Royal Veterinary College
University of London

American Veterinary Medical Association

Self-Study Report

30 November – 4 December 2025

Executive Summary

It is a pleasure to welcome the visitation team from the Council on Education (CoE) of the American Veterinary Medical Association (AVMA) to the Royal Veterinary College (RVC). We are pleased to share the journey of the last seven years, setting it in the context of our evolution since 1791 and, recently, some of the most challenging times in our history.

As an organization that seeks to provide leadership and innovation at a global level, we strive for the highest of standards internationally, and the accreditation process of the CoE is pivotal to us delivering to our mission and meeting our stated objectives, viz.,

- To be a world-leading organization in the discovery and dissemination of impactful knowledge in veterinary, biomedical and allied sciences, food sustainability, zoonotic disease control and translational medicine.
- To be recognized as world leaders in veterinary science, the biological and biomedical sciences and veterinary nursing education and the delivery of a student-focused university experience.
- To be regarded as a leading international authority in animal health and welfare by innovating, advancing, and providing the highest levels of clinical practice.

Since the last visit of the CoE in 2018 – at that time a joint visit with the UK and European accreditors – we have been able to address fully the recommendations of that visit and have reported on these, either in response to the visitation report or, subsequently, in our annual updates. These, together, with the metrics applied by our own Council suggest that we have continued to meet our objectives and grow as an organization.

During the period under review, the RVC has also been assessed under the various frameworks of the Office for Students, the regulator of universities in England. Specifically, in the Teaching Excellence Framework, we received a Gold for Student Outcomes and Silver for Student Experience, while in the Research Excellence Framework, the RVC came top of its sector nationally for research power, a combination of the quality and volume of our research.

Surviving the rigors of the COVID-19 pandemic and the extreme, multiple lockdowns in the UK will be a chapter on which we will reflect for generations. Whilst the modifications in the face of the virus included everything from admissions to final assessments, we were still able to graduate the classes of 2020, 2021 and all subsequent cohorts on time and to standard. It is probably true that we will be living with the consequences of disrupted elementary and high school education for some time to come and, amongst other things, there will be a need for our sector to ensure we maximize the benefits of online delivery, when appropriate, to a generation of digital natives.

We have invested heavily in our built environment since the last visitation, including most notably our new Student Learning Centre, the Large Animal Handling Facility and refurbished student accommodation to a total of over 100M USD, and we have continued to pursue arrangements to address spectrum of care aspects of our clinical curricula.

As described in our annual reports, the roll out of our revised BVetMed curriculum has been taking place over recent years and the graduating class of 2026 will see the process complete. An evolution of its predecessor, the increase in focus and volume of the rotational element seeks to address the changing expectations of our several accreditors, as well as providing greater capacity for students to develop and prepare for their intended career destinations.

In the pages that follow, the details that lie behind this narrative will be found. We apply several tools to the assessment of the quality and effectiveness of our programs and these are described in detail in the appropriate standards. Principal amongst these are the quality assurance processes that range from course specific annual survey and analysis to periodic reviews involving external peer group critique. Combined with the periodic accreditation processes and the outcomes of graduate performance and satisfaction as reported by our national educational and professional

regulators, we have a formalized feedback loop that, again, suggests we are meeting the required standards.

One topic that does require particular mention is the RVC students' performance in the North American Veterinary Licensing Examination. Leaving the detail for the appropriate standard, briefly, we have been disappointed to have fallen short of the required standard for several years. Why, after two decades, we found ourselves in danger of being non-compliant is under intensive review and, as the CoE will be aware, the RVC has taken the issue very seriously: the consequences for the organization are existential and, as it transpires, catastrophic for students currently enrolled. Although the work continues on elucidating the reasons behind this deterioration in performance, fortunately, it would appear that the RVC's investment in time, effort and engagement to restore performance to historical levels has led to the situation being resolved.

Society, Higher Education and the veterinary profession are all changing rapidly. As we seek to continue "making a good thing better" we recognize the importance of our accreditors in helping us bolster our strengths and address our challenges.

Strengths

- The RVC's singular veterinary focus facilitates development and innovation as a leader in veterinary medical education.
- In response to the suggestion of the 2018 visitation team, our succession planning has been strengthened and our commitment to diversity in all our community enhanced.
- The financial performance over 15 years has been strong and even in the current UK economic environment, a significant "contribution" has been achieved annually.
- Since the 2018 visit, our facilities have been expanded and upgraded, with investment in the food animal area addressing a 2018 suggestion.
- With a portfolio of contracted partnerships and an engaged faculty and staff, the educational offering to veterinary students allows them to attain the AVMA's nine competencies, as well as having increased exposure to the spectrum of veterinary care.
- We continue to be a leader in innovation in pedagogy with our postgraduate programs in veterinary education attracting veterinary educators from around the world.
- Our research is globally relevant, and the RVC is both a Reference Centre for the Food and Agricultural Organization of the United Nations and a Collaborating Centre of the World Organization for Animal Health.
- With its university status, the RVC has direct access to the Office for Students, the Department for Education and government ministers, providing opportunity for influence through advocacy and lobbying.

Weaknesses and Challenges

- Funding for UK universities continues to be eroded, with home fees now at 60% of their 2012 value in real terms. Veterinary medical education is the most expensive to deliver, of all subjects, in the UK.
- The changing face of the international education market and the various means by which students can finance their education require a portfolio approach to student recruitment.
- The cost of living in general, and in London in particular, impact both students and employees. It also affects the ability of owners to meet clinical charges.
- Although we have made significant advances in widening participation, the student body still lacks diversity in gender, ethnicity and socio-economic status.
- With both the need for a new legal framework in the UK and the inquiry by the Competition and Markets Authority, it is clear those joining the profession will be entering a different environment and, as such, the RVC's role in preparing our graduates for success will require close attention to emerging challenges.
- In a similar vein, it is not clear where the increasing corporatization of veterinary practice will ultimately lead.

- The changing face of student expectations, including changing attitudes to animals in research, animals in the food chain and euthanasia will require careful management as increasing numbers of individuals with protected characteristics will require more complex adjustments.

Our future development will require the RVC to continue to be fiscally prudent as well as working with new generations to evolve our teaching and assessment methods in addressing the increasing need for scope of care delivery. In addition to diversification of our recruitment, we recognize that educational models and clinical delivery are changing rapidly. Our major charge is to be part of shaping the future rather than merely reacting to these changing environments.

Despite these challenges, we are of the view the RVC has the governance and delivery structures, the financial robustness, the facilities, faculty and staff, the pedagogical framework and, most importantly, a community of current and future students that will allow it to deliver to its mission and meet the standards expected of us by the CoE.

We welcome your critique, your advice and your encouragement.

Stuart W J Reid, President & Principal

Abbreviations

AB	Academic Board
ACT	Animal Care Trust
ACVECC	American College of Veterinary Emergency and Critical Care
AHEMS	Animal Husbandry Extramural Studies
AI	Artificial Intelligence
APP	Access and Participation Plan
AQIR	Annual Quality Improvement Report
ARC	Audit & Risk Committee
AVMA	American Veterinary Medical Association
BPF	Boltons Park Farm
BSAH	Beaumont Sainsbury Animal Hospital
BVetMed	Bachelor of Veterinary Medicine
BVSc	Bachelor of Veterinary Science
CATR	Critically Appraised Topic Report
CBS	Comparative Biomedical Sciences
CEC	College Executive Committee
c-EMS	Clinical Extramural Study
CFC	Cause for concern
CMC	Course Management Committee
COG	Clinical Operations Group
CPD	Continuing Professional Development
CRERB	Clinical Research Ethical Review Board
CRIS	Clinical Record Information System
CSC	Clinical Skills Centre
CSR	Critiqued Scientific Review
CSS	Clinical Science and Services
CT	Computed Tomography
CTEP	Clinical Teaching and External Partnerships
CUC	Committee of University Chairs
DL	Directed Learning session
DLC	Digital Learning Champion
DLI	Digital Learning Interaction
DOPS	Direct Observation of Practical Skills
DSA	Disabled Students Allowance
EAEVE	European Association of Establishments for Veterinary Education
ED	Educational Development Team
EDI	Equality, Diversity and Inclusion
eDOPs	Electronic Direct Observation of Practical Skills
EMS	Extramural Studies
ERH	Equine Referral Hospital
EWC	Ethics and Welfare Committee
FGPC	Finance and General Purposes Committee
FTE	Full Time Equivalent
FAO	Food and Agricultural Organization of the United Nations
GAB	Graduate Accelerated Bachelor of Veterinary Medicine
GNC	Governance & Nominations Committee
HACCP	Hazard Analysis and Critical Control Point
HEI	Higher Education Institution
HESA	Higher Education Statistics Agency

HR	Human Resources
ICA	In Course Assessment
ICP	Individual Career Pathway
ICU	Intensive Care Unit
IELTS	International English Language Testing System
IMR	Intramural Rotations
INSET	In Service Education and Training
IRR	Ionising Radiations Regulations
ISD	Infrastructure Services Directorate
ISF	Integrated Structure and Function
IT	Information Technology
JANET	Joint Academic Network
KPI	Key Performance Indicators
LAHF	Large Animal Handling Facility
LBIC	London Biosciences Innovation Centre
LIMS	Laboratory Information Management System
LIVE	Lifelong, Independent Veterinary Education
LRC	Learning Resource Centre
LTAC	Learning, Teaching and Assessment Committee
LTASE	Learning, Teaching, Assessment and Student Experience
MCQ	Multiple Choice Questions
MDP	Management Development Program
MFA	Multi Factor Authentication
MMI	Multi Mini Interview
MRes	Master of Research
MRI	Magnetic Resonance Imaging
MVetMed	Master of Veterinary Medicine
NSS	National Student Survey
OfS	Office for Students
OOH	Out-of-Hours
OSCE	Objective Structured Clinical Examinations
PAG	Principal's Advisory Group
PGCert	Postgraduate Certificate
PGCert VetEd	Postgraduate Certificate in Veterinary Education
PMS	Practice Management System
PMVPH	Population Medicine and Veterinary Public Health
POS	Principles of Science
PPE	Personal Protective Equipment
PPS	Pathobiology and Population Sciences
PSD	Professional Services Department
PSQ	Problem Solving Question
PVP	Principles of Veterinary Practice
Q&A	Question and Answer
QMHA	Queen Mother Hospital for Animals
R & R	Reflect and Review
RAC	Recruitment and Admissions Committee
RCVS	Royal College of Veterinary Surgeons
REF	Research Excellence Framework
RIDDOR	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations
RP	Research Project
RSPCA	Royal Society for the Prevention of Cruelty to Animals

SC	Safety Committee
SEBVM	Scholarship and Evidence-Based Veterinary Medicine
SEN	Special Educational Needs
SFH	Synergy Farm Health
SPD	Student Performance and Development Process
SRA	Student Record of Achievement
SRC	Student Resolution and Compliance
SSRC	Senior Staff Renumeration Committee
SU	Students' Union
TEF	Teaching Excellence Framework
TLiHE	Teaching and Learning in Higher Education
TQC	Teaching Quality Committee
TRACI	Translational Research and Clinical Imaging
UCAS	University and College Admissions Service
UGCMC	Undergraduate Medicine Course Management Committee
UKCISA	UK Council for International Student Affairs
UK ENIC	UK National Information Centre
UoL	University of London
VetGDP	RCVS Veterinary Graduate Development Program
VLE	Virtual Learning Environment
VMCAS	Veterinary Medical College Application Service
VMSAR	Veterinary Medical School Admissions Requirements
VPH	Veterinary Public Health
WHO	World Health Organization
WOAH	World Organization for Animal Health

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Standard 1: Organization

1.1 Provide a college mission statement for the undergraduate, DVM, or equivalent program. The college mission statement must address:

- The overall teaching, research, and service commitment,
- The commitment to undergraduate education,
- The commitment to provide instruction and clinical opportunities for students in a wide variety of domestic species, including food animal, equine, and companion animal, and the commitment to excellence in program delivery.

The Mission of the Royal Veterinary College (RVC) is to be a leading international authority in education, clinical care, research, expert opinion and employment in veterinary and biomedical sciences. The RVC is committed to the three pillars of its mission:

- Discovery and translation of new knowledge
- Education of undergraduate and postgraduate students
- Delivery of the very best clinical care and opinion.

The RVC Strategic Plan 2022-2026 identifies the activities to which the RVC is committed, its focused objectives and the broad metrics by which it expects to be judged. This sets out the RVC's four key themes for which success in one is dependent on success in all. These are:

Discover / Innovate / Change: the RVC aims to be a world-leading organization in the discovery and dissemination of impactful knowledge in veterinary, biomedical and allied sciences, food sustainability, zoonotic disease control and translational medicine.

Teach / Learn / Experience: the RVC strives to be recognized as world leaders in veterinary science, the biological and biomedical sciences and veterinary nursing education and the delivery of a student-focused university experience.

Care / Cure / Prevent: the RVC strives to be regarded as a leading international authority in animal health and welfare by innovating, advancing, and providing the highest levels of clinical practice.

Sustain / Support / Invest: the sub strategies for Human Resources, Finance, Infrastructure and Environmental Sustainability align objectives with operational commitments and reflect national and sectoral priorities, as well as those in the RVC Strategic Plan.

The educational aims of the RVC's strategic plan are developed further in the Learning, Teaching, Assessment and Student Experience (LTASE) Strategy. This clearly outlines the intention to have outcomes-based degree programs that satisfy the requirements of the accrediting bodies with an explicit intention to develop students as lifelong learners.

1.2 Identify the body that accredits the university and the current status of accreditation.

The RVC is registered (accredited) with the independent regulator of higher education in England, the Office for Students (OfS), in accordance with the legislative framework for Higher Education (the Higher Education and Research Act 2017). Institutions must meet a specific set of conditions of registration and demonstrate ongoing commitments to these, and other new conditions implemented.

The RVC is one of 17 member institutions which constitute the federal University of London (UoL). While the RVC benefits from the collegiate affiliation to the other member institutions, it has sole responsibility for its own students, staff and wider environment. The UoL is subject to a recognition order of the Veterinary Surgeons Act (1966), which allows it to award the Bachelor of Veterinary Medicine (BVetMed), such that holders of the degree are registered with the Royal College of Veterinary Surgeons (RCVS) and able to practice. It exercises this right via its Ordinances through the RVC. The RVC's President & Principal is a member of the Collegiate Council of the UoL. The Collegiate Council advises the Board of Trustees on the strategic direction of the UoL and is responsible for ensuring the proper discharge of its academic affairs. The legal status and overarching governance arrangements of the RVC are defined in its Charter, Statutes and Ordinances. The RVC's governing body is the RVC Council, which ensures its governance arrangements comply with the Higher Education Code of Governance, issued by the Committee of University Chairs (CUC); this is a condition of the RVC's registration as a Higher Education provider with the Office for Students (OfS).

