal contracts with off-campus partners and have oversight of the preclinical years. (2.2)*

Although Cambridge is not operating the same dispersed teaching model in operation as some other institutions, we do recognise the value of formalising our longstanding relationships with partner organisations and our Deputy Head of Department (Teaching) has begun to draft Memoranda of Understanding with each of our partners.

While we remain confident in the excellent quality and relevance of the preclinical programme, we recognise that our existing systems and processes can make this difficult to evidence for our accreditors, and we have entered into discussions with our colleagues responsible for the delivery of this teaching to agree how we can better collect and record relevant information.

We have also embarked on a programme of review for our Veterinary Education Committee which will include the development of a strategic risk register for the entire veterinary medicine course.

Recommendation: *The Department must increase efforts to engage with a range of stakeholders external to the university, especially in relation to the curriculum review. (2.3)*

As part of our review of our Veterinary Education Committee, we are reviewing the membership of this group and will seek input from those involved in the management and delivery of our course on the addition of external members e.g. from veterinary practice and/or from relevant agencies such as DEFRA.

We also intend for this Committee to formally review the whole course curriculum annually both through Sub-/Working Groups for more detailed curriculum review and with the whole Committee for oversight purposes.

Recommendation: *The Department must provide evidence that they actively and consistently promote, monitor and maintain a culture that does not discriminate, and enhances diversity throughout the programme. (2.4)*

We are re-assembling the evidence describing and recording how we actively and consistently promote, monitor and maintain a culture that does not discriminate, and enhances diversity throughout the programme.

Diversity targets are in place with regards to social deprivation. We now have reporting mechanisms in place for students on placement. Any report of discrimination experienced by students or staff that we receive is rigorously investigated and acted upon. Additionally, for placements where Black, Asian and students from ethnic minority groups have experienced discrimination, a "red flag" is added to the placement on the EMS database alerting such students to avoid. Problematic placements are not removed from the database despite issues, which may validate discriminatory behaviour in the eyes of other students (We are not trained and do not have the resources to continuously audit or review placements. We would find it impossible to identify when such placements may have changed sufficiently to remove such a censure).

Evaluation of admissions processes in relation to equality, diversity and inclusion are conducted. The data will be collated in our RCVS document repository annually. Cambridge is unusual in that admissions are conducted by the Colleges rather than by the University Departments. We will ensure that all data relevant to the fairness of admissions and including the diversity of applicants and place offers are included in the repository together with a description of when these data are reviewed and what actions arise from their review.

The academic progress and performance of different groups of students enrolled in the veterinary course will be examined and reported annually to the Veterinary Education Committee responsible for looking for evidence of inequality.

***Recommendation:** The Department must provide evidence that a holistic approach to embedding a positive and reflective learning culture throughout the programme has been implemented. (2.5)*

We are pleased to note the report's positive view of feedback and resulting action within the clinical course, but we recognise the challenges that remain within the preclinical programme.

We are working with our colleagues responsible for coordinating the delivery of the preclinical programme to improve both the amount of feedback that we get from students and the mechanisms to ensure that it is acted upon (including the documentary evidence of this).

As part of our review of our Veterinary Education Committee, we intend to include regular review (at least on an annual basis) of student feedback and resulting actions across the whole course.

***Recommendation:** The Department must develop a strategy to demonstrate a commitment to environmental sustainability and continue to explore opportunities to embed sustainability concepts throughout the curriculum. (2.6)*

It is possible that the Panel may have overlooked some of the evidence supplied in advance of the visit under this accreditation standard which included our departmental strategy, part of which explicitly references some of the ways we are working to embed sustainability within our teaching practice and learning opportunities for our students. Notwithstanding this, the Department has identified key academic leads to consider this area further and report back to our Teaching and Operations Committee. Further to this, our Veterinary Education Committee, will incorporate sustainability into its ongoing curriculum review activities.

Domain 3: Educational Governance and Quality Improvement

Recommendation: *The Department must establish oversight of the autonomy and accountability over the entirety of the programme. (3.1)*

While our Veterinary Education Committee, chaired by the Head of Department, is already constituted to oversee the whole veterinary medicine course at Cambridge (preclinical and clinical), the scope of work undertaken by this committee has narrowed in recent years and we are in the process of reviewing membership, developing a document outlining the full scope of its work, drafting a timeline of the committee's key activities (e.g. admissions review, curriculum review and sign-off) and considering any standing sub-committees we should constitute. We expect this work to be complete by the end of the 2024-25 academic year. This committee is established by University Statutes and reports to both the Faculty of Biology and the Faculty of Veterinary Medicine.

Recommendation: *The Department must ensure there are measurable and demonstrable improvements to the entire veterinary programme with respect to continued quality improvement. (3.2)*

As outlined under 2.5 (above), as part of our review of our Veterinary Education Committee, we intend to include regular review (at least on an annual basis) of student feedback and resulting actions across the whole course. Further to this, the Veterinary Education Committee will consider the value of establishing an additional whole course survey to complement existing feedback mechanisms.

Recommendation: *The HoS must ensure that the HoD has the ability to contribute to the budget setting process, and has autonomy over in budget spends according to the financial needs of the department. (3.3)*

As part of the large and diverse institution that is the University of Cambridge, the allocation of budgets is a complex process. The University has recognised that this can lead to a lack of clarity around the process and has launched a major root and branch programme of financial transformation.

Alongside this fundamental change to ways of working across the University, the School of Biological Sciences is establishing a more collaborative approach to budget allocation, including consultative meetings with the School Council (of which the Head of Department in Veterinary Medicine is an ex officio member), finance and resource planning meetings between School Officers and the Department leadership team (including the Head of Department).

Recommendation: *The Department and school must work with the central university to ensure funds are sufficient to sustain and enhance the entire veterinary programme for all current cohorts. This must result in the department having direct input into the setting and scope of all budgets relevant to the entire programme. (3.4)*

The Department has been in discussion with the School of Biological Sciences and the Pro-Vice - Chancellor for Resources about improvements to the process of budgeting to ensure that all Departments that contribute to the Veterinary Tripos have direct input into the setting and scope of all budgets relevant to the entire programme. We will ensure that sufficient information is placed into our accreditation document archive to evidence this process.