1.3 Provide a flow chart indicating the position of the college of veterinary medicine in the university structure and show lines of authority and responsibility and give the names and titles of principal university administrative officers related to the college.

Appendix 1.1 shows the relationship between the RVC and University of London (UoL).
Appendix 1.2 shows the RVC senior level organization structure.
The President & Principal, as the Chief Accountable Officer of the RVC, is responsible to the RVC Council within the framework laid down by the Charter and Statutes, the RVC's Regulations and Policies and the RVC's Schedule of Delegation – for the operational management of all aspects of the RVC's work. The President & Principal, Professor Stuart Reid CBE BVMS PhD DVM DipECVPH FRSE FRCVS, is a veterinarian and delegates accountability for specific aspects of the RVC's missions and management to the Principal's Advisory Group (PAG) and/or College Executive Committee (CEC) but retains responsibility for their work.
The Deputy Principal, Vice Principals, Chief Operating Officer and Chief Financial Officer are accountable to the Council, through the President & Principal, for providing leadership and overall management of their respective mission/service areas. Whilst they delegate specific aspects of mission delivery to Heads of Department/Division and other members of the RVC, they retain responsibility for the delivery of their assigned mission and service areas.
Appendix 1.3 provides the name, roles, and credentials of PAG and CEC members.

1.4 Provide a flow chart of the organizational design of the college listing names, titles (deans, associate/assistant deans, directors, department heads, etc.), academic credentials, and assignments of the college administrators.

Appendix 1.4 illustrates how support functions and the three academic departments operate in a matrix structure.
Senior Leaders (Directors and Heads of Department/Divisions) are responsible to the Council, through the President & Principal, for leading and managing academic departments and professional service areas, delegating responsibility for specific aspects of service management to section heads.
The Associate Deans for Undergraduate Teaching and Learning and the Associate Dean for Postgraduate Teaching and Learning oversee strategic development and quality assurance of the Undergraduate and Postgraduate programs, to support the delivery of the institutional Strategic Plan, and ensure programs are fit for purpose, sustainable and maintain academic integrity. The roles ensure all programs are focused not only on appropriate content and assessment, but also on student diversity, student welfare and their extracurricular experiences.
Course Director, Year Leaders and Strand Leaders for BVetMed The Course Director, with the support of their deputy, year leaders and strand leaders, is responsible for ensuring that the BVetMed program delivers its approved learning outcomes and that assessment, feedback and program information is provided accurately and in a timely manner. They lead the development of the program, promote horizontal and vertical integration of the program, have oversight of admissions and ensure appropriate program resourcing.

1.5 Describe the role of faculty, staff and students in the governance of the college.

Appendix 1.5 – Governance, Leadership and Management Overview

The Academic Board (AB) sits as the pinnacle of the governance structure for academic committees and reports to the RVC Council. Faculty are directly represented on the AB and the committees that report to it. Two faculty members from the AB are also elected to the RVC Council, representing faculty's perspective alongside the President & Principal. All major RVC committees include faculty representation.

Student representation as key stakeholders is developed through the Student Voice Strategy (a sub strategy of the Learning, Teaching, Assessment and Student Experience strategy). The default position is to include student representation on all committees and working groups, unless there is good reason to the contrary. The Students' Union (SU) President and the Post Graduate SU representative are members of Council and have an open invitation to attend the College Executive Committee (CEC), as do all members of staff, both professional and academic.

1.6 Provide a short (3 sentences or less) description of the charge of each of the standing committees listed in the CVM governance table.

Appendix 1.6 CVM Governance Table: Standing Committees

RVC Council: is the RVC's governing body and is responsible for approving corporate strategy, associated plans and budgets, major business decisions and corporate policy, the framework of governance and management, and for monitoring institutional and executive performance.

Academic Board (AB): is the RVC's academic authority and is responsible to the Council for academic governance specifically for regulating, in accordance with the Charter and Statutes, the admission of students to the BVetMed program and its curriculum and assessment, the maintenance and enhancement of its academic standards and the award of this degree and other qualifications. The AB is chaired by the President & Principal and meets three times a year.

Audit & Risk Committee (ARC): advises and assists Council in respect of the entire assurance and control environment of the institution.

Ethics and Welfare Committee (EWC): oversees the governance of ethics of research and the welfare of animals involved in teaching and research at the RVC, ensuring that best practice is followed. Three sub committees deal with project licenses and ethical application reviews**.**

Finance & General Purposes Committee (F&GPC): makes recommendations to, and where appropriate, exercises delegated authority on behalf of Council with regard to the University's strategy, policy, monitoring, assurance and approach to substantive resourcing issues.

Governance & Nominations Committee (GNC): ensures compliance with relevant governance frameworks and provides advice and guidance to Council.

Safety Committee (SC): promotes co-operation and a culture of personal responsibility between management and staff in initiating, developing and carrying out measures to ensure the health, safety and welfare of persons at work and all other persons on the premises.

Senior Staff Remuneration Committee (SSRC): exercises delegated authority on behalf of the Council, to set the policies and procedures and make recommendations to F&GPC and Council relating to remuneration of senior staff (Grade 9).

Principal's Advisory Group (PAG): is the senior group responsible for developing strategic options for the RVC, including major resource and financial considerations. Initiatives developed at PAG are evaluated by the College Executive Committee (CEC) to agree options and recommendations for implementation. PAG also provides advice to the President & Principal and acts with the authority of the President & Principal when appropriate.

College Executive Committee (CEC): is the senior operational decision-making body of the RVC, overseeing and resourcing the operational implementation of the RVC's strategy and supporting plans. It monitors the HE policy environment, approves key projects and reviews financial and performance metrics, before Council oversight. The CEC includes PAG members and the heads of the three academic departments and the heads of the Professional Services teams.

1.7 If the college plans to change its current organization, provide a summary of those plans.

There are no plans to change the current organization.

1.8 Provide the college's statement on diversity, equity, and inclusion.

With the appointment of Dr Christine Thuranira-McKeever as the RVC's Vice Principal for Equality, Diversity & Inclusion, EDI now holds greater prominence at the highest level of the institution.

The RVC Equity, Diversity and Inclusion Strategy makes the following statement:

"Our core mission is to create a diverse, inclusive, caring and compassionate university, where every individual – regardless of their background, identity or experience, feels valued, respected and empowered. We are committed to fostering a culture of equity, dismantling barriers to access and success, and to promoting diverse perspectives that enrich all our activities"

1.9 Provide documentation of policies and activities that demonstrate that diversity, equity, and inclusion are important parts of the institutional structure and climate, as consistent with applicable law. Information should document how the college fulfils its statement on diversity, equity, and inclusion.

As a Higher Education provider in the United Kingdom, the RVC is legally obligated under the UK Equality Act 2010, the Public Sector Equality Duty and the Higher Education (Freedom of Speech) Act 2023, to advance equality of opportunity. This legislation prohibits discrimination

against individuals with protected characteristics, or those associated with such individuals, in key areas including education, employment, services, and the exercise of public functions.

In addition to these protections, the Public Sector Equality Duty (PSED) imposes a proactive legal requirement on public bodies, including universities, to eliminate discrimination, advance equality of opportunity, and foster good relations between different groups. This duty is not optional and is a statutory requirement which therefore must be embedded in decision-making processes, policy development, service provision, procurement, and all aspects of employment, including recruitment, promotion, and performance management. Non-compliance with these obligations can result in legal consequences. Furthermore, the OfS requires institutions to uphold robust EDI standards as a condition of registration and access to public funding. As part of its regulatory framework, the OfS mandates that universities must:

- Develop and implement an Access and Participation Plan
- Demonstrate clear strategies for widening participation and ensuring equal opportunities
- Maintain an Equality of Opportunity Risk Register.

In order to fulfil these legal obligations, the RVC has the following policies in place:

- EDI Sub Strategy 2023
- EDI Policy
- Dignity at Work policy
- Report and Support
- Reasonable Adjustments for Disabled Students Policy.

The RVC would be happy to discuss diversity, equity, and inclusion in the UK setting during the visit.

1.10 Describe how the college collects and uses information on diversity, equity, and inclusion to inform college decisions.

The RVC collects diversity data relating to staff and students as part of the recruitment and enrolment processes, through statutory returns and confidential surveys. It fulfils its obligations under the Equality Act 2010, the Public Sector Equality Duty, and the requirements set by accreditors and regulatory bodies such as the OfS. These data provide the university with information on the demographic makeup and diversity of its community; this in turn informs decision making in areas such as the provision of services and interventions to promote greater inclusivity and representation for specific groups. Outcomes are reported through annual EDI reports and action plans. By embedding equality monitoring into its governance processes, the RVC ensures that decisions are evidence-based, legally compliant, and support the creation of an inclusive environment for all members of its community.

1.11 Describe the system for reporting and responding to allegations of discrimination or harassment.

There are several systems for reporting and responding to allegations of discrimination or harassment dependent on the circumstances of the complaint.

The RVC's 'Creating a Safe and Respectful Community' working group's action plan sets out how it proactively manages and responds to any issues of bullying and harassment or sexual misconduct. Students are educated through online consent workshops as part of the Kickstart pre-arrival module, interactive workshops on consent and bystander intervention during Welcome Week, and information through the Report and Support platform and the RVC's website. The RVC has clear reporting mechanisms for students experiencing bullying, harassment, hate or sexual harassment and offer emotional support to any student reporting an issue and practical support to outline options available to them, e.g., reporting under the RVC's Misconduct Procedures, reporting to the police.

The Dignity at Work Policy promotes and clearly demonstrates commitment to creating and maintaining an inclusive environment and a culture of respect and dignity as well as signposting individuals on how to report concerns of discrimination or harassment and how it will be responded to. The RVC publishes a list of trained dignity ambassadors, who can provide information and support to individuals who believe they may have been subjected to harassment and/or bullying.

There are well-established out-of-hours (OOH) processes to manage student welfare incidents occurring outside normal working hours, to ensure that immediate support is offered, and appropriate follow-up actions are coordinated. There are clear support pathways for students who experience issues on Animal Husbandry Extramural Studies (AHEMS) or clinical Extramural Studies (c-EMS) placements, including bullying or harassment. (see Standard 6). Students are taught how to

manage potentially difficult situations as part of the Principles of Veterinary Practice strand before they attend AHEMS.

1.12 Provide a statement from the appropriate institutional authority that the CEO/dean is employed full-time and is not engaged in any outside activities that would constitute a conflict of interest or conflict of commitment (in accordance with institutional policies) for their service as dean.

The Chair of Council confirms the President & Principal is employed full-time, is a qualified veterinarian and is not engaged in any outside activities that would constitute a conflict of interest or conflict of commitment for their service as President & Principal of the RVC. The President & Principal must seek consent from the Chair of the RVC Council before undertaking any direct or indirect activities which may interfere with the performance of their role as University President & Principal. These conditions are laid out in his contract of employment and service agreement.

Standard 2: Finances

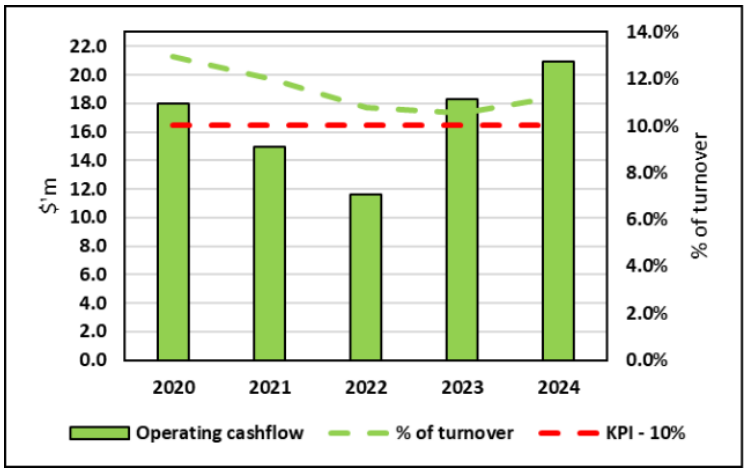
Introduction

The RVC has full jurisdiction and autonomy over its financial affairs including how revenue is deployed in support of its key strategic missions. The main sources of revenue are from student tuition fees, UK government funding for teaching and research, fees for veterinary clinical services, externally sponsored research work and non-clinical commercial activities.

Veterinary medicine programs are the RVC's core *raison d'être*. Their finances are inseparable from those of the institution as a whole and *vice versa*. This Standard should, therefore, also be considered in the context of the RVC's overall financial performance and sustainability.

Under its Finance Strategy, there are a number of key financial performance indicators to ensure that ongoing financial sustainability is not compromised. Operating cashflow is one and establishes a benchmark that sufficient funds are being generated for future investment. The Key Performance Indicator (KPI) is for operating cashflow to be no less than 10% of turnover on a 3-year rolling basis. Figure 2.1 below presents performance against this KPI over the past 5 years and demonstrates that this has been achieved.

Fig 2.1 Operating Cash Flow Performance



This strong financial performance has enabled investment to sustain and enhance the quality of the veterinary teaching programs. This includes major capital development at both campuses funded from cash reserves, external financing and capital grants. Much of this has been on teaching and learning facilities.

2.1. Complete Tables A, B, and C for the past five years and analyze the trends for each category.

The figures presented in Tables A and B in Appendix 2.1 are specific to the BVetMed programs. Student numbers on these represent ~65% of the RVC's total student population. As such, they drive the majority of the RVC's activities and separately identifying expenditure specific to them is not straightforward in all cases. Consequently, certain costs have been derived based on apportionments.

Expenditure (Table A)

1. Instruction, academic support and student services

1A: Expenditures related to college owned and operated sites on and off campus:

Expenditure has shown 20% growth over the last 5 years. Pay costs have increased by 18%, being a combination of annual pay awards, incremental progression and regulatory charges such as pension and tax costs. Investment has also been made in new faculty and other staff posts. There has also been significant investment in academic support and student services to ensure students are provided with a fully rounded and supportive learning environment. Further detail on the investments made is provided in Section 2.4 below.