Recommendation: *The Department must ensure staff are sufficient in number to support all areas of the programme, and adequately trained to support the veterinary context teaching in years 1 and 2. (3.5)*

We will continue to ensure that we have sufficient staff to support all areas of the programme in both the clinical and preclinical parts of the course. We are fortunate to have an enviable staff-student ratio in veterinary medicine (the Guardian rankings list reports us as having the lowest student to staff ratio of the UK vet schools). The evidence of staff shortages appears to be based on verbal evidence reflecting short term management issues rather than a systematic problem.

The visitors noted that not all preclinical staff have completed (or are working towards) a quality assured programme of teacher training. Almost all new lecturers recruited to the School of Biological Sciences have University teaching qualifications or acquire them early in their careers at Cambridge.

We have designed a quality assured training program entitled Advancing Education Veterinary Medicine course in conjunction with the Cambridge Centre for Teaching and Learning (<https://www.cctl.cam.ac.uk>) specifically designed for more established staff. This is being trialled in academic year 24/25 in preparation for expansion as part of our overall teacher training programme from 25/26. More details of staff receiving or enrolled on higher education teacher training will be maintained in our accreditation document repository to aid the assessment of this standard for future visitations. (see response to 5.1 for further information).

Recommendation: *The Department must implement a transparent and standardised process for student admissions, that is measurable, recorded and monitored. (3.6)*

Although an enormous amount of time and effort (academic and professional services) is put into the admissions process at Cambridge, the collegiate nature of the institution can make aspects of this appear opaque.

The Department will take a number of actions in this area during the period 2024-27, including engaging with the Heads of Admissions for the Cambridge Colleges to highlight the challenges and open a dialogue at a strategic level. The Department will also work more collaboratively with the Directors of Preclinical Studies (representing all colleges and tasked with considering and advising on matters relating to admissions). In addition, the Department will review the outcomes of an ongoing consultation regarding entrance requirements for clinical medicine at Cambridge and learn from any best practice developed through this process.

Our key aims will be to document criteria against which applicants are assessed, to document a common set of approaches taken at interview, and to make this information more visible to our applicants. We aim to introduce an annual meeting prior to admissions when the criteria on which applicants are assessed are agreed by the colleges. We will also ensure the review of veterinary admissions conducted each year is conducted as a formal responsibility of the Veterinary Education Committee. This review and the responses and actions of the committee placed in the formal record.

Our Departmental Admissions Strategy Working Group will lead on this work, reporting on progress to our Veterinary Education Committee.

Recommendation: *The Department must implement a more streamlined and effective committee structure with actionable and sustainable influence on educational governance. (3.7)*

Our summer 2024 Leadership Away Day focussed on governance and included a review of all departmental committees.

Having agreed the structure going forward, the programme of departmental governance review will continue with an update of committee memberships and Terms of Reference and confirmation of reporting lines for all Committees to ensure decision-making is clear and information is shared in a timely and transparent fashion.

Recommendation: *The Department must implement consistent and robust policies with mechanisms for recording and auditing animal use in teaching, as part of an effective QA plan for the programme. (3.8)*

Our Ethics and Welfare Committee have considered this recommendation and are in the process of creating an updated process for monitoring and reporting on use of animals in teaching to be used across all animal groups. We recruited a new Clinical Skills Manager (joining the Department in November 2024) who will be managed by our newly appointed lead in Veterinary Education recruited over the summer. Together with the academic leads in small and large animal practice, they will be producing procedures to ensure that animal use is accurately recorded as part of ongoing improvements in our QA systems across the course.

Recommendation: *The Department must establish effective mechanisms to identify, record, monitor and support the progress and attainment of different student groups. (3.10)*

We will endeavour to collect as much contextual data as far as we are able to, for tracking student cohorts. It should be noted that we do not receive ethnicity data from UCAS until springtime for students who start the course the previous October. Contextual data will be collected from admissions information and also via the Cambridge Admissions Office. A system of regular reporting on student attainment and progress matched with this contextual data will be established, with reports being sent to appropriate committees.

Recommendation: *The Department must complete a holistic curriculum review, covering both preclinical and clinical years, encompassing the entire veterinary programme. (3.11)*

While we note the excellent and significant work undertaken on a regular basis by the Clinical Curriculum Review Group and the ongoing programme of work through the Medicine and Veterinary Medicine Curriculum Review, we also recognise the value in strengthening the role of our Veterinary Education Committee in regularly reviewing the whole course as well as leading "deep dives" into specific areas as it deems appropriate.

The Committee will add an annual review/approval of the whole course curriculum to its programme of work and, during the 2024-25 academic year, will consider the value of establishing standing sub-groups focussing on Clinical Curriculum and Preclinical Curriculum to lead on the collation of information and "deep dives" as directed.

The Committee will also consider the value of bringing in external members e.g. from practice and or relevant agencies such as DEFRA.

Recommendation: *The Department must develop mechanisms to monitor attrition and progression in relation to selection criteria. (3.12)*

The Departmental Tutorial Office will continue to compile an annual attrition report and will work with the data we have available to map this to student selection criteria. Where data is currently unavailable or difficult to access, we will seek support from colleagues in the University's Business Information team. Attrition reports will be considered by our Veterinary Education Committee as part of its regular programme of work.

Recommendation: *The Department must put in place contracts with off-campus partner locations where core teaching takes place. (3.13)*

We do not operate on a dispersed model, with almost all of our teaching delivered by members of the Department, but we recognise the importance of ensuring that documentation is placed in the document repository detailing the formal arrangements that are in place for all of our partners who offer our students access to their facilities as part of their learning. We are in the process of confirming new/updated Memorandum of Understanding with our partners at College of West Anglia which includes an annual review of facilities and any changes to our requirements. We are also drafting letters of agreement with our partners at the RSPCA (covering our working relationship and including notification that the team is planning to apply to Practice Standards) and World Horse Welfare. Our agreement with the University of Bristol regarding use of their Abattoir was recently updated and evidence was provided as part of the visitation event.