IB: Expenditure and fees paid to privately-owned, off-campus entities for providing instruction:

Costs have increased by 23%. These primarily comprise farm animal and equine practices offering core and tracking rotations to ensure students have exposure to a consistent and relevant caseload. They also include primary care shelter medicine providers and abattoirs. Full details are provided under Standard 4. Cost increases are a combination of new sites being added and annual inflation increases.

IC: Fees paid to other accredited institutions for providing instruction:

The RVC does not pay other accredited institutions for providing instruction.

2. Research expenditure

This relates to the direct costs of delivering externally sponsored research grants and contracts. Spend is directly related to income. In 2023-24, this was 10% lower than in 2019-20; however, it was an improvement on the intervening period which had been impacted by the COVID pandemic, the UK's exit from the EU and the increasingly competitive funding environment.

3. Outreach and continuing education

Costs of outreach work are spread throughout the institution and reflected in many different activities ranging from academic conferences and research networks, through public and community engagement, to more targeted measures relating to student recruitment. Under the terms of the RVC's registration with the OfS, it is required to produce an Access & Participation Plan (APP), setting out its plans and targets for increasing diversity in its home undergraduate student body. There is a dedicated team of core staff who work in this area and the costs are recorded on this line. They have not changed significantly over the period.

Continuing education expenditure has increased by 10% in line with increased income. The RVC's Continuing Professional Development (CPD) unit is the UK's largest academic provider of educational services to the veterinary community, running events and workshops.

4. University-owned clinical service operations

The RVC delivers the bulk of its undergraduate clinical training through its own teaching hospitals. Full details are provided under Standard 4. Expenditure has grown by 29% over the period, reflecting growth in caseload and the associated investment in clinical and support staff, as well as in other operating expenditure. Annual pay awards[1] and clinical market supplements have also increased costs. The expenditure reported here does not include premises costs relating to hospital facilities (under 6).

5. Diagnostic laboratory and other clinical laboratory services

The RVC diagnostic laboratories provide testing services for the RVC's own clinical facilities as well as a range of external practices and animal research centers. As demand for the RVC's services has increased both income and necessarily expenditure have also increased (28%).

6. Facilities operations and maintenance, utilities, and other expenditure for infrastructure

The RVC is directly responsible for the running costs and maintenance of its physical infrastructure. With two campuses, both with clinical and laboratory space, as well as a farm, estates costs are significant. Spend has increased by 26%, being a combination of inflationary increases in pay costs for estates staff and in contracted services such as security. Maintenance work had to be curtailed during the pandemic, which also explains the increase in costs in later years.

7. Capital expenditure

There has been major investment over the past 5 years across all RVC sites. Much of this has been in teaching and learning facilities and includes the new Student Learning Centre at the

[1] In common with most other UK HEIs, the RVC participates in national pay bargaining.

Hawkshead Campus and the Large Animal Handling Facility at Boltons Park Farm. There has also been significant investment in IT infrastructure (see Standard 3).

8. Student aid (extramurally sponsored grants to students selected by the institution)

Spend has increased by 8% over the period and represents tuition fees and stipends relating to PhD students funded by external research sponsors.

9. University-sponsored student aid

This aid represents bursaries offered by the RVC to domestic undergraduate students from disadvantaged backgrounds, as determined by household income. Each student receives $1,300 (£1,000) for each year of the course. It also includes financial support for student hardship. Expenditure has increased by 8% over the period.

10. Other expenditure

Other expenditure is the share of institutional costs attributed to the BVetMed programs, based on student numbers, and includes professional services (such as Human Resources, External Relations, Business Improvement Unit, Secretariat and Finance) and loan interest costs. This spend has increased by 27% over the period.

Revenue (Table B)

1. Government appropriation to college

This is the annual Government grant for teaching. Funding is provided by the OfS, the higher education regulator for England. As a clinical subject, veterinary medicine is funded at the highest rate which, in 2023-24, was $14,790 per student FTE. This funding has been subject to periodic inflationary increases amounting to 10% over the period. In addition, the RVC receives a separate allocation in recognition of its status as a world-leading specialist institution which, in 2023-24, was $3.8M compared to $1.8M in 2019-20. Over the five years, and despite the above-mentioned increases, funding has decreased by 8% mainly due to the decreased proportion of domestic students.

2. University appropriation to college

Not applicable.

3. Revenue derived from students (tuition and other fees) that is available for college use

Tuition fees are the RVC's principal source of revenue and, for the BVetMed programs, have grown by 46% over the period. International fees have grown by 82%, whereas domestic fees have reduced by 12%. The latter are regulated by government and have been frozen at $12,118 per student FTE since 2017-18[2]. International fees are non-regulated and are subject to annual inflationary increases. In 2023-24, the international tuition fee for a new student was $54,365.

4. Tuition and fee revenue paid by other entities on the students' behalf e.g., educational contracts & fees for clinical instruction

The RVC offers a small number of places in its clinical years for students from other institutions depending on available capacity. This reduced to no more than three to four per year in the latter years of the period.

5. Clinical Services

5A. Clinical services revenue from college/ university/ government-owned facilities

This represents revenue received from clients for primary care and referral services provided by the RVC's small animal and equine veterinary hospitals and equine ambulatory service (see Standard 4). Revenue has increased by 34% over the period mainly due to growth in caseload and annual price increases although the base year 2019-20 was adversely impacted by COVID.

5B. Clinical services revenue generated in privately-owned entities remanded to the college

There are no revenues remanded to the College from privately-owned entities.

6. Diagnostic lab and other clinical lab revenue

Revenue has increased by 31% due to strong demand from external clients for the RVC's routine and specialist diagnostic services.

7. Extramural grants and contracts

This represents income from externally sponsored research grants and contracts. Sponsors include UK Research Councils, Charities, Government bodies and Industry. There is a time lag in reporting as income is recognized as the project is delivered and not when the award is granted. On this basis, income has reduced by 12% over the period although 2023-24 showed an improvement on the preceding years, which had been impacted by COVID and the UK's exit from the EU.

[2] The government has increased the fee to $12,777 from 2025-26.

8. Overhead (indirect costs or F&A) returned to the college, department, or faculty member

This represents the contribution to the RVC's indirect and estates costs from extramural grants and contracts. The RVC adopts a full economic costing approach; however, funders vary in how much they will pay towards these. Commercial funders are expected to pay market rates (above full economic cost). Overheads reduced by 18% over the period. This reflects the impact of the downturn in activity due to COVID and also variations in the funder mix year-on-year.

9. Current year gifts and endowment income

By their nature, gifts and donations can vary significantly year-on-year. Most donations are now received through the RVC's charitable arm, the Animal Care Trust (ACT), and support activities notably in animal health/welfare (clinical equipment) and in student support (scholarships and bursaries). Unspent funds are invested through external fund managers. The revenue returns from these investments are reported under endowment income.

10. Other revenue

This represents fees from veterinary medicine students residing in the RVC's owned residential accommodation, as well as income from clinical Continuing Professional Development (CPD) courses. The former have increased by 46%; however, figures for 2019-20 (and 2020-21) were significantly impacted by COVID. Fees are reviewed on an annual basis and benchmarked against other universities and the private market. Revenue from CPD courses has grown by 26% although, again, there was a COVID impact in 2019-20 as some practical courses could not run.

Endowment (Table C)

The Endowment largely comprises funds donated to the RVC or its charitable trust, the Animal Care Trust (ACT), for specific purposes (restricted), which are expected to be held in perpetuity or for a significant period of time. The funds support all the RVC's missions, with most focused on animal health/welfare services, research and student support/wellbeing.

Table C presents the total value of the RVC's endowment fund portfolio, which has increased by 33% over the period. Funds are invested through external fund managers in various asset types (equities, bonds, property and cash). The growth in the portfolio's value reflects the investment return from market gains and income earned, as the amount of funds invested has not changed significantly over the period. The portfolio recovered strongly in 2023-24 after post-COVID downturns in the previous two years.

2.2. Comment on the strengths and weaknesses in revenues over the past five years.

Strengths:

- International tuition fees have been a key driver of the growth in revenue over the period as the RVC has increased the proportion of international students on its BVetMed programs
- Following the RVC's successful bid to retain its OfS world-leading specialist institution status, additional government funding was allocated from 2021-22
- There has been positive growth in clinical caseload and income
- The RVC's positive performance in the Research Excellence Framework (REF)[3] 2021 secured additional recurrent funding from Research England from 2022-23
- A new funding stream for specialist institutions was introduced in 2020-21
- Government funding for knowledge exchange and innovation has also increased
- The RVC's subsidiary, the London Bioscience Innovation Centre (LBIC), which rents and supports office and laboratory space to biotechnology companies, has delivered a strong performance.

Weaknesses:

- Freezing of the domestic undergraduate tuition fee at £9,250 ($12,118) per student FTE since 2017-18 has been a significant challenge. The RVC's programs are in clinical and laboratory-based disciplines, which require high-cost facilities and intensive teaching. Government funding is not sufficient to bridge the gap and has devalued over the period.
- There is an increasingly challenging and competitive funding environment for externally sponsored research grants and contracts. This is due to several factors: the UK's exit from the EU (loss of access to EU funding programs); economic pressures on commercial sponsors; government research funding constraints. In addition, few funders meet the full economic cost of research

[3] A periodic exercise to assess the excellence of research across all UK Higher Education institutions

- Recruitment to postgraduate taught programs has been disappointing; a trend across the sector as, amongst many factors, cost-of-living pressures have impacted on demand
- Whilst there has been growth in clinical caseload and income, cost-of-living challenges for clients and inflationary pressures have impacted on financial return.

Inevitably, revenue in the earlier years of the period was impacted by the COVID pandemic. However, despite the significant challenges, the RVC delivered a positive financial contribution in those years. Having a diversified and resilient revenue portfolio was, and remains, an important contributor to this.

2.3. Provide a comprehensive trend analysis of revenue sources that have supported the professional teaching program over the past five years.

Trends in revenue sources that have supported the professional teaching program are discussed in section 2.1. above. Appendix 2.2 presents these data graphically.

2.4. Describe how revenues over the past five years have impacted the college's ability to provide a contemporary professional teaching program and ancillary support services.

As reported in the Introduction, the RVC has delivered a strong financial performance over a number of years, underpinned by a robust and disciplined annual financial planning and budgeting process.

With the benefit of having autonomy over how its revenues are deployed, the RVC has been able to make significant investment in its professional teaching programs and the services and infrastructure which support them. This has been despite the impact of the COVID-19 pandemic and the ongoing funding challenges faced by the RVC and the UK Higher Education sector more generally. Whilst inevitably the RVC has had to be selective in how its resources are invested, supporting students' teaching, learning, and their wellbeing has been a priority.

Full details of the investments made to support the professional teaching programs are presented under the relevant Standard and, in summary, include:

- Major capital investment in teaching and learning facilities: Student Learning Centre (Hawkshead), Large Animal Handling Facility (Boltons Park Farm), Teaching laboratories (Camden) – *Standard 3*
- Investment in clinical equipment – *Standard 4*
- New offsite abattoir and food science, farm animal and equine clinical rotations – *Standard 4*
- Investment in innovation specific to the veterinary program through LIVE (Lifelong Independent Veterinary Education) – *Standard 4*
- Investment in information resources including library enhancements and digital learning - *Standard 5*
- Enhanced pastoral and welfare support and additional funding for student financial aid and measures to widen access and participation – *Standard 6*
- Investment in new Faculty and in staff retention and training – *Standard 8*
- Development of a new curriculum – *Standard 9*
- Enhanced support for students undertaking the NAVLE – *Standard 11*

2.5. Describe anticipated trends in future revenues and expenditures.

The RVC does not anticipate significant changes in revenue or expenditure in the next five years except for those likely to occur as a result of the planned new small animal referral hospital. Teaching income will remain the RVC's main source of revenue. No significant growth is forecast in undergraduate student numbers and the current mix of domestic to international students will be maintained, although efforts to further diversify its international student base will continue. No substantive improvements to the teaching funding model for domestic students are anticipated. This being the case, managing its cost base and optimizing the contribution from other activities are priorities.

Aside from teaching, the recent expansion of the RVC's innovation subsidiary (LBIC) into new space is forecast to deliver an improved financial contribution, which will be returned to the RVC on an annual basis. Preparations ahead of the next Research Excellence Framework (2029), which informs the RVC's core government research funding are underway.

The priority in the RVC's capital investment strategy is the replacement of its small animal referral hospital within the next five years, for which designs are progressing. This will provide state-

of-the art and expanded clinical facilities ensuring that the RVC remains at the forefront of clinical training, care and research. The facility will deliver an improved financial return from additional services and more efficient operational practices, contributing to repayment of the initial investment which is expected to be funded by a combination of cash reserves, external borrowing and philanthropic gifts.

Standard 3: Physical Facilities and Equipment

3.1. Provide a brief description of the major functions of, or activities that take place in the facilities used by the RVC in fulfilling its mission.

Development and maintenance of the estate, physical facilities and equipment and effective delivery of campus services are fundamental to the RVC's programs. Teaching, research, clinical, administrative, residential and recreational facilities are located on two campuses: the Camden Campus in central London and the Hawkshead Campus in Hertfordshire which includes Boltons Park Farm, less than 1 mile from the main site. Travel time between Camden and Hawkshead is approximately 30 to 50 minutes. The RVC also owns Acorn House Veterinary Hospital, a primary care practice in Bedford, 47 miles and approximately 1 hour from the Hawkshead campus.

The RVC also utilizes off-campus teaching facilities for delivery of some core and tracking rotations. These arrangements fall into two broad categories of teaching partnerships. First, collaborations where the partners are effectively 'support organizations' providing space, equipment and case material and where RVC members of staff deliver the rotational teaching and assessment. Second, those partners ('teaching partnerships') who not only provide the facilities and case load but also most of the staff who deliver the rotational teaching and assessment. These off-campus facilities are summarized in Appendix 4: Clinical Resources Table H Off-Campus Facilities.

Camden Campus

The Camden Campus is home to Gateway students, the first two years of the BVetMed program, the first year of the Graduate Accelerated BVetMed program, basic science teachers and researchers, teaching, learning and social spaces and the Beaumont Sainsbury Animal Hospital, the RVC's small animal primary care practice teaching facility. There are also 71 ensuite residential rooms in College Grove.