Recommendation: *The Department must complete the work to accurately and comprehensively map assessments against the D1Cs. (3.14)*

While the Department undertook a comprehensive mapping exercise for all clinical assessments against D1Cs several years ago, our Veterinary Education Committee will add a periodic (expected to be triennial) assessment review to confirm they remain appropriate and fit with the curriculum. There are two elements to the preclinical course. Firstly, there is the basic biological science education that provides the foundations upon which clinicians understand health and disease in their patients. Secondly, there is the professional element that is designed to provide context and vocational skills in preparation for a

career as a veterinary surgeon. All of the assessments for the latter have been mapped to D1Cs. The Department will continue to actively engage with colleagues responsible for coordination of preclinical assessment to ensure that where appropriate D1Cs are mapped. We believe that like other veterinary schools we aim beyond the first day of practice and some of our assessments reflect the teaching that prepares veterinarians for the long term.

Domain 4: Supporting Students

Recommendation: *The Department must work closely with the Colleges to ensure a more consistent and effective approach to student support. (4.1)*

The Department is confident that the Collegiate University provides significant welfare support to all our students, offering both a standard set of services (outlined at <https://www.studentsupport.cam.ac.uk>) centrally, through access to both an academic Director of Studies (responsible for designing and supporting a bespoke learning environment for every student) and a Personal Tutor (responsible for students' pastoral needs and any welfare support required) for every student through their college.

Although there is some variation in the additional levels of support to students within their college (some have welfare officers, others have a staff nurse, all have a Porter's team trained to offer first-line support to students in need of support), we are confident that every college is able and motivated to source all the support our students need.

Recommendation: *The Department must work closely with the Colleges to ensure appropriate and ambitious policies and targets for widening participation, across a wide range of diverse groups. Progress towards meeting targets must be evaluated. (4.2)*

The University's initiatives are to a great extent based on its Access and Participation Plan, which is available at <https://www.undergraduate.study.cam.ac.uk/access-and-participation-plans>. The new APP is for the 2025-29 period and, as for all Universities, includes changes in focus from the previous one.

Despite this, it is likely that the University will continue to track progress against metrics which are no longer in the APP. One example is the proportion of UK students who were educated at state schools – this no longer features in the APP of any UK University (Cambridge retained it longer than any other university).

It is important to emphasise that working to achieve our targets as a University is considered the optimal strategy to Widening Participation:

- It allows us to draw on the expertise of a group of dedicated staff who have experience in WP. Interpretation of the meaning and value of different WP metrics (sociodemographic, school-based and individual) is extremely complex and changes with time.
- It allows us to draw on practice which has been beneficial in other subjects and in some cases by individual colleges.
- It allows us to participate in particular events – the successful Sutton Trust Veterinary Summer School, for example, and a variety of other WP events.
- The University and Colleges have a large number of staff dedicated to WP in an organized, structured system based on UK regions. The Vet School has been uniquely proactive in offering specific training to these staff in contacting students interested in Veterinary Medicine.
- Possibly the most important element of WP at Cambridge is the generous (and expensive) Cambridge Bursary Scheme, <https://www.cambridgestudents.cam.ac.uk/cambridge-bursary>. It has been specifically arranged that Veterinary Students are the only students in the University who qualify for the scheme for five or six years.
- The responsibility to meet the targets agreed with the Office for Students lies with the University as a whole.

The requirement for many weeks of Extramural Studies is a profound barrier to some applicants. At Cambridge all students receive funding to support EMS – and this is emphasised in advance.

Another barrier is applicants' concern about the effect of disability on their ability to study and eventually qualify as a vet. We put such potential students in contact with our excellent Accessibility and Disability Resource Centre at an early stage. We also continue to work with the Vet Schools Council to lobby the RCVS for clarity on the ability of disabled students who complete the course with adjustments, to be registered as veterinary surgeons.

Differences between colleges must not be overstated. They should be viewed as providing interview panels in the same way that other Vet Schools do. Most interviewers are University staff involved in the delivery of the Veterinary Medicine course, and all must complete an admission and interview training course specific to Veterinary Medicine. Informal feedback from current students suggests that our interviews are consistent across colleges. This is one of the keys aims of the Subject Convenor (see 4.4).

Data on admission applications and intake are reported by the Subject Convenor to the Veterinary Education Committee on an annual basis in October (following an interim report in January). As the sources of WP data available to universities improve, this are being progressively incorporated into the report.

Recommendation: *The Department must update the website to include accurate information on accreditation status and EMS costs. (4.3)*

The University's main admissions website for the veterinary medicine course (<https://www.undergraduate.study.cam.ac.uk/courses/veterinary-medicine-vetmb>) is entirely correct and includes all relevant information. We note that the Departmental website (which complements but does not replace/compete with this page) did not include reference to RCVS accreditation and this has been rectified.

Recommendation: *The Department must ensure that all learning materials comply with accessibility guidance. (4.6)*

We already have clear guidance on making teaching materials accessible in our Teaching Guide and we will be conducting an audit of teaching materials to ensure accessibility and feeding back to teaching staff whose materials are not adequately accessible.

While each of our students has a team available to offer personal support (both in the Department and their College) and excellent institutional support through our Accessibility and Disability Resource Centre as required, we recognise that the complexity of the Cambridge system can sometimes make these resources more challenging to access, and we are aware of a small number of instances where students have found themselves having to highlight their needs. In order to help better meet students' needs and to meet our anticipatory duties under the Equality Act, the Department will offer training and time to a designated member of staff to take responsibility for reviewing all student support documents (containing information, support and guidance with regard to individual students with additional learning/support needs), meeting with students to ensure that departmental plans to support them are appropriate, and reviewing these arrangements at least annually. This member of staff would also be a key point of contact for students in the department should issues arise.

Recommendation: *The Department must work with the Colleges to ensure consistency in support for reasonable adjustments. (4.6)*

We appreciate that while the process of assessing students and the documentation of adjustments is consistent our implementation or support of those adjustments has not been subject to a QA process. We are implementing an additional monitoring process for all students with a student support document (SSD) where the students can discuss the adjustments made prior to each starting year of the course and provide feedback on how satisfactory those arrangements have been. These SSD reviews will give us the opportunity to document the efficacy of the adjustments and actions taken when changes need to be made.

Recommendation: *The Department must implement a more robust and consistent approach to addressing feedback/concerns from students. (4.7)*

While a variety of informal and formal (including anonymous) routes for students to offer feedback and concerns about all aspects of the course (e.g. course level surveys, student representatives, staff-student committees, direct discussion with personal Tutors and/or Directors of Studies and University-

level complaints procedures) were documented in our pre-visitation submission, we recognise that these can be challenging to see at a glance for students across the course and we have initiated discussions with colleagues responsible for coordinating the delivery of preclinical courses to agree how best to make this information more visible/accessible to our students and improving the feedback loop by revitalising "you said/we did" student web pages.

We also recognise the value of reviewing student feedback across the whole course and intend to add such a review to the annual work programme for the Veterinary Education Committee.

Recommendation: *The Department must develop effective processes for closing feedback loops for students. (4.9)*

Please see the response above (The Department must implement a more robust and consistent approach to addressing feedback/concerns from students. (4.7)).

Recommendation: *The Department must ensure the relevant surveys are sent to students across the programme (all years). (4.10)*

Please see our planned actions under 4.7 above.

Recommendation: *The department must ensure that students are provided with pig handling opportunities and assessment before attending any pig EMS placements. (4.12)*

A pig handling course has been implemented for the current academic year (2024/25) for the first-year students.

Recommendation: *The Department must standardise its approach to the resolution of student grievances, across all areas of the programme. (4.14)*

Please see our planned actions under 4.7 above.

Suggestion: *The Department should improve the transparency of criteria for selection, particularly for the 'pool' candidates, and in relation to non-academic criteria. (4.4)*

A key person in ensuring clarity and consistency between interview panels is the Subject Convenor in Veterinary Medicine – a veterinary surgeon employed by the University and appointed by the Veterinary Education Committee, currently David Bainbridge MRCVS.

The Convenor communicates several times annually with the veterinary membership of the Director of Preclinical Studies Committee regarding aspects of the admissions process and selection criteria. The first mailing is soon after the UCAS deadline and contains much of the information for the year. This is followed by regular updates on the process and admission outcomes until early January, when a 'moderation' meeting is held to discuss applications across all interview panels prior to the winter admissions 'pool'. The Convenor also runs this 'pool' in mid-January which allows redistribution of applicants between colleges with a view to making an offer. Once public exam results are available in the summer, the Convenor, if necessary, coordinates decisions on offer holders who did not achieve their offers.

If change is envisaged, it is discussed at the Preclinical Directors of Studies' Committee, and sometimes the University's Admissions Forum, but the final decision lies with the Veterinary Education Committee.

The Convenor also runs the obligatory admissions and interview training sessions.

The criteria are detailed at the outward facing page: <https://www.vet.cam.ac.uk/study/vet/howtoapply>

There is also an internal document for admissions staff, which is a veterinary-specific part of the University's Admissions Handbook. It mainly covers the technical details of numbers management and chronology of the admissions process. It also includes guidelines for the time spent in interviews on science aptitude. (<https://www.cao.cam.ac.uk/handbook/specific-applicant-types/veterinary-medicine>)

We adhere to the University's overall admissions policy at:
<https://www.undergraduate.study.cam.ac.uk/apply/after/admissions-policy>

It is important to emphasise that the 'pool' process is fully integrated into the admission process, and because of this the criteria used when deciding which applicants should be entered into the pool, and which applicants should receive an offer following the pool, are the same criteria used to make offers to other applicants. The aim of the pool is to ensure that applicants who are interviewed by a panel which that year happens to have received a large number of excellent applicants is not disadvantaged, and conversely that those who are interviewed by a panel which received few strong applicants is not advantaged. Thus, the pool promotes equity across the University's interview panels. The Subject Convenor can require that panels pool individual applicants.

The admissions criteria will be reviewed annually at a Veterinary Education Committee admissions subgroup (pre-admissions meeting of college staff responsible for veterinary admissions) as described in a previous response (3.6).

Domain 5: Supporting Educators

Recommendation: *The Department must develop and implement a clear plan to ensure all personnel involved in teaching complete a programme of quality assured teacher training. (5.1)*

The Department will collaborate with colleagues responsible for coordinating the delivery of the preclinical curriculum to develop an expectation that staff delivering 3 or more hours of teaching (in any form) should be required to receive appropriate training in teaching. The format of this training may differ from individual to individual and examples include:

- Up to 20 clinical staff each year have access to the University's Foundation programme for Clinical Educators which we will prioritise first for new starters and then first year Senior Clinical Training Scholars.
- All staff new to 1-1/small group teaching at Cambridge are expected to undertake the Cambridge Centre for Teaching and Learning short course (online and in-person elements) on supervising undergraduates or equivalent face-to-face training provided by a relevant academic department.

Recommendation: *The Department must ensure all staff have regular appraisals and promotion criteria are transparent to all staff. (5.3)*

The current department leadership recognised the need to reenergise the existing staff review and development (SRD) process which began with a full process review in March/April 2024 and a staged launch of the revised processes in May 2024 starting with clinical roles, then non-clinical professional services and finally for researchers and research and teaching academic staff. Scholars have a separate, ongoing review process to actively support their training and development.

Our HR team have offered clarity to Reviewers and Reviewees about the expectations, formats and outcomes of the process. The HR team have also established a tracking process to ensure reviews are conducted regularly on a schedule agreed by the senior leadership team.

Alongside the SRD process, our HR team support managers implement our probation processes, providing managers with guidance, information, prompts and active support as required.

Where staff promotion routes exist (currently for academic and research staff only), these are discussed with individuals through the SRD process, detailed guidance and information is provided through our central HR team with the launch promoted directly to eligible staff through departmental channels, our central HR team coordinate a CV mentoring scheme for prospective applicants and the departmental leadership team offer 1-1 support for those considering an application.

Recommendation: *The school must address staff morale and concerns around workload. (5.5)*

This recommendation reflects key aims of the current leadership team to review and clarify and strengthen line management of academic staff and reinvigorate our SRD process. These actions are already underway.