Hawkshead Campus

The Hawkshead Campus accommodates the last 3 years of the BVetMed program. Hawkshead is home to the Queen Mother Hospital for Animals, the Equine Referral Hospital and Equine Ambulatory Practice, various teaching, learning research, necroscopy, diagnostic laboratories, social and sports facilities and some 300 residential rooms.

Boltons Park Farm

The Farm is managed as a commercial dairy and sheep unit with small scale egg and pork production and is the location for the new Large Animal Handling Facility (LAHF), as well as providing an effective learning environment for farm animal-related teaching at all stages of the BVetMed program.

3.2 Provide an area map that indicates the principal facilities of the college. Describe distance and travel time to off-campus facilities.

Area maps showing the Camden and Hawkshead campuses are provided in Appendix 3.0 Details of the RVC's off-campus facilities are provided in Appendix 3.1 which lists and details the location of all External Rotations. This includes the distance and approximate travel times (by road) from both the Hawkshead and Camden campuses.

3.3. Describe the RVC's safety plan and facilities management plan including mechanisms documenting compliance.

Health & Safety

The Corporate Health and Safety (H&S) team delivers a comprehensive, proactive service to protect and enhance the health and safety of staff, students and other users of the RVC. Its work includes the provision of expert advice and training, development of strategies and policies and management systems, setting risk management standards and monitoring and the investigation of incidents/accidents and reporting, as required by RIDDOR (Reporting of Injuries Diseases and Dangerous Occurrences Regulations), to the Health & Safety Executive (HSE).

The H&S team reports to the Director of HR and is overseen by the Safety Committee which reports to the CEC and Council. The Committee is responsible for formulating policies to promote health, safety and wellbeing of staff, students and visitors. Membership includes heads of department, senior laboratory managers, Students' Union representation and Trade Union Safety Representatives. The Committee, on behalf of the RVC's Council, approves new and updated policies and procedures and monitors their effectiveness with the following subgroups reporting to it:

- Infection Control and Biosecurity Group
- Radiation and Chemical Safety Group
- Animal Handling and Clinical Activities Working Group
- Infrastructure Safety Group
- Genetically Modified Organisms Safety Committee.

Compliance with legislative requirements and best practice is monitored through a range of proactive mechanisms, including a regular program of departmental and unit safety reports, inspections and audits. Reactive mechanisms are used to identify incident trends, which lead to targeted actions formulated by the Safety Committee.

Various mechanisms assure safe operation of the RVC's facilities and equipment, including the use of physical access management. Areas with additional safety requirements, such as labs, are accessible only with an enabled staff or student ID card. Hazard warning signs are clearly displayed outside clinical rooms, laboratories and plant rooms. All occupied buildings are subject to Fire Risk Assessment as a requirement of Regulatory Reform (Fire Safety) Order 2005 and Fire Safety Act 2021.

To ensure the same high standards of health and safety for RVC students are maintained for on-campus and off-campus teaching, termly meetings of the Safety Committee receive reports from the relevant subgroups concerned with different aspects of teaching, including the various RVC leads for the RVC's off-campus teaching facilities. The most relevant of these are the Infection Control and Biosecurity Group for matters concerning infectious agents and the Animal Handling and Clinical Activities Group for matters concerning work with live animals.

Radiation safety for students on Extramural Studies (EMS)

As agreed by the Radiation Safety Officer, students and participating practices are given the following guidance around radiation monitoring while on EMS:

1. All students must have read and understood any local arrangements for Radiation Safety
2. Students will NOT be issued with any dosimetry badges by RVC. It is the responsibility of the placement to issue any personal dosimetry that is required
3. Students should NOT remain in any radiation-controlled area unless provided with suitable personal protective equipment (PPE) (e.g., lead aprons)
4. Students are permitted to place any x-ray plates but must not hold them in place unless provided with suitable PPE and personal dosimetry
5. If students have any concerns about radiation safety at their placement, they are advised to contact the EMS team in the first instance (ems@rvc.ac.uk).

Facilities Management Plan

There is a 5-year rolling plan for managing maintenance and minor works. Physical assets are regularly inspected and maintenance plans updated. Service Level Agreements (SLAs) are monitored by ISD to ensure that quality of service delivery is maintained. Key Performance Indicators are included within certain services to demonstrate compliance with the SLAs. Reactive Maintenance is recorded using Facilities Management software through the service desk system and there is a Forward Replacement Plan for plant and equipment. In addition to the revenue funding for maintenance of the RVCs building assets, capital funding continues to be made available to progress the Forward Replacement Plan incrementally completing all the works identified within a 5-year period.

3.4. Describe how safety and facilities plans are managed and reviewed at all off-campus required training sites.

For RVC partnerships, in the event of any injury, dangerous occurrence, incident or accident involving a student on an externally delivered rotation, the procedures of the partner will be followed. The partner is responsible for reporting as required by RIDDOR and are contractually required to notify and formally report incidents in writing as soon as reasonably possible and in any

event within twenty-four hours (immediately, if a serious incident). Responsibility for investigation of incidents involving a student will be shared between the RVC and the partner. For those partnerships which are effectively support organizations, both the RVC and its partners are jointly responsible for the health, safety and welfare of students during the relevant rotations. Partners are required to risk assess activities to ensure compliance with the Management of Health and Safety at Work Regulations 1999, including a specific requirement to risk assess activities involving the use of chemicals, ionizing radiation and biological hazards to ensure compliance under Control of Substances Hazardous to Health (COSHH 2002) and Ionising Radiation Regulations (IRR 2017)). The partners provide the embedded RVC staff with health and safety information relevant to the students' duties and activities, and the RVC staff disseminate this information to the students. These requirements are included in all contractual arrangements with the RVC's support organizations. Teaching partners are responsible for the health, safety and welfare of students during the relevant rotations. All are required to risk assess activities and the partners must ensure that students are informed of all health and safety policies, procedures, and risk assessments that apply to their duties and activities during the rotation. These requirements are included in all contractual arrangements with external partners.

3.5. Describe the adequacy of facilities (pertains to all facilities used by the RVC whether on-campus or off-campus).

Adequacy

The Infrastructure Services Directorate (ISD) manages the estate safely and effectively provides IT and logistics support and gives students and staff excellent social and educational facilities. Full details of teaching, learning and meeting rooms are provided in Appendix 3.2. Recently completed and upcoming projects include:

Year	Campus	Project	Cost
2025-26	Camden	College Grove accommodation refurbishment	$8.4m
2025-26	Camden	Hobday Building façade repair and window replacement	$5.4m
2025-26	Camden	Hobday Teaching Laboratory, anatomy workshop, histology preparation refurbishments	$5.8m
2025-26	Acorn House	Extension of various clinical procedure areas and hospital wards	$700k
2025-26	Camden & Hawkshead	Biological Services Unit compliance works	$700k
2025	Hawkshead	QMHA blood donor pods	$300k
2024-25	Hawkshead	Advanced Equine Imaging Centre	$4.0m
2024-25	Boltons Park Farm	Large Animal Handling Facility	$4.7m
2024-25	Synergy Farm Health	Expansion and upgrading of student teaching rooms and accommodation	$400k
2024-25	Both	Heat decarbonization projects	$700k
2023-24	Hawkshead	Student Learning Centre	$54.9m
2023-24	Hawkshead	Centre for Translational & Clinical Research Imaging	$5.8m
2023-24	Boltons Park Farm	Silage and water drainage structures	$380k
2022-23	Hawkshead	Expansion of the Teaching & Research Centre	$11.4m
2020-21	Boltons Park Farm	New Milking Parlor	$215k

Since the last accreditation cycle, the addition of new lecture theatres and other teaching and learning facilities ensures that there are adequate spaces and support facilities for all staff and students and means that the RVC is well equipped to meet the needs of current and future student numbers.

Premises used for theoretical, practical and supervised teaching

Since the last cycle of accreditation visits, several new teaching facilities have been built and others expanded and upgraded to meet present and future requirements. Full details of theoretical, practical and teaching rooms are provided in Appendix 3.2.

Premises used for clinics and hospitals

The Small Animal Referral Service and Primary Care Emergency Service operate from the Queen Mother Hospital for Animals (QMHA) at the Hawkshead Campus. The QMHA offers a full range of specialty services and is one of Europe's largest and busiest referral and emergency hospitals. The hospital is the only Level 1 Veterinary Trauma Centre accredited by the American College of Veterinary Emergency and Critical Care (ACVECC) outside North America.

The Beaumont Sainsbury Animal Hospital (BSAH) is situated within the Camden Campus and provides a primary care service for small animals, and an exotics referral service. Students are directly involved in a variety of consultations, surgical and diagnostic procedures, emergencies, and care and management of hospitalized patients.

The RVC's Equine Referral Hospital (ERH) and Ambulatory Practice are based at the Hawkshead Campus and operate a 24-hour 365 days per year service offering a range of primary care as well as secondary and tertiary referral services.

All three of the above clinical centers provide a full range of diagnostic services available as well as isolation wards. Both the ERH and the QMHA have state-of-the art CT and MRI. The ambulatory practice has a fleet of modified and fully equipped vehicles which are replaced approximately every four to five years.

Acorn House Veterinary Hospital is an RVC owned primary care practice located in Bedford approximately 70 mins from the Hawkshead campus which offers a comprehensive range of primary care veterinary services including laboratory and diagnostic imaging facilities. Currently it is visited by students on a tracking rotation. Our teaching partner, Synergy Farm Health (SFH), delivers four weeks of core farm animal rotation teaching (see standard 4). They have four geographically separate veterinary teams covering approximately 3.5 counties in the southwest of England. The RVC core rotations are operated from one of their facilities and they include an ambulatory service. Off-campus teaching facilities for core rotations at which students are expected to reside have free student accommodation with access to RVC-supplied computers and internet coverage with variably shared areas for social learning. Each student is provided with an annual travel supplement to offset the cost of travelling to and from the off-site placements.

At Boltons Park Farm, preclinical and clinical teaching take place across all years of the BVetMed Program (see section 4.2). Facilities here have been augmented by the recent addition of the Large Animal Handling Facility.

Diagnostic Laboratories and Clinical Support Services

A comprehensive on-site clinical and anatomic pathology service supports all clinical activity providing Hematology, Biochemistry, Microbiology, Cytology, Anatomic Pathology (including biopsy and necropsy) and Farm Animal Pathology and Diagnostics (FAPD) services.

Necroscopy Facilities

The Necropsy Hall on the Hawkshead campus is a state-of-the-art, purpose-built facility that allows multiple simultaneous necropsies. The diagnostic laboratories accept necropsies from the RVC's own hospitals, and from external practices around the UK, including equine, small animal, production animal and zoo and wildlife species. Students predominantly attend the necropsy hall through their clinical intramural rotations in anatomic pathology, where they learn how to perform a necropsy, including dissection techniques, describing and interpreting findings, and sampling for diagnoses.

Isolation Facilities

The RVC maintains isolation facilities in the QMHA, BSAH and the Equine Referral Hospital. These facilities meet current standards and are used to safeguard students, staff and animals and for educational purposes including instruction in isolation procedures and barrier nursing. Protocols are posted in each facility, and students are given appropriate inductions.

Slaughterhouse Facilities

The RVC has two contracted teaching arrangements regarding access to abattoirs for students. One is a commercial abattoir (Humphreys and Sons) and the other is a teaching abattoir (at the Langford site of the CoE accredited University of Bristol).

Other Spaces

Sports and recreational facilities are free at the point of use for students and faculty. There are gym facilities at Camden and Hawkshead and the latter also houses a sports centre and sports field.

The Students' Union (SU) has recreational, social and office spaces on both campuses. Restaurant facilities and cafés operate at Camden and Hawkshead Monday to Friday. Vending

facilities are available 24/7 for drinks and food on both sites. Kitchenettes are provided in some common spaces and there are facilities for hot drinks and microwave meals available to students on clinical rotations.

3.6. For safety and educational purposes, protocols must be posted in the isolation facilities, and the facilities must be used for instruction in isolation procedures (biocontainment).

Protocols are posted at the entrances and exits of all isolation and biocontainment areas. At different points throughout the BVetMed program, students are expected to complete health and safety inductions to prepare them for the different teaching and clinical environments they will experience. These include inductions covering health and safety, working in dissection rooms, teaching labs, the necropsy room, working in outdoor spaces with live animals, managing patients with potentially infectious diseases and all aspects of biosecurity. Students' understanding of the reasons for these protocols and their first-hand experience of managing these situations is also revisited at different times throughout the program and on multiple occasions throughout the rotation cycle.

3.7. Describe current plans for improvement.

Plans for further improvements include the completion of an extension to the Centre for Emerging, Endemic and Exotic Diseases building providing containment level 2 laboratories ($3.5m); further de-carbonization projects ($2.7m) including removal of gas and oil based plants; the provision of increased electrical supply across campus for replacement electrification systems and subject to a business case, a significant investment in an extensive, state of the art, new small animal clinical facility ($148m) to replace and build on the success of the current hospital.

Standard 4: Clinical Resources

4.1 Complete Tables A, B, C, D, E, F, and G, if applicable, for the past five years and analyze trends for each species (category). Include only those patients, farm call, and animals examined that have direct student involvement.

Compared to prior years, the data for the 2023-24 year was adjusted to exclude figures for the periods when there is no student involvement in the relevant facilities (i.e. 2 weeks at Christmas & 2 weeks at Easter when rotations do not operate). Prior years' data are for the full 52 weeks and remain unchanged from that reported in the RVC's annual submissions to avoid confusion. Therefore, there is expected to be an approximately 8% decrease for the 23-24 data compared to previous years purely on the basis of methodology.

Analyses of the trends noted below are mostly focused on the past 3 years; COVID affected years of 2019-20 & 2020-21 were impacted both by changes in the way veterinary services were required to operate and due to the "pandemic puppy" boom that occurred.