The Department is also considering options for oversight of workload management, including locally developed and off-the-shelf packages to support this.

In more general terms we are pursuing a policy of greater openness and transparency in decision-making and providing greater autonomy to teams working within the department.

Domain 6: Curriculum and Assessment

Recommendation: *The Department must continue to develop ILOs across the entire programme and map them accurately to D1Cs. (6.1)*

The Curriculum Review Group responsible for reviewing our preclinical programme has approved a list of ILOs at the level of the preclinical course (covering the first two years) which have been mapped those to the D1Cs. As the group progresses through the deep-dives, ILOs are being produced at module level, with a number of courses already nearing approval. Although ILOs are not yet routinely being provided at session (lecture/practical) level in the preclinical course, this is something we will aim to work towards with our colleagues responsible for the delivery of the preclinical programme.

Recommendation: *The Department must consider the entirety of the programme in the review process and with respect to delivery of D1Cs. (6.3)*

A revamped Veterinary Education Committee will be responsible for the entirety of the programme including the curriculum review process and the delivery of D1Cs. While our initial focus has been on ensuring mapping of D1Cs within our clinical curriculum and the preparing for veterinary practice stream of the course we will ensure holistic coverage.

Recommendation: *The Department must introduce methodologies which enable them to evidence the focus of the clinical teaching in the general practice context. (6.4)*

We are puzzled by the visitors comment about “Little evidence of standard being met during the preclinical curriculum”. We already address clinical relevance of some of the preclinical studies in our Clinical Linkers sessions. Everything in our preparing for veterinary practice stream is taught with a focus on general practice. While we constantly evolve the preclinical course, we do not intend to make any fundamental changes to the preclinical teaching in response to this comment. We will be working more closely with the course organisers and teaching leads through the identification of individuals from the veterinary school to assist the preclinical course leaders in the content and delivery of these course to veterinary students to provide more consistent levels of clinical input.

Recommendation: *The Department must complete the identification of the ILOs across the entire programme in a manner that shows a cohesive framework. (6.5)*

Recommendation: *Programme Learning Outcomes must be communicated to staff and students. (6.5)*

The Department will develop a curriculum overview document which maps the entire veterinary course (preclinical and clinical) and communicate this to staff and students. The Veterinary Education Committee (the body responsible for oversight of the entire preclinical and clinical programme) will add a review of this document to its work plan to ensure it is kept current.

Recommendation: *The Department must develop more robust mechanisms to evidence how students' experience develops over time to ensure any competence gaps are addressed. (6.6)*

The primary way that experiential learning is documented is through the MyProgress-hosted ePortfolio. The MyProgress-hosted ePortfolio creates a documented log of student learning and Veterinary School Clinical Supervisor (VSCS)/assessor coaching. Being rolled out for all years (whole school included 2025-26) MyProgress includes termly student and VSCS co-created action plans; and student-led unique AHEMS/EMS placement learning objectives, reflection and VSCS coaching feedback. These processes facilitate the targeted experiential learning towards the day one competencies and the personalised addressing of competence gaps.

Recommendation: *The Department must develop core opportunities to teach and assess students in pig handling prior to EMS. (6.8)*

See response to recommendation 4.12 above. A pig handling course has now been introduced into the first year of the course.

Recommendation: *The Department must investigate concerns regarding placements when they're raised, and take appropriate action to mitigate in future (or remove placements if appropriate to protect future students). (6.9)*

MyProgress includes a mandatory student reporting system for students to 'check in' whilst on placements to ensure a consistent point of contact and escalation for any on-placement concerns, in addition to the 24/7 support from College Porters for immediate concerns on placements. Students log their experience of all placements, including a specific reporting system for discriminatory or other issues faced on placements, which will be investigated as appropriate with the support of the Tutorial Office, VSCSs, and the EMS co-ordinators.

A written policy is under development to ensure consistency in the investigation and management of issues, which will include the prompt removal of unsuitable placements from our approved placement database for both AHEMS and CEMS. This is expected to be in place by Lent (spring) term 2025

Recommendation: *The Department must ensure that EMS is individual to each student so they can tailor their experience based on their own learning needs. (6.11)*

The visitors were concerned that "Students appear to be somewhat limited in scope for making EMS their own. Strict species requirements are imposed". In accordance with the recently updated RCVS EMS Policy, going forward the Department will no longer impose any restrictions or quota on Clinical EMS. Students discuss their EMS on a one-to-one basis with their Veterinary School Clinical Supervisors and are encouraged to pursue a course of EMS that both prepares them for practice and addresses their interests and ambitions.

Recommendation: *The Department must develop an integrated and holistic assessment framework at the programme level. (6.14)*

In addition to the fully mapped clinical course the Curriculum Review Group responsible for reviewing our preclinical programme has approved a list of ILOs at course level, for the first two years. These have been mapped those to the D1Cs. As the group progresses through the deep-dives, ILOs are being produced at module level, with a number of courses already nearing approval. Although ILOs are not yet routinely being provided at session (lecture/practical) level in the preclinical course, this is something we will aim to work towards with our colleagues responsible for the delivery of the preclinical programme.

Recommendation: *The Department must take a more comprehensive approach to the evaluation of validity and reliability of assessments across the programme. (6.15)*

While the Department undertook a comprehensive mapping exercise for all clinical assessments against D1Cs several years ago, our Veterinary Education Committee will add a periodic (expected to be triennial) assessment review to confirm they remain appropriate and fit with the curriculum. The Department will continue to actively engage with colleagues responsible for coordination of preclinical assessment on a full review of preclinical assessment and will seek to establish a firm timetable for this planned work.

Recommendation: *The Department must review the assessment load across the whole programme and implement effective changes with a particular emphasis on the preclinical years to ensure a more balanced and manageable assessment load. (6.18)*

We will continue to review the assessment load across the whole programme and implement effective

changes if needed to achieve a manageable assessment load. While our students share part of their education with medical students and natural sciences students at Cambridge, and receive the same undergraduate degree, they cannot be treated as less able or less capable students. We recognise that there may be workload issues faced by all our undergraduate students and will address this recommendation in that context.

Recommendation: *The Department must implement a more comprehensive approach to moderation and standard setting across the entire programme. (6.19)*

The Department is content that work in this area is already well underway within our preclinical courses and the Veterinary Education Committee will ensure this remains a priority, seeking regular reporting from our assessment lead on progress in standard setting and moderation for clinical courses. Alongside this work, the Department will continue to review student workload, ensuring appropriate benchmarking with, for example, the University's clinical medicine course.

Recommendation: *The Department must implement a system to provide a robust means of recording the quality and quantity of clinical experience. (6.20)*

The visitors made particular comments about students not being taught how to undertake reflective learning and noted that we were part way through implementing our e-portfolio system to record clinical experience. We have scheduled staff training on reflective learning during 2024-25 to improve the guidance and feedback that students receive for their reflective learning. The MyProgress-hosted ePortfolio system is now implemented and being introduced first for the new first and fourth year students. We plan to have it fully implemented with 2 years.

Suggestion: *The Department could better align the teaching of skills and EMS and communicate this with students more effectively. (6.13)*

These comments arose from some timetabling complications which have now been addressed.

The Department can confirm that appropriate skills teaching, and EMS preparation already precedes EMS. 1st year students receive an 'Introduction to EMS Lecture' as one of the first lectures in the Principles of Animal Management course during Michaelmas (autumn) term, prior to any AHEMS placements. Students must also be 'signed off' as competent in animal handling at the end of Michaelmas term before being allowed to attend any AHEMS.

The last lecture of the Preparing for the Veterinary Profession course in Lent (spring) term for 2nd year students focusses on Clinical EMS, giving a light touch overview of Clinical EMS to help students who are thinking of booking same.

4th year students receive a lecture on 'Introduction to Clinical EMS' in the Clinical Phase Orientation programme (first week Michaelmas Term), in this lecture students are directed to the Clinical course and advised to tailor their clinical EMS to align with the clinical teaching for Farm, Equine and Small Animal modules.

There are 'Introduction to First Opinion Practice' lectures for Equine and Small Animal in both Michaelmas and Lent terms of the 4th year.

Suggestion: *The Department should establish a formally constituted assessment group that has overarching and coordinated strategic oversight and control of assessment for the whole programme. (6.14)*

Although there are distinct advantages to maintaining separate assessment groups focussing on preclinical and clinical teaching, our Veterinary Education Committee will undertake a formal review the whole course curriculum each year both through the well-established Sub-/Working Groups for more detailed work, and with the whole Committee for whole course oversight purposes.

Timelines for completion

We have not provided specific completion dates for many of the things we have indicated that we intend to change as part of our responses. There are many changes to implement, and some involve complex management of the different stakeholders to ensure that those affected are properly consulted. We are planning to either implement or design changes in the current academic year (2024-25) with a view to the next academic year (2025-6) being the first complete year that all changes are in place. The changes are being designed not only to make the improvements but also to generate the evidence that they are functioning as intended so that the appropriate documentation accrues in our accreditation document archive. The earliest point at which we will have accumulated a whole year's evidence will be the end of academic year 2025/26.

Should the RCVS require greater detail concerning the timing we are beginning to identify the critical events (e.g. scheduled governance meetings, faculty board meetings etc.) at which each element will be considered and could provide a Gantt chart at some later date should it be requested.

Cambridge Visitation Template**Sunday 26th May**

Time	Meeting / Tour	Scope / focus
18.00 – 20.00	Panel Member Pre-Meet	Panel Members Only

Venues on are site at Department of Veterinary Medicine, unless stated otherwise.

Monday 27th May

Time	Meeting / Tour	Scope / focus	Notes and people	Venue and Zoom details
07.45	Leave hotel			
08.00	Private meeting	Panel Members only		HR meeting room
08.15	Welcome with senior team & organisation	Background and vision presentation, including committee overview/structure (15 mins max)	Prof. Mark Holmes, HoD and Dean Dr Jane Dobson, Deputy Head, Teaching and Associate Clinical Dean Mr Alex Drury, Business Operations Manager Prof. Clare Bryant, Deputy Head, Strategy,	Lecture Theatre 2

			Professor of Innate Immunity Prof. Julian Parkhill, Deputy Head, Research	
09.00	Senior team & those responsible for the curriculum and assessment	Curriculum & assessment presentation (30 mins max)	Dr Tim Williams, Associate Professor in Clinical Pathology Dr Barbara Blacklaws, Associate University Professor Dr Claire Michel, Education Projects Manager, School of the Biological Sciences Holly Canuto, Director of Pre-clinical Medical and Veterinary Education (via Zoom) Jane Dobson Mark Holmes	Lecture Theatre 2 and via Zoom Topic: Meeting with RCVS visitation panel (curriculum & assessment) Time: May 27, 2024 09:00 London Join Zoom Meeting https://cam-ac-uk.zoom.us/j/89374090071?pwd=aIRFSjR0YThDbTM1cFVSYnE3M3Fldz09 Meeting ID: 893 7409 0071 Passcode: 174581

			Mr Mark Phillips, QA Co-ordinator Miss Katheryn Ayres, Veterinary Studies Programme Manager Prof. Nick Bexfield, Teaching Professor, Clinical Director of Small Animal Services Dr Milorad Radakovic, Associate Teaching Professor	
10.00	Comfort break			
10.10	Senior team & those responsible for the curriculum and assessment	Demo of curriculum mapping system (20 mins max)	Tim Williams Barbara Blacklaws Jane Dobson Mark Holmes	Lecture Theatre 2
11.10	Comfort Break			
11.20	Tour of Cambridge facilities		Split the group into 2 with one host each group.	Group 1 Led by Nick Bexfield Imaging, small animal reception, Pauline Brown Clinical Skills Centre, kennels/SA Wing,