Appendix 4.1 Table A:

It is important to note that the data in Table A is inclusive of caseload seen in the RVC's Small Animal Referral Hospital, as well as its main primary care hospital masking different trends in both. The RVC's referral hospital has seen 6% annual growth in feline cases over the past 3 years, following the COVID affected period, with canine caseload remaining steady. BSAH canine & feline caseload declined annually by an average of 9% over the last 3 years after a peak in the early pandemic period. This has largely been due to the impact of the BSAH being closed to new clients for an extended period, post-COVID. This trend has been addressed by now being fully open to new clients, and the caseload for these species is increasing (since the 2023-24 fiscal year). Other species (exotics) primary care caseload has been increasing strongly year on year (average of 7% annually over the past 3 years). Equine referral caseload has declined by an average of 8% annually for the past 3 years, reflecting a challenging market sector-wide thought to be due to a combination of inflationary pressures eroding discretionary household income and the fact that the value of equine insurance cover has not increased

Appendix 4.1 Table B:

Visits in this table are those seen at Acorn House Veterinary Hospital. Canine and feline visits make up most of the caseload – these have been growing consistently over the past 3 years (+3% canine and +6% feline annually). There has been a small decline in the visits for other species over the past 5 years.

Appendix 4.1 Table C:

Visits in this table are those seen at the RVC's shelter/charity partners. The number of visits fluctuates but the trend is stable year-on-year across all species.

Appendix 4.1 Tables D, E and F:

Equine ambulatory caseload has remained consistent year-on-year.The RVC'S production animal cases have remained at a stable level of resource for the student numbers undertaking the various farm rotations. Table D details the farm visits conducted by the RVC's internally run FA1 Production Animal Tracking rotation with all other farm resources (both core and other tracking rotations) included in Table E since these are run through collaboration with external providers. There is a large increase in cases seen in Table E between the 2 and 3 Fiscal Years Prior and this was due to a change in reporting where the RVC had not previously included its tracking rotations within this table as the data had not been available. Table F describes in detail the way these resources are used for each production animal species and the range of teaching that is undertaken on core rotations to ensure that students receive training in all core day one skills.

Appendix 4.1 Table G:

Overall necropsy caseload has remained either stable or increased in the three fiscal years post- pandemic (2020-21) which saw a modest fall in canine, feline and equine necropsies. Necropsy caseload for ruminants (bovine and ovine) significantly increased in 2023-24 and is due to the reporting of student IMR exposure to commercial abattoir processing of cattle and sheep (numbers in parentheses) and additionally for cattle via fallen stock necropsies which take place on the farm rotations – these activities occurred in previous years but were not previously reported in these figures. Pig and poultry necropsies have increased since the 2022-23 fiscal year as individual necropsies in these species were introduced on a one per student basis, to combat a long-term trend for reduced necropsies in these species.

4.2 Describe and analyze the adequacy of normal and clinically diseased animals (hospitalized, out-patient, privately owned, field service/ambulatory and production medicine) used by students in the course of their pre-clinical and clinical learning experience

Animal resources and teaching material of animal origin are provided predominantly through RVC owned and operated facilities supplemented by a range of carefully managed external partnerships.

Cadavers and material of animal origin are utilized in various parts of the course and are obtained from several sources all of which are approved by the Clinical Research Ethical Review Board (CRERB). Cadaver material for teaching classes is sourced from CRERB approved sources such as commercial abattoirs that supply animal by-products and whole farm animal cadavers from the RVC's Boltons Park Farm. The RVC also operates an Educational Memorial Program where clients whose patients have died under treatment can opt to donate the animal's body for use in teaching. The Educational Memorial Program is enabling the RVC to move away from sourcing preserved dog cadavers from commercial providers. Fresh and embalmed (both purchased and embalmed in-house) specimens are used for student dissection. The embalmed specimens are stored in tanks of preservative or sealed bags prior to use and then washed for 24 to 48 hours before entering the Dissection Room. Fresh material is stored in a locked freezer before defrosting prior to use. All organic materials are collected and disposed of by a licensed commercial provider. Use of plastination (see below) is reducing reliance on embalmed specimens for anatomy teaching purposes.

The RVC owned clinical portfolio comprises both primary care and referral sites offering a broad range of specialist disciplines. Partnerships with external clinical providers are utilized to extend the breadth and volume of case material, animal populations and experiences RVC students can access, (Table H). Material for dissection and post-mortem teaching is similarly underpinned by the RVC's pathology team offering services to both the RVC's own clinical sites and external customers supplemented by a network of suppliers as approved by the CRERB.

Contact with healthy animals for clinical, animal husbandry and practical animal handling experience is delivered predominantly using RVC owned animals. Staff/ student owned dogs are used in a ratio of approximately 1 dog: 4 students for live anatomy tutorials, for animal handling teaching and non-invasive examinations such as physical examinations, orthopedic, neurological, and basic sonographic examinations in the final year. RVC owned production animals are utilized for pre-clinical and early clinical (years 1-3) teaching at the RVC-owned Boltons Park Farm. Animal husbandry, handling, physical examinations and herd health is taught on the farm using the RVC's

own resource which includes approximately: 15 pigs; 80 adult cattle and 75 youngstock; 700 sheep and 60 chickens (layers). The RVC owned teaching ponies and blood donor horses provide a resource of healthy equidae for use in preclinical animal handling and clinical teaching. The CRERB guides and oversees the use of healthy animals in teaching, keeping an annual record of use and ensuring adequacy of normal animals while protecting the animals' welfare.

For diseased animals, the RVC's services (primary care, emergency and referral) are accessed by animal owners either directly (primary care and emergency) or following referral. The RVC's Diagnostic Pathology services receive submissions from its own hospitals and external practices. As such, the cases are representative of both individual patients and animal populations seen across the country and provide excellent learning material to deliver Day One Competencies. The RVC continues to develop its primary care sites. On average, surgical cases make up approximately 10% of the caseload at Acorn House and BSAH typical for general practice in the UK. This is supplemented by mutually beneficial partnerships with third party organizations in complementary areas such as Shelter Medicine, Farm Animal Practice and Veterinary Public Health. These partnerships allow us to provide a strong and resilient caseload for teaching (both individual animal and population) in species where on-site provision is challenging due to the geographical location.

Ensuring RVC students receive sufficient case exposure to meet the pre-clinical and clinical objectives is monitored by feedback received from staff and students and achievement of clinical competencies. The RVC's Clinical Operations Group (COG) regularly reviews caseload data including the balance between clinical disciplines in its referral hospitals and the balance between consultations and hospitalization for its primary care sites to ensure caseload provision continues to grow, meets student needs and is reflective of the clinical environment graduating students will enter. Examples of how the RVC adapts teaching to changing caseload, to ensure adequate case material, is found in section 4.8.

4.3 Describe unique clinical educational resources or programs that enhance the educational mission.

The RVC's plastination facility on site at the Camden Campus produces plastinated anatomic specimens for use in both preclinical and clinical teaching. The provision of plastinated material supports core anatomy teaching but additionally aids vertical integration of the basic sciences throughout the curriculum, supporting the delivery of anatomy teaching during the clinical years of the program. Key benefits include reduced reliance on formaldehyde preservation and specimens can safely be used outside the dissection room environment.

The RVC's Clinical Skills Centre (CSC) at its Hawkshead Campus comprises two teaching spaces containing veterinary equipment and models dedicated to learning and practicing skills in a relaxed environment. The CSC has 5 staff (3 FTE) and is led by a Lecturer in Clinical Veterinary Education who is a qualified veterinary nurse with an MSc in Veterinary Education. This student-centered facility enables the staff to facilitate the practical skills learning requirements of around 1,200 students each year. The CSC team are inter-professional and conscious of the need to cater to neurodiverse learners. They often work closely with students with different learning styles or Special Educational Needs (SEN). Along with the models in the CSC, various simulation/teaching models are available for students to use including sophisticated high fidelity cow haptics as well as sheep models which are based in the new Large Animal Handling Facility at Boltons Park Farm.

Unique aspects of the RVC's clinical training include:

- A new multispecies rotation (Primary Care Clinical Skills; 1 week) utilizes teaching models and a variety of live animal practicals to allow students to gain proficiency and competence of many skills required for primary care practice in the major species. Skills include physical examinations, dental exams, orthopedic exams, neurological exams, ophthalmological exams, drug calculations and prescriptions, vaccination, suturing, management of dystocia in farm animals, bandaging, basic ultrasound, and euthanasia.
- During the final year, as part of the Veterinary Public Health component to rotations, students visit a beef finishing unit with on-site abattoir and farm shop where students experience hands-on the "farm to fork" concept. This allows additional practical experience in pathology together with a pathology practical focusing on ovine, porcine and bovine organs. It also ensures students gain exposure to Hazard Analysis and Critical Control Point (HACCP) analysis from the abattoir and retail outlet and learn how to conduct a biosecurity plan on the beef finishing unit.

- The RVC's core rotations are supplemented by a large number of focused elective (tracking) rotations, allowing students to gain hands-on experience in an area of their choice; reinforcing acquisition of core day one competencies as well as developing more advanced skills in their areas of interest. These opportunities including some unique areas of clinical practice in the UK, e.g., British Quality Pigs (100% specialist pig practice) and are summarized in Tables H and I.

Clinical teaching at the RVC is strongly influenced by the output of the LIVE (Lifelong Independent Veterinary Education) team, which is the only veterinary-themed Centre for Excellence in Teaching and Learning in the UK.

4.4 If off-campus clinical instruction sites are used regularly by multiple students, complete Table H and describe the planning, supervision, and monitoring of students; and contracting arrangements for non-institutional based faculty (Table I)

Tables H and I provide a summary of the RVC's current external partnerships, average numbers of students that attend and the amount of time the rotations run annually to accommodate students.

All internal and external teaching is overseen by the CMC which considers and approves proposals for delivery of external clinical experience. All the delivery of teaching and contractual arrangements with external partners is planned and managed by the Clinical Teaching and External Partnerships (CTEP) sub-group who report to the CEC. The CTEP ensures the external partners have clarity on the clinical resources they are required to provide and that this augments the RVC's internal provision.

To ensure adequate planning, supervision and monitoring of students, each rotation undertaken at an off-campus facility has both an internal and external co-lead for the rotation ensuring alignment of both teaching aims and student processes with the strategy of the RVC. Further, its core Shelter Medicine and Farm Animal Practice rotations have internal staff embedded at these external sites. The external co-rotation leads undertake an induction including teaching expectations and the RVC's assessment policies and marking criteria; in addition, all are offered training via the RVC's bespoke Postgraduate Certificate in Veterinary Education with this being compulsory for those delivering core rotations. All are also invited to teaching workshops and teaching and assessment INSET days. The structure, learning objectives, assessment and practical opportunities provided at external sites are developed and agreed through discussion between the RVC and the lead from the external partner. These are reviewed and approved by the CMC and thereafter follow the RVC's Annual Quality Improvement Reporting process where both the RVC and the external collaborator produce and submit a formal rotation review at least annually, this in turn is then considered by CMC. Student feedback is collected and reviewed in the same way as internal rotations through inclusion in the rotation review process.

There are contractual relationships with all off-campus clinical instruction sites based on a standard template. It includes details on the physical and digital infrastructure the partner must supply along with the caseload and teaching requirements. The rotation partners must ensure that students are informed of all health and safety policies, procedures and risk assessments that apply to duties and activities during the rotation and be assured that the student has read and understood the contents. The partner is contractually required to notify and formally report any incidents in writing, via standard RVC reporting procedures (SafetyNet) as soon as reasonable possible and, in any event, within 24 hours (or immediately, if a serious accident). Termination clauses are also included to protect the RVC against abrupt withdrawal.

4.5 Describe the involvement and responsibilities of professional students in the healthcare management of patients (and clients) in clinical programs of the college.

Across all rotations, students are involved in the full range of both clinical and professional tasks aimed at supporting acquisition of clinical Competencies. Students have the opportunity to perform and practice a range of clinical procedures, as appropriate for the rotation. Broadly, across both intramural and extramural rotations, students are directly involved in case management including performing the initial consultation including history taking and clinical examination as well as developing a logical approach to solving the defined clinical problem(s). This approach may include prioritizing problem lists, creating a diagnostic plan, being directly involved in the diagnostic testing (for example blood sampling, blood pressure measurement, skin scrapes, obtaining cytological specimens, carrying out initial ultrasonographic scanning and acquiring radiographs). In

some rotations, students also support nursing tasks such as tube feeding and intravenous catheter placement to gain experience of these important procedures. Professional tasks include client communication, completing clinical records (including draft surgical reports and discharge notes), documenting clinical assessments and developing treatment plans with guidance of clinical staff.

The detail of the opportunity varies by rotation with the full details on rotational learning objectives being found on the RVC's Rotation Virtual Learning Environment (VLE) pages; some in depth examples include:

- Anesthesia: students are involved in preparing and inducing general anesthesia, monitoring vital signs during anesthesia, managing the anesthetic, and managing postoperative care.
- Primary care farm animal practice: students carry out clinical examinations in various farm animal species (e.g., cows, sheep, goats, poultry, pigs) blood sample calves, carry out disbudding, perform castrations, perform fertility exams and are involved in biosecurity measures
- Primary care small animal practice: students carry out vaccinations and perform dentistry and neutering under supervision
- Emergency medicine: students have a primary role in placing intravenous catheters, measuring blood pressure, performing ECG and point of care ultrasound, administering IV fluids and carrying out treatment under supervision
- Pathology: students perform necropsy examinations in various species and interpret pathological findings from both clinical pathology and gross anatomic pathology.

To optimize the student learning experience, core group rotation sizes (both intramurally and extramurally) remain small (6 to 8 students per rotation week) allowing full involvement with the healthcare management of patients and clients.

4.6 Describe how subject-matter experts, including board-certified specialists, and clinical resources are integrated into clinical instruction

Clinical instruction is delivered through the RVC's student rotations. In every rotation, there are subject-matter experts, most frequently board-certified specialists, delivering clinical care or diagnostic service whilst supporting student learning. These subject matter experts are involved in the design, management and delivery of approved learning objectives (which are mapped to AVMA CoE competencies), interact with and instruct students daily around the relevant clinical resource (cases or case material), and assess student performance.

Small Animal

Each rotation has at least one subject-matter expert who serves as rotation leader. The RVC's small animal referral hospital has board-certified specialists in Anesthesia & Analgesia (7), Cardiology (4), Dermatology (4), Diagnostic Imaging (4), Emergency and Critical Care (8), Internal Medicine (10), Neurology and Neurosurgery (6), Nutrition (2), Oncology (4), Ophthalmology (5), and Surgery (13). The hospital is further supported by an Animal Behavior consultant, a physiotherapist and Transfusion Medicine experts. In primary care rotations (in which board-specialization does not currently exist in the UK), subject-matter experts are experienced general practitioners in the relevant species, many of whom hold postgraduate qualifications (advanced practitioner status). The RVC's BSAH is further supported by board-certified specialists in Exotic and Small Mammals (4) who deliver an Exotics rotation, which includes both primary care and referral cases in these species.