			<p>1) Group 1 Led by Nick Bexfield Niall Kirsty Princess Pred Michal Jordan</p> <p>2) Group 2 Led by Jane Dobson Susan Hannah Mary Peter Rowland Linda</p>	<p>Teaching lab, student building</p> <p>Group 2 Led by Jane Dobson Lecture theatre 1, Main building study space, PM room, MHF, Equine unit, farm animal inpatient area, CTU</p>
13.00	Private lunch	Panel Members only		HR meeting room
13.30	Tour of Cambridge facilities	Schedule in 10 min comfort break during the tour	Visit to the University Farm. PPE to be provided. Led by Prof. Ian McCrone, Professor of Farm Animal Health & Production	University Farm, Madingley
16.15	Finances meeting	Presentation on finances, max 15 minutes	Mr Matthew Moon, Hospital Managing Director	Lecture Theatre 2

			Mrs Gina Arnold, Departmental Finance Manager Mark Holmes Alex Drury	
17.15	Comfort Break			
17.30	ST mop up + Facilities Team	Panel Members to ask for any clarification based on the visit day/evidence reviewed	SMT (plus possibly Tim Williams) Alex Drury Clare Bryant via Zoom	HR Meeting Room and via Zoom Topic: Meeting with RCVS visit panel - SMT mop up meeting Time: May 27, 2024 17:30 London Join Zoom Meeting https://cam-ac-uk.zoom.us/j/81345130738?pwd=M3JKOU9qNVRJd2hvS2hOM2ErMDNwZz09 Meeting ID: 813 4513 0738 Passcode: 399410
18.00	Leave for hotel			
18.30	Confidential sessions (staff/students, online) & private meeting	RCVS to organise confidential sessions		

Tuesday 28th May

Time	Meeting / Tour	Scope / focus	Notes and people	Venue and Zoom details
07.45	Leave hotel			
08.00	Private meeting	Panel Members only		HR meeting room
08.15	Student academic and wellbeing support	Presentation on approach to student support, inc. training for staff (max 10 mins)	Prof. Dan Tucker, Professor of Veterinary Public Health Katheryn Ayres Nick Bexfield Prof. Nicky Holdstock, Associate Professor Holly Canuto	Lecture Theatre 2
09.15	EMS meeting	Demonstration of student EMS records (max 10 minutes) To include pre-clinical, clinical and providers	Anna Hollis Ian McCrone Katheryn Ayres Rachel Worsley, E-portfolio & Admissions Event Co-ordinator <u>EMS providers:</u> Rossdales, Newmarket	Lecture Theatre 2
10.00	Off-Campus Tours	Panel to be split into 3. Two groups to tour CoWA, RSPCA Clinic and Downing	Prof. David Bainbridge, Professor of Comparative Anatomy	College of West Anglia, Milton RSPCA Clinic, Cambridge Preclinical teaching sites in central Cambridge, Humphreys & Sons abattoir, Essex

		site. One group to visit Humphreys & Sons abattoir in Essex. Timings to be confirmed.	Dr Peter Fordyce, Associate Teaching Professor Dr Emma Dobson, First Opinion Veterinary Surgeon CoWA staff – Donna Woodruff Milorad Radakovic/Dan Tucker	
13.00	Private lunch	Panel Members only		Pitt Building, Trumpington Street
14.30-16:00	Years 1-3 Cambridge Students	Townhall style meeting ideally in lecture theatre – minimum of 15 students	<u>1st year</u> Lillie Dawson-Jones Jasmine Kendall Grace Kidman Alex Penberthy Catherine Hollamby Holly Powell <u>2nd year</u> Jessica Xiao Libby Sutcliffe Natalie Reynolds Jack Pyman <u>3rd year</u> Holly Oakley Abby Phillips Joshua Welling Daniel Silverthorne Amy Collings Emily Farmer	Large Lecture Theatre, Botany Building, Plant Sciences, Downing Site
16:10	Comfort Break and transport		½ hour break to allow transport from	

	back to Vet School		town to back to the Vet School	
16:30-18:00	Years 4-6 Cambridge Students	Townhall style meeting ideally in lecture theatre – minimum of 15 students	<u>4th year</u> Emily Moon Niamh Morgan Kate Pretty Sarah Murphy Greta Grabausekatie Bertie Cliffe <u>5th year</u> Joe Horner Anna Bradbury Karen Collis Sammie Lam Will Appleby <u>6th year</u> Ollie Bardsley Nasar Siddiqui Mai Tumber Emma Brown Selena Malortie Rebecca Maxwell Chloe Todd Ruweena Perera	Lecture Theatre 2
18.00	Mop up session with ST	Panel Members to ask for any clarification based on the visit day/evidence reviewed	SMT, Clare Bryant via Zoom	HR Meeting Room Topic: RCVS visit - mop up session with SMT Time: May 28, 2024 18:00 London Join Zoom Meeting https://cam-ac-uk.zoom.us/j/84531725949?pwd=c3ZXUFJVb3owYWRRMMUpjaINLb096Zz09 Meeting ID: 845 3172 5949

				Passcode: 086375
18:30	Leave for hotel			
18.45	Confidential session (staff/students, virtual) or private meeting	RCVS to organise confidential sessions		

Wednesday 29th May

Time	Meeting / Tour	Scope / focus	Notes and people	Venue
07.45	Leave hotel			
08.00	Private meeting	Panel Members only		HR Meeting Room
08.10	Staff responsible for admissions	Presentation on admissions (max 20 mins)	David Bainbridge Katheryn Ayres Rachel Worsley Tim Williams Dr Cassia Hare, Principal Clinical Pathologist	Lecture Theatre 2
09.00	Demo of Medical Records system		Matthew Moon Siobhan Barnes Jane Dobson	Lecture Theatre 2
09.30	Comfort break			
09.40	Junior teaching staff		Sophie Compton Sarah Cox Katherine Phillips Katie Fox Dylan O'Toole Meytar Ronel Emily Brady Ollie Russell Ryan Soussa Bethany Guy Charlotte Dobson Tom Butler Seb Prior	Main Meeting Room
10.40	Senior teaching staff		Dr Kate Hughes, Associate Professor Ian McCrone	Main Meeting Room