Equine

The RVC's Equine Referral Hospital has specialists in Equine Internal Medicine (5), Equine Surgery (6), Equine Sports Medicine (1) and Equine Diagnostic Imaging (2). Its ambulatory Equine Practice has 8 Equine vets, including vets with further training in stud work including artificial insemination, shockwave therapy, pre purchase examination and export certification.

Pathology

The RVC's Pathology team includes 11 board-certified subject specialists (8 anatomic pathologists and 3 clinical pathologists) who support teaching and assessment during rotations. The teaching of cytology and necropsy (including forensic examinations) is performed on this varied caseload and supplemented by access to its extensive diagnostic archives to reinforce principles, for review and revision, and also for undergraduate research projects.

Production Animal

Pre-clinical and early clinical farm animal teaching in a range of species (including cattle,

sheep, poultry and pigs) is conducted at Boltons Park Farm. This teaching is conducted by staff within the RVC Farm Animal Health and Production Group which includes a number of board-certified specialists and subject area experts.

The core farm animal rotation teaching is delivered using a range of farms serviced by the RVC's major farm animal partner, Synergy Farm Health (SFH). SFH is the largest independent farm animal practice in the UK employing ~60 licensed veterinarians (including six board-certified specialists and a veterinary technician team of over 20 personnel). The RVC's production animal elective rotations are conducted with a number of further dedicated farm practices providing unique clinical resources and led by practitioners with deep subject matter expertise; these provide a greater depth of experience, extending beyond Day One Competencies, for students wishing to specialize in production animal practice.

4.7 Describe the adequacy of the medical records system used for the hospital(s), including field service and/or ambulatory and population medicine. Records must be comprehensive and maintained in an effective retrieval system to efficiently support the teaching, research, and service programs of the college.

The clinical environments in which core rotations are delivered have electronic record systems applicable to the type of practice (e.g., primary care vs referral hospital). All meet the national professional regulatory requirements as required by the RCVS Code of Conduct. Further, all RVC clinical data is supplied by automated feed to the VetCompass database (see Standard 10).

In the RVC's primary care small animal hospitals, (BSAH and Acorn House Veterinary Hospital), medical records and practice management information (clients, appointment and billing data) are managed together on commercial practice management systems (PMS), modeling the situation in the vast majority of UK primary care practices. Students have full access to the systems and are able to read previous entries including the medical history, enter their findings from clinical examinations and diagnostic work ups, and make diagnostic and treatment plans. Students can also compose discharge notes and reports, which are reviewed with supervising veterinarians. All clinical data are retrievable.

In the QMHA, the functionality is split with one system providing practice management functionality (RxWorks) and a second bespoke system – Clinical Records Information System (CRIS), providing functionality for structured and detailed medical records and client communication beyond what is available in proprietary PMS. This level of functionality supports student involvement with medical records and hospital operations. CRIS allows logging of clinical incidents (morbidity and mortality) supporting a patient safety culture, manages scheduling of procedures, and processes medication prescriptions. CRIS has automated links both to the RVC's PMS, allowing seamless transfer of client information to the RVC's clinical records system, and VetCompass to facilitate research. In May 2025, a digital in-patient record (kennel sheet) functionality within CRIS was launched, replicating what was historically provided on paper "kennel sheets"; this includes daily subjective and objective assessment and treatment plans (SOAPs). These medical records are used to support teaching as students generate the SOAPs and develop the treatment plans in conjunction with the clinical staff. Laboratory and pathology reports, diagnostic imaging reports and surgery reports are also accessible on CRIS. Staff and students all have a unique login to enable access to CRIS. There are control measures in place to prevent the alteration of important clinical information.

The RVC's equine referral hospital employs the same medical record systems as used in the QMHA, with the addition of an electronic medical treatment system (SmartFlow). The RVC's equine practice employs the same medical record system as the BSAH.

Students on extramural core rotations (e.g., shelter practices, farm animal practices) are given access to relevant clinical data and materials. In the case of Shelter practices, students are given instructions to work on the electronic record systems of the practice. External production animal rotations provide farm specific information/ history relevant to the student visits as this is more appropriate than access to the practice management systems, which in many instances will not contain the clinical data relevant to a visit.

Clinical records are further supported by a Vendor Neutral Archive system, which provides online access for students and staff to all RVC imaging studies. The RVC's pathology and diagnostic laboratory information management system (LIMS) is provided through Matrix Gemini from Autoscribe Informatics. Imaging and laboratory/pathology reports are uploaded into the

clinical records system where they can be accessed by all students during the last two years of their program.

4.8 Describe how the college has responded to increasing/decreasing clinical resources

The RVC monitors clinical resources bimonthly via the Clinical Operations Group. These quantitative data, alongside feedback from its staff and students on any impact on quality of learning (recognized through the quality assurance processes), allow the RVC to respond to changing resource. Building on the analysis of caseload trends outlined in Q4.1, the RVC responds in one of two ways – either by adapting the student rotation structure to changing caseload or by adapting its acquisition of clinical resource. Together, these ensure an adequate clinical resource thus maintaining the consistent high quality of its clinical learning environment.

Examples of how the RVC adapts the student rotation structure include:

- Many rotations across its clinical units have introduced shifts including OOH and weekend shifts allowing students to gain exposure to additional cases beyond traditional core working hours. Students carrying out OOH and weekend shifts are given time-off in lieu.
- A growing exotics caseload, alongside changes in the small animal GP caseload post-pandemic, allowed the creation of a distinct full week rotation in the BSAH exotics service to complement a two-week rotation entirely focused within the cat/dog general practice service increasing student exposure in both areas.
- The Small Animal Emergency rotation in the QMHA was doubled to 2 weeks, taking advantage of a growing caseload in this area.
- Recognizing the reduction in components of the ERH caseload, new equine rotations have been created (e.g., Advanced Clinical Skills, Large Animal Anesthesia) in which students interested in equine work can increase their exposure to equine cases.

  Examples of how the RVC adapts clinical resource acquisition (e.g., internal operational changes, staff recruitment or developing new external partnerships) include:
- In its Equine Practice, an additional equine practice vet was recruited to increase the equine ambulatory caseload.
- Due to a decline in primary care canine and feline caseload at the BSAH post-pandemic, a number of operational changes are underway to reverse this. The Leadership structure was changed, and the practice has been fully staffed and open to new clients since mid-2024 and consequently caseload is increasing (since the 2023-24 fiscal year). Improved client communication, marketing, clearer pricing, and a robust recommendation system for preventative care and development of behavioral services have recently been implemented to drive caseload further.
- Recognizing the challenges of caseload acquisition in the equine referral market, investment in a new state-of-the-art CT scanner for the RVC's ERH has been made, thereby increasing its equine caseload for lameness evaluation.
- Increases in bovine and ovine necropsies were achieved through exposure of all IMR students to a commercial abattoir processing both cattle and sheep.
- A reduction in necropsies for pigs and poultry in the 2022-23 fiscal year led to sourcing of piglet and chicken cadavers allowing necropsies in these species on a one per student basis.
- Non-avian exotic necropsy numbers have increased following appointment of a new faculty appointment in zoo and wildlife pathology.
- A new Shelter Medicine partnership at the Mayhew charity running a low-cost neuter clinic was set up in 2024, adding resilience and mitigating in advance an expected reduction in caseload at a different external partner (RSPCA) due to a change in their operational focus.

  Generally, for the RVC's Production Animal resource and specialist Small Animal referral resource, no action has been needed as the clinical resources available significantly exceed the teaching demands of the program.

4.9 Describe the means used to maximize the teaching value of each case across the curriculum

The RVC's busy hospitals provide ample clinical case material to inform the training of its students. From the third year (of 5), students engage in Clinical Scenarios in the various strands of the curriculum that are derived from clinical cases seen in its clinical environments. Students work through cases to hone their clinical problem solving and analytical skills. On rotations, in addition to the hands-on experience, time for discussion in daily case rounds, reflection and peer-to-peer

learning is also scheduled. This varies by rotation but may include time to work through materials which are then discussed with Faculty. For example, students are provided with a series of radiographs or cytological specimens and discuss findings during teaching rounds. In others, seminars may involve in-depth discussion of specific cases seen on that rotation by the student or on specific topics frequently encountered in practice, e.g., common arrhythmias, common intoxications. Finally, in some rotations, students work on presentations that require them to review the literature on cases they have seen during the rotation. Peer-to-peer learning is used at the BSAH alongside the consultation shifts. Students rotate through the peer learning role, discussing cases with their peers undertaking the standard consulting shifts, and providing support. The purpose of this shift is to seek insight into how case thought processes work, particularly in relation to professional reasoning and contextualized care; and, secondly, to develop working as part of a team.

As part of their summative assessments in the final year of the new curriculum, students are required to submit 4 clinical case reports derived from cases seen in the final year (1 small animal, 1 equine case, 1 herd health report and 1 additional case report in any species) to demonstrate their ability to succinctly summarize and demonstrate their approach to problem solving and case management. In many rotations, for example, Pathology or Emergency Medicine, students are asked to present a case seen during the rotation so other students can benefit from the learning opportunities the case offered.

Finally, as all students are required to undertake a clinical research project, the source of clinical research data is commonly derived from the caseload seen by the RVC's clinical centers. Students are instructed on how to interrogate clinical records for data to analyze and answer their research questions and carry out clinical audits.

Standard 5: Information Resources

5.1. Describe and comment on the adequacy of information retrieval and learning resources.

The RVC provides timely access to state-of-the-art, comprehensive learning resources and professionally qualified staff able to offer appropriate advice and guidance in support of teaching and student learning. Strategic development is via the Data and Digital Technology Strategy, the Blended Learning Strategy and the Library Collection Development and Management Policy.

There are libraries at both Camden and Hawkshead campuses. Learning Resources include electronic and print based library books, periodicals and bibliographic databases, a virtual learning environment (VLE), lecture recordings, voting technology, e-portfolios, quizzes and clinical skills equipment, simulators and instruction to support active learning approaches.

The two functional units involved in the provision of learning resources are Library and IT along with the Directorate of Learning & Wellbeing, both located in the Professional Services Department.

The two libraries provide 111 study spaces, including some in silent areas and the associated mixed-use areas have open access computers, docking stations for personal laptop use and open desks. There is plentiful access to electrical outlets and, in the Hawkshead SLC, bookable and technology-rich group study rooms and booths.

5.2. Briefly describe the availability of learning and information technology resources support for faculty and students, including personnel and their qualifications.

Open access PCs, laptop loans and a range of learning spaces are available 24/7. Library opening hours are:

Day	Hawkshead Library	Hawkshead IT	Camden Library	Camden IT
Monday to Friday	08.00 to 20.00	24/7	09.00 to 19.00	24/7
Saturdays	09.00 to 18.00	24/7	Library closed	24/7
Sundays	12.00 to 16.00	24/7	Library closed	24/7

Opening hours can be extended should there be demand, such as during exam periods.

Access to e-learning resources and course materials is available 24/7 on and off-campus either through the library catalogue and resource discovery tool or the VLE. Students are given information about learning resources during the pre-arrival induction, KickStart, in Welcome Week workshops, via the VLE, direct emails and social media channels. There are 141 open access PCs

at Camden and 103 at Hawkshead, plus 32 self-service loan laptops at Camden and 44 at Hawkshead (with a combined total of 647 loans last year).

Information and clinical skills training sessions cover use of the library and its resources, use of referencing tools, use of the clinical skills equipment and learning materials, and use of the VLE. These are widely advertised on the VLE and directly to students. Digital Learning Champions (paid students from each cohort) provide peer support through drop-in sessions to champion the VLE and the digital tools used by students in their studies. The RVC App allows mobile-friendly access to information and resources.

The Library Collection Development and Management Policy articulates the accessible development and management of electronic and physical book and periodical collections. The preference is to buy e-books wherever possible, often alongside print versions of textbooks (and often multiple physical copies). The collections include e-books (3,271, with 55,740 loans in 2023-24) and e-periodicals (8,492, with 399,503 accesses in 2023-24) and physical collections (approximately 36,000, with 3,780 loans in 2023-24). There is a 'You Say, We Pay' scheme whereby any student can request new titles or extra copies of books. A resource discovery tool provides a single user search interface for all electronic resources, including bibliographic databases. There are 100,000+ database searches per annum, across almost 50 databases, including BioMed, BioOne, BSAVA, CABI, Cochrane Library, OVID, Science Direct and Web of Science. A group of professionally qualified library, IT and Digital Learning Technology staff (Appendix 5.1) provide high-quality services across information and learning resources services.

5.3. Describe the reliability and methods of access, as well as security considerations, to library information resources for faculty and students when they are on and off campus.

Students can access library and information resources whether on or off campus. On campus there is a comprehensive wireless network, and students can connect via the high-speed, resilient network via personal computing devices or open access computers. IT accounts and relevant systems have multi-factor authentication, and students can access library resources directly via the library catalogue, or via links in the VLE or the RVC Mobile App. Students off campus can access the VLE and search the library catalogue, bibliographic databases, e-books and e-journals and the referencing tool. There are IT and VLE Helpdesks and a contracted third-party helpdesk providing OOH support to both students and faculty.

5.4. Describe the resources (training, support) provided and available to students for improving their skills in accessing and evaluating information from sources in any media relevant to veterinary medicine.

Library staff provide induction sessions and training for students in the use of the library management and search and discovery systems, including on how to run and save bibliographic searches, accessing electronic resources and managing library accounts. Beginner, refresher and intermediate level EndNote referencing software training is also offered. Online user guides and instructional videos are produced and maintained in-house by the library team, and these cover all areas of library skills training and are available for all students to access 24/7 via the VLE. A mandatory information security course is tailored towards students embarking on clinical rotations.

The Digital Learning (DL) and Educational Development (ED) teams in the Directorate of Learning and Wellbeing support instructional design, skills development and technical aspects of distance education for staff and students (Appendix 5.1 Key Staff – Library, IT and Digital Learning). These teams and the student Digital Learning Champions provide training to students, so they are competent to use the necessary digital tools at each stage of their program. Digital skills development is highlighted in the induction process and picked up with specific training sessions in Welcome Week and throughout the year (Digital Bytes).

5.5. Describe assessment of students' skills in retrieving, evaluating, and applying information pertinent to veterinary medical science including clinical case management as preparation for lifelong learning.

The RVC equips veterinary students with both quantitative and qualitative scientific skills, essential for evidence-based veterinary medicine, including those required to retrieve and critique relevant information. The curriculum fosters scientific reasoning, critical analysis, and research skills, integrating traditional and artificial intelligence (AI)-driven methodologies to enhance

learning. A key component of this approach is the Scholarship and Evidence-Based Veterinary Medicine (SEBVM) strand, which spans all five years of the BVetMed program (see also 10.2).

5.6. Describe current plans for improvement.

Library improvements are now focused on student engagement activities such as a reading list project (Keylinks) which will give students a menu option in the VLE to directly access reading lists. Further IT improvements include the full integration of curriculum mapping software (Sofia) to support the curricular change process with plans to launch a student-facing version. The continued roll-out of PebblePad ePortfolio, as part of the continuous assessment strategy, will enable students to reflect on the acquisition of professional knowledge, skills and competencies.

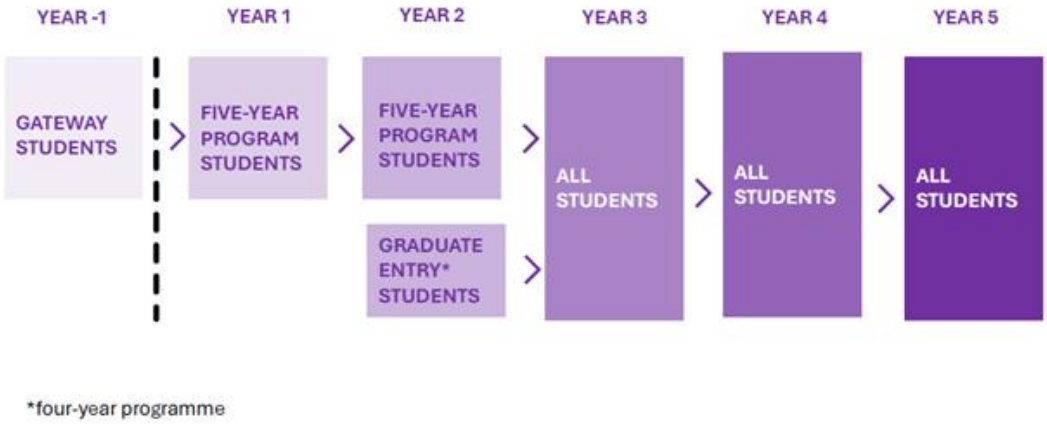
Standard 6: Students

6.1 Complete Tables A, B, C, and D, and analyze trends.

The RVC offers two different pathways that enable a student to qualify as a veterinary surgeon, which converge for a common final three years. In addition, a Gateway program is offered; a pre-veterinary year of study for students meeting pre-specified contextual criteria:

- **Five-year BVetMed**; the standard program for appropriately qualified high school leavers.
- **Graduate Accelerated BVetMed**; a four-year program designed for graduates of a relevant science-based degree. Students complete an introductory graduate transition year and join year three of the five-year program upon completion.

The Gateway Program is a foundation year program for UK high school leavers from non-traditional and disadvantaged backgrounds. Entry requirements have contextual elements which must be fulfilled. Upon successful completion, students automatically progress to the five-year BVetMed program or can choose to complete their veterinary education at other UK Veterinary Schools.



Student Numbers

The number of student places is determined by evaluating the educational resources available (e.g., facilities, availability of animal material and clinical cases) taking into account animal welfare and biosecurity. The RVC undertakes detailed planning to determine the most effective means of maintaining the learning and clinical environments necessary that delivers a curriculum which produces competent graduates and ensures there is a positive student experience. The number of students admitted on each pathway is based on an optimum graduating cohort number of between 300 and 320 and has not changed significantly since the last accreditation visit in 2018. There are small fluctuations of students admitted each year due to differences in cohort achievement (Appendix 6.1 Table A). There was a notable difference in the 2020/21 admissions cycle, due to last minute changes to exam grades by the UK Government that affected all UK higher education institutions. Postgraduate students include interns, residents, MRes and PhD students (Appendix 6.1 Table B). The RVC has increased the number of interns and residents over the past five years as part of its ongoing commitment to advanced training and excellence in the veterinary profession.

As part of the RVC's commitment to improve the proportion of students from under-represented racial and ethnic groups that graduate as veterinary professionals, the percentage of students from these groups has increased over the past five years from 24% to 36% (Appendix 6.1

Table C). Anincrease in the proportion of students from lower socioeconomic groups has also been seen, due to the RVC's work under the RVC Access and Participation Plan (APP) 2020-2024; a requirement of the HE regulator for England, the OfS.

6.2 Provide a listing of student services. These services must include, but are not limited to, registration, testing, mentoring (advising), counseling, tutoring, peer assistance, financial aid counseling programs, and clubs and organizations. Demonstrate that students are informed of and have ready access to academic counseling, personal wellness, financial aid, debt management, and career planning services.

The Directorate of Learning and Wellbeing brings together academic and student support services including the Advice Centre, Careers and Employability, Chaplaincy, Digital Learning and Educational Development. These services are easily accessed and advertised widely (see below for detail). All members of the RVC community are able to signpost and refer students to these services, including other students.

Registration and Welcome

On confirmation of acceptance, students are given access to an online pre-enrolment induction program, Kickstart, as well as a welcome pack (see section 6.6). They also have access to the support services described below. The RVC's in-person induction includes Welcome Week, where students meet their academic tutor, and continues with a longitudinal induction, "5 Ways to Be Well", that extends through the first year of study. Students in other years are also able to re-access these longitudinal induction activities. The RVC Students' Union also has an induction week, Freshers Week, where students are introduced to clubs and societies and other services they provide.

Academic Support

A wide variety of support for learning is available, including:

- Personal Tutors: each student has a tutor who provides academic and pastoral advice.
- Pre-registration information including a skills audit and in-person induction (as above and 6.6)
- VLE (LEARN) with curriculum materials, additional material to support independent learning and a variety of learning and assessment support tools
- Study skills team; tailored support within the curriculum and workshops/one to one support
- Digital skills training (in-person/online) & peer Digital Learning Champions (DLCs)
- PebblePad portfolio system for day one competencies
- Placement teams for AHEMS and c-EMS support
- Library facilities at Camden and Hawkshead (see Standard 5)
- IT services support effective use and development of information technology
- The NAVLE support program is delivered in the 4th and 5th year to students who wish to take the NAVLE
- Student Success Coaches provide students with near-peer support for their studies.

Testing and Support for Failing Students

Assessment processes are detailed in Standard 11. Students gain feedback from all formative and summative assessments and tutors discuss ongoing performance with their tutees. When necessary, tutors use these discussions to signpost tutees to additional support services. Students who fail progression assessments are supported by their tutor in a one-to-one review of their performance (e.g., review of their written answers) and in these sessions, tutors signpost to additional support services, such as the Study Skills Team or Student Performance and Development system (SPD, see below), as required. Students who fail rotations also receive guidance from tutors, senior tutors and rotation leads and are similarly signposted to support services.

Pastoral and Welfare Support

All pastoral and welfare services allow students to book appointments at times that suit them and offer in-person and virtual appointments.

- The Student Performance and Development (SPD) system supports students with academic or personal difficulties
- Personal tutors (see above) are led by the Senior Tutor Team, who support the tutors and the SPD system.

Mental Health and Wellbeing

- Comprehensive specialist mental health and wellbeing support
- Mentoring for Wellbeing: non-therapeutic support to overcome barriers to learning
- Wrap around 24/7 digital platforms (Togetherall and Sorted app) and phone support (Health Assured, Student Assistance Program) to provide support when needed
- 'Look after your mate' training and resources to develop mental health peer support.

Student Money Advice

- Specialist support with student finance and advice on budgeting, money and debt management.
- Dedicated RVC Student Support Fund for students in financial hardship
- Digital Support Fund to reduce digital poverty by assisting with equipment costs
- RVC Freecycle: students can access a range of donated second-hand clothing and equipment
- A range of scholarships and bursaries.

Disability Support

- The RVC's 'Reasonable Adjustments for Disabled Students – Policy and Procedure' sets out in detail how disabled students are supported at the RVC
- The Admissions Policy outlines processes for applicants with disabilities and/or long-term health conditions
- Students are given multiple explicit opportunities to disclose a disability during their program of study, and the Advice Centre has specialist Disability Advisers to support such disclosures
- Disability Advisers give guidance including developing requests for Reasonable Adjustments and applications for the Disabled Students Allowance (DSA)
- A package of specialist support for disabled students not eligible for DSA (e.g., international students). This includes specialist mentoring and/or study skills support, assistive technology and allowances for photocopying and printing
- The RVC also seeks feedback from, disabled students to explore improving the disabled student experience. It has commitments in its Access and Participation Plan to reflect this work.

Careers and Employability: See section 6.5

Chaplaincy and Prayer Room Facilities

- The RVC employs a Chaplain who offers ecumenical, confidential, independent support and advice to all students (regardless of their religious beliefs) on personal matters, relationships and ethical decision-making, matters of social action and justice, and activity in the RVC and wider community.
- Prayer facilities and quiet spaces for reflection are available on both RVC campuses.

Registry

- Academic Registry provides services relating to course administration, enrolment, examinations and assessments, visas and immigration, student participation and complaints.

Student communications and events

Information about services available, including:

- University Mental Health Day
- Mental Health Awareness Week
- National Student Money Week.

RVC Students' Union (SU) Clubs and Societies

- RVCSU has a wide range of clubs and societies (see Appendix 6.2) to encourage students to connect with each other, develop good self-care routines and maintain a healthy life/ study balance.

6.3 Provide a list of tuition-related information available for prospective students. This information, as consistent with applicable law, must include estimated total educational cost, cost of living, considerations, and a description of financial aid programs. Make collected data on salaries, employment rates, and educational debt available to the public, as consistent with applicable law.

For prospective students, the following information is publicly accessible via the RVC website or through other channels as listed below.

Information relating to admissions and the course of study:

- Academic qualifications and Work experience admission requirements

- The curriculum for each Year group plus AHEMS and c-EMS
- Methods of teaching, learning and assessment used throughout the course

Information relating to educational costs, including cost of living considerations and description of financial aid programs, is available through the website including the following:

- Current information on Fees and Funding for prospective International, EU and UK students.

In addition to UK, EU and International fees, the website provides:

- Procedures for payment of fees, nonpayment of fees, withdrawals and calculations of refunds which are included in the Student Fees Policy.
- Funding Options for International, UK and EU students, including bursary and scholarship information together with the eligibility criteria and details of the application process are available from the Fees and Funding website page: Scholarships and Bursaries at the RVC
- Information on educational debt is publicly available on the RVC website FAFSA – Direct Loans –RVC.
- Students are advised that the following course-related costs are included in the fees:
    - Student membership of the British Veterinary Association for course duration.
    - Access to books and journals essential to the course (print and digital)
    - Open access and bookable IT equipment, such as PCs and laptops
    - Annual membership of College gym (both campuses)
- Students are also advised of the course-related costs that are not included in the fees:
    - Specialist clothing and equipment up to £600 for the whole course. This amount includes some likely additional spend on replacement items.
    - Travel to AHEMS and c-EMS placements
    - Some AHEMS and c-EMS placements will also require students to pay for board and lodging
- While the majority of the core IMRs take place in the RVC's clinical centers, various weeks of core and tracking IMR require travel to various parts of London or further afield. Financial support is provided to help offset the likely travel costs entailed and for certain rotations accommodation is also provided.

Information related to housing for prospective students:

- The Housing Advice website page provides information on costs, locations and the application process for RVC accommodation options at the Camden and Hawkshead campuses. Advice on tenancy agreements, deposit and rent queries is also available for students who wish to rent private accommodation.

Data on salaries and employment rates:

- Information regarding salaries and employment rates are published nationally by the UK government and are accessible to prospective students through the UK government Discover Uni website https://discoveruni.gov.uk/.

6.4 Describe how conflicts of interest regarding academic assessment of students are avoided with individuals who provide student counseling.

Staff who provide student counseling are not involved in academic assessment. The exception to this is faculty members who act as personal tutors. To avoid conflicts of interest, written summative assessments are delivered electronically and de-identified, with sample marking to verify consistency. Summative assessment of practical competencies, e.g., DOPS and OSCEs are not anonymous, but involve multiple stations, each with a different assessor and have structured marking schemes to prevent subjectivity and ensure consistency of marking. OSCEs are standard set to minimize subjective interpretation. Continuous assessment of performance on clinical rotations is derived from the feedback of multiple members of clinical faculty, both veterinarians and veterinary nurses. External examiners review assessment and marking practices to ensure the quality of RVC processes regarding equality and identification of bias. Students can utilize the student complaints procedure should they have concerns about assessment processes (see section 6.7).

6.5 Provide a summary of college activities in support of placement of graduates.

The RVC has a Careers Team that provides support to help students develop the skills that will prepare them for the transition into work following graduation. This includes one-to-one appointments, workshops and an annual Careers Fair with employers, RVC alumni and members of professional organizations. Other specific activities include:

On-Campus Graduate Interviews: for final-year students, offering direct access to employers. Year 4 students are involved in supporting the interview day thereby helping them prepare for their own future applications.
Application and interview preparation and support: application and interview support for final-year students, including one-to-one practice
Asynchronous Workshops: Preparing for Life After Graduation: tailored, flexible-access series of workshops to support final-year students via practical steps to transition into employment, clarifying their practice area or wider career path and considering next steps.
Final-Year Drop-In Careers Space: A dedicated and welcoming space for final-year students to access careers support, including navigating career-related queries, application and interview support, understanding offers and contracts and managing uncertainty and making informed decisions.
c-EMS and Career Planning Workshops
A dedicated workshop series before and after c-EMS designed to help Year 3 students reflect on making the most of c-EMS, using c-EMS to inform future practice preferences and leveraging c-EMS for future employment. There is also a Jobs Board and employers are encouraged to employ or provide placement opportunities for RVC students at the Careers Fair.

6.6 Provide academic catalogue(s) (or an electronic address for this resource) and freshman/upper-class orientation materials.

Academic Catalogues
The online prospectuses:

- RVC Undergraduate Prospectus 2026-2027
- RVC International Prospectus 2026-2027

and course specific information as described in section 6.3 is available to prospective students on undergraduate BVetMed study page.