			Dr Andrew Grant, Associate Professor in Microbial Pathogenesis Milorad Radakovic Hannah Almond, Clinical Skills Centre Manager and Educator Prof. Piero Mastroeni, Prof. of Infection and Immunity Prof. John Gibson, Prof. of Pathophysiology Prof. Steve Edgley, Prof. of Neuroscience Dr Matt Mason, University Physiologist	
11.40	Comfort break			
11.50	Technical support staff, IT staff, facilities staff		Hugh Balmer, Senior Histology/Teaching Lab/Post Mortem Room Technician Mathew Rhodes, Post Mortem Room Manager, Shaun Prince, IT Officer, Tom Butler, Facilities Manager Sam Stevens, Merton Hall Farm Manager Sharon Chandler, Head Nurse Lorraine Leonard, Veterinary Librarian	Main Meeting Room
12.45	E-portfolio Demonstration		Hannah Wong, E-Portfolio Academic Lead Barbara Blacklaws, Deputy Director of Teaching (Exams & Assessment) Katheryn Ayres, Veterinary Studies Programme Manager Ian McCrone, Maartje Körner, SBS Educational Technologist Mark Phillips, QA Co-ordinator	Lecture Theatre 2

13.15	Private lunch	Panel Members only		HR Meeting Room
14.00	Showcase slot	1) Group 1 BOAS group Niall/Pred/Mary/Princess/ Michal/Linda 2) Group 2 Clinical Skills Centre Susan/Rowland/Jordan/Kirsty Hannah/Peter	Dr Julia Riggs, Clinical Training Lead in Soft Tissue Surgery, Amy Olivant, Specialist Nurse Prof. David Sargan, Associate Professor in Molecular Pathology Hannah Almond Dr Alison Hayes, Associate Principal Oncologist	Group 1 BOAS lab Led by David Sargan Group 2 Clinical Skills Centre Led by Alison Hayes
14.45	Comfort break			
15:00	Clinical Teaching Staff for IMR		Nick Bexfield Jane Dobson Dr Paul Freeman, Teaching Professor Dr Barbara Skelly, Associate Professor Dr Alice Bird, Principal Clinical Anaesthetist Prof. Mike Herrtage, Prof. of Small Animal Medicine Peter Fordyce, Dr Julia Riggs, Clinical Training Lead in Soft Tissue Surgery	Main Meeting Room
15.45	Graduates, alumni, employers		<u>Graduates and alumni</u> Meytar Ronel (2022) Tom Kearns (2015) Sarah Cox (2019) Rumaysa Bint Saifullah (2023)	Main Meeting Room (or LT1 if available)

			Josie Brant-Smith (2012) via Zoom Alex Berry (2019) <u>Employers</u> Iain Cope, Vets4Pets, Newmarket David Dugdale, Newmarket Equine Hospital (Further names to be added.)	
16.30	Comfort break			
16.45	Senior team mop up + Admissions questions	Panel Members to ask for any clarification based on the visit day/evidence reviewed	David Bainbridge, Tim Williams, Cassia Hare, plus SMT	HR Meeting Room
17.15	Leave for hotel			
17.45	Confidential sessions (staff/students, online) & private meeting	RCVS to organise confidential sessions		

Thursday 30th May

Time	Meeting / Tour	Scope / focus	Notes and people	Venue and Zoom details
08.15	Leave hotel			
08.45	Private meeting	Panel Members only		HR Meeting Room
09.00	Free time to revisit areas/groups	To be determined during the visit	View of the equine ambulatory vehicles – Anna Hollis (available until 9.30am)	
09.00	Visit to World Horse Welfare, Snetterton, return by lunchbreak			
10.00	Senior University staff, i.e. Senior clinical team covering these areas facilities/ caseload/ resources/ staffing /curriculum	Panel to split into two	<p><u>Group 1</u> Senior Management Team, Nick Bexfield, Ian McCrone, Anna Hollis, Alex Drury Clare Bryant via Zoom (Ian McCrone and Anna Hollis to stay on to discuss final year large animal rotations)</p>	<p>West 2, West Hub and via Zoom</p> <p>Topic: Meeting with RCVS visit panel - meeting with senior uni staff + SMT Time: May 30, 2024 10:00 London</p> <p>Join Zoom Meeting https://cam-ac-uk.zoom.us/j/81034190310?pwd=bE0yQS9sZXBsQ3hrZ1phUGZrU3lGQT09</p> <p>Meeting ID: 810 3419 0310 Passcode: 536677</p>

	& Junior teaching staff		<u>Group 2</u> Junior Teaching staff (may be some changes due to clinical commitments): Malina Filipas Andre Figueiredo Baptista Susana Monforte Monteiro Akash Alexander Emma Dobson	Main Meeting Room
11.00	Comfort break			
11.15	Free time to revisit areas/groups	To be determined during the visit Group to be split in two	Walk through (including isolation facilities) of the small animal hospital with students in place – Nick Bexfield Visit to PM room & Teaching Lab, with Kate Hughes	
12:30	Lunch	Panel Members only		HR Meeting Room
13.00	Student session – all years	Students who were unable to attend the town hall style -	<u>4th year</u> Ben Paddy Abi Barrass Elizabeth Brooks <u>5th year</u> Robyn Halcrow	LT2

		meeting minimum 15 students, different students from previous sessions	<u>6th year</u> Vanessa Tsang (Further names to be added)	
13:50	Comfort Break			
14.00	Showcase slot	Cambridge to choose area	Mrs Lorraine Leonard, Veterinary Librarian	West Hub
15.00	Mop up session with ST	Panel Members to ask for any clarification based on the visit day/ evidence reviewed	Senior Management Team	HR Meeting Room
16.00	Leave for hotel			
16.15	Confidential sessions (staff/students, online) & private meeting/report writing	RCVS to organise confidential sessions		

Friday 31st May

Time	Meeting / Tour	Scope / focus	Notes and people	Venue
09.45	Leave hotel			
10.30	Private meeting	Panel Members only		HR Meeting Room
10:50	Meeting with Dean	Chair to feedback to Dean the findings from the team (and members of senior team at the dean's discretion)	Mark Holmes Jane Dobson Matthew Moon Alex Drury	Lecture Theatre 2
11:40	Comfort break			
11:30	Meeting with VCs	Chair to feedback to the VCs and Dean the findings from the team	Prof. Anna Philpott, Head of the School of Biological Sciences Mark Holmes	HR Meeting Room
12:00	Panel members depart			