Orientation materials

Students are provided with a range of information prior to arrival to support the orientation process (see also section 6.2). This includes an online welcome pack (RVC Welcome Pack 2025). Students also receive access to Kickstart, the RVC's pre-arrival online induction program, and a link to the Welcome Week events page, both available via the VLE. The first week on campus for new students involves enrolment, campus tours, a range of workshops, sign-ups for medical practices, introduction to clubs and societies and a meeting with their personal tutor. Links to these VLE pages will be provided to site visitors.

6.7 Describe the system used on an ongoing basis to collect student suggestions, comments, and complaints related to the standards for accreditation.

The RVC Learning, Teaching, Assessment and Student Experience Strategy and Student Voice Strategy ensure a variety of mechanisms for students to give feedback on their course and student experience. This includes surveys (in-house as well as external national and international benchmarked surveys), student panels and the student representatives who are elected by each cohort to represent them in giving feedback to academic staff.

An anonymous student suggestions and comments box, available both online and in-person, gathers student feedback. This allows students to provide feedback at any time, offering a convenient and accessible channel for input. In-person comment boxes are also located at both Camden and Hawkshead's Academic Registry Student Service Desks. Submissions are reviewed and collated to identify common themes or concerns. Feedback specifically related to accreditation standards is noted and, where appropriate, shared with relevant academic committees to support continuous quality improvement. Individual submissions remain anonymous and are not directly attributable.

Collectively, these systems help ensure that student voices contribute meaningfully to the ongoing development and enhancement of the RVC's academic standards and student experience. In the 2025 National Student Survey, over 92% of the BVetMed graduating cohort agreed that they had adequate opportunities to provide feedback on the course.

The RVC follows the RVC Student Complaints and Resolution Procedure for formal complaints. Students are encouraged to attempt informal resolution of matters at a local level, where appropriate, before formal complaints are raised, but where informal resolution is

unsuccessful or it is believed that the university has not acted appropriately, formal complaints can be raised and addressed under the Procedure.

6.8 For student services that the college does not provide directly, described how students have reasonable access to such services from the parent institution or from other sources that are relevant to the specific needs of students, and describe current plans for improvement in resources for students.

The RVC works in partnership with a range of external service providers to augment the support offered. These are promoted alongside RVC services and students can access them directly themselves or via a referral from the RVC support teams (depending on the type of support). These ensure students can access support from wherever they are and whenever they need it. The majority of services are available to all students, whilst some are tailored for specific student groups, e.g., disabled students. These services are budgeted for and reviewed on an annual basis through the strategic level Student Development Committee to ensure continued offer of a comprehensive range of support. These services include:

- University of London Housing Service
- Specialist Mentoring support (University Mentoring Organization)
- Occupational Health (OH Works) – pre-entry screening and on course referrals
- London Nightline – telephone and online support specifically for students
- RVC works with and promotes other support services, e.g., VetLife, Camden Talking Therapies, Herts Talking Therapies.

Plans for Improvement

The RVC continues to develop its capacity for data-informed decision making. Feedback from students and measures of engagement with the current services are used to develop the support services iteratively in line with student need. Current plans for improvement are to continue to develop outcome measures for each service to understand better which groups of students benefit most from certain types of support and to develop new initiatives, such as the RVC's current work to develop AI literacy skills.

6.9 Describe how the college ensures that all students have direct experiences in a clinical setting with interns and residents.

The RVC has an extensive portfolio of intern and resident training programs. Numbers have been increasing slightly each year but there are currently 28 interns (across small animal, equine, production animal and exotics) and 78 residents in a variety of specialties including small animal, equine, production animal, pathology, exotics and zoo medicine fields. While the majority of residents are based at the Hawkshead Campus some are also based off-site, for example at SFH. Students work alongside interns and/or residents routinely in the vast majority of core and track rotations.

6.10 Describe how the college ensures that all students have direct experiences with individuals (ideally veterinarians) in advanced degree programs.

The RVC has both veterinarians and non-veterinarians undertaking advanced degree programs (masters and PhD). These postgraduate students may assist with skills training and assessment or interact with and support BVetMed students undertaking their research projects but are not involved in the direct delivery of the curriculum or assessment. All postgraduate students involved in skills training or supervision of research projects are required to undertake compulsory training provided by the RVC Teaching and Learning in Higher Education course, TLiHE.

Standard 7: Admission

7.1 State the minimum requirements for admission.

Admission to taught programs is overseen by the Recruitment and Admissions Committee (RAC), composed of full-time faculty and senior professional services staff. The RAC convenes four times a year to discuss and review admissions policy and provide oversight of admissions decisions. The RVC's Admissions Policy governs the selection process and is available on its website in both full and sectioned formats to ensure accessibility and ease of understanding. It is reviewed and approved annually by RAC and is updated as needed to comply with legislative changes, address feedback, or improve existing procedures. The policy outlines its admissions

principles, procedures, and includes information on the redress options available to applicants wishing to appeal or lodge a complaint.

There are three main entry points to the RVC's Veterinary Medicine programs, and the entry requirements vary for each. All requirements, and any changes to requirements, are considered and approved by the RAC. Entry requirements are published on its website, through RVC publications such as its prospectus, on the Universities and College Admissions Services (UCAS) website and through the Veterinary Medical School Admissions Requirements (VMSAR) publication.

Minimum Requirements Summary

- **Academic requirements:** These cover a broad range of qualifications. Suitability of qualifications may be determined using the UK National Information Centre (UK ENIC) and other sector resources.
  - Accelerated BVetMed – BVetMed Graduate Accelerated, RVC
  - BVetMed – Bachelor of Veterinary Medicine, RVC
  - Gateway – Veterinary Gateway, RVC
- **Work experience:** At least 70 hours in veterinary and 70 hours in animal handling settings for BVetMed and Accelerated BVetMed applicants, but none for the Veterinary Gateway course.
- **Interview:** All applicants must attend an in-person interview, which includes multi-mini-interview stations and a group exercise.
- **English Language:** Where applicable, applicants must meet the RVC's minimum English language requirements (e.g., IELTS 7.0 overall with no component below 6.5).

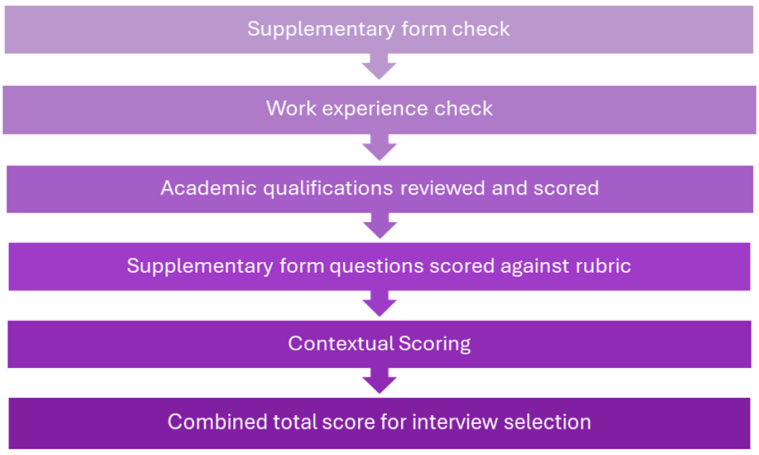
Applicants who narrowly fall short of published academic requirements may progress to the interview stage if their performance in other areas compensates (e.g., non-academic attributes or contextual factors). Applicants who fall more than two grades short of RVC requirements (or equivalent, depending on qualification type) are not progressed. The RVC academic requirements are informed by historical applicant data and internal progression monitoring, ensuring they are appropriately set to support student success. While it recognizes the limitations of correlating prior academic achievement with future performance, its review processes have not identified any systemic concerns with current thresholds.

Pathways to qualifying as a veterinarian are both long and expensive, and the RVC believes it is important for applicants to have some experience before applying, so they can verify the career is the right choice. The RVC appreciates that gaining experience can be costly and therefore keep the required number of hours to a minimum. This is intended to ensure that applicants have sufficient insight into the profession without creating undue barriers for those from disadvantaged backgrounds. The RVC has developed a Work Experience Support Program, which provides experience for local applicants who fulfil specific criteria, details of which are on its website.

Attendance at an in-person interview is compulsory for all RVC veterinary medicine programs. To facilitate this, international interviews are conducted in several overseas locations. All interviews are conducted face-to-face as the RVC understands the important opportunities in-person attendance offers, including more time to explore RVC campuses, time to ask questions of staff and students on a one-to-one basis, and the opportunity to become more familiar and confident in the higher education environment.

7.2 Describe the student recruitment and selection process, including measures to enhance diversity and minimize bias within the process.

Applications must be made via either Veterinary Medical College Application Service or UCAS and are assessed in a series of clearly defined stages, each using standardized criteria. The process is outlined below:



1. **Supplementary form**
   Applications are first screened to ensure that the required supplementary form has been submitted by the stated deadline. Applicants who fail to do so will not progress.
2. **Work experience criteria**
   Applicants are then assessed against the RVC's published work experience requirements. Those who do not meet the minimum criteria are not taken forward.
3. **Academic criteria**
   Academic qualifications are assessed against the RVC's published minimum requirements. Most UK applicants, and those still completing school-level qualifications, apply with predicted grades. While the RVC acknowledges that predicted grades are not always accurate, research indicates that large overpredictions are uncommon.
4. **Application scoring**
   Applications that meet the minimum academic threshold are then scored on the following criteria:
   a. **Non-academic criteria** – Supplementary form responses are scored using a structured rubric, which ensures applicants are assessed fairly and consistently. Assessors are instructed to consider only the submitted content, helping to eliminate bias and ensure all applicants are evaluated on the same basis.
   b. **Contextual information** – Applicants meeting one or more of the RVC's widening participation criteria receive a score adjustment to ensure no disadvantage by structural barriers.

   All assessment materials, including supplementary questions and scoring rubrics, are reviewed annually to ensure they remain relevant, inclusive, and aligned with current expectations of the profession. Updates are made where necessary to reflect feedback, emerging trends, or changes in program priorities.

Interview selection – Total application scores are ranked, and a threshold above which a candidate will be offered an interview is set each year, in line with the number of interview spaces available. Available interview spaces are reviewed annually, taking into account program intake targets, cohort behavior, and conversion rates. As the RVC typically receives more applications than it can accommodate, interview selection remains competitive and based on transparent, predefined scoring. To ensure equality and consistency, the scoring process is supported by structured rubrics, assessor training, and second marking of borderline applications. Applicants scoring one point below the interview threshold are reviewed by a second assessor; if the second score is higher, they are invited to interview. If further differentiation is needed between tied applicants' assessment score, personal statements or essays may be reviewed and scored to supplement the total.

Interviews and offers – No offers are made without interview. Interviews are conducted in person in the UK, the United States, and Asia. Applicants are normally assigned to their nearest location, although alternative preferences can be accommodated. The interview comprises of an MMI and an observed group exercise. Each MMI station is designed to assess a specific attribute and scored using a structured rubric. Interviewers receive training in rubric use and complete regular training in unconscious bias, equality, and data protection. The group task is similarly assessed using a structured rubric. Multiple assessors contribute to each session, and scores are averaged to create a total interview score. RVC graduates and veterinarians external to the RVC may act as interviewers after receiving appropriate training, improving the transparency of our processes and providing

additional external validity to our student selection. Program-level intake targets, including the balance of UK and international students, are set and agreed by the College Executive Committee (CEC). The Admissions team uses these targets, along with historical data on applicant uptake and conversion, to determine the number of offers to make.

Pre-interview scores are not carried forward. Offers are based solely on interview performance. This ensures that applicants are evaluated on the same terms at the point of decision, reducing the influence of prior educational advantages or disadvantages and promoting a fairer, more inclusive process. Pre-interview data may be used to differentiate between tied interview scores. Applicants who are successful at interview must still meet the academic requirements of their offer.

Correlations between interview scores and academic performance are monitored, including for those who do not complete the program. The RVC has not identified any significant indications of concern to date.

Widening Participation/Diversity

The RVC's Strategic Plan sets out our commitment to advancing equality, diversity and inclusion. As required by the OfS, the RVC has an Access and Participation Plan, which contains specific admissions targets for students from low socioeconomic groups and those from minority ethnic backgrounds. The plan also sets out the interventions and activities the RVC are undertaking and planning to undertake to support this, including school visits, open days, and virtual sessions. Bespoke interventions are offered to underrepresented groups, including pre-interview preparation and travel cost reimbursement for eligible UK applicants. Guidance for applicants on available support and the RVC assessment process is available on its website as are the Strategic Plan and Access and Participation Plan.

Disability, Mitigating Circumstances, and Fitness to Practice

The RVC is committed to equity and inclusion throughout the admissions process. Applicants are invited to disclose any mitigating circumstances, disabilities, or long-term health conditions that may have affected their application or could impact their participation in the process. Disclosures can be made at any stage and are considered individually based on the evidence provided.

Applicants who require adjustments to participate in the interview process are encouraged to notify the Admissions team in advance, so that reasonable adjustments can be made, where feasible in line with RVC obligations under the UK Equality Act 2010 and with reference to RCVS guidance. These may include adaptations to the interview environment, additional preparation time, or alternative formats. However, adjustments that would compromise the integrity or purpose of the interview station are not normally permitted. For example, additional response time in timed stations is generally not available, as real-time performance is integral to the competencies being assessed. This approach is designed to ensure that all applicants are supported fairly while maintaining alignment with the professional standards required for veterinary registration.

All offer holders are required to complete an occupational health screening to confirm their fitness to undertake the academic and clinical components of the program and to identify any support needs. Applicants with known conditions are encouraged to engage with the Disability Officer as early as possible to explore available support. Disclosed conditions that may have implications for fitness to practice are assessed by the RVC's occupational health provider. Fitness-to-practice concerns are only considered once the applicant has met the academic and non-academic criteria for interview so that no applicant is invited to interview and incurs travel or related costs, if a professional barrier would ultimately prevent an offer being made. Determinations are made in accordance with the most recent guidance from the RCVS, and no-one is permitted to enroll unless they are deemed fit to practice.

Training

All staff directly involved in admissions decisions receive dedicated training. This includes faculty and professional services staff and covers core areas such as:

- Evaluating international qualifications, delivered by UK ENIC
- Fraud detection and applicant verification
- Fees and funding (UKCISA guidance)
- Student visa and immigration regulations
- Unconscious bias awareness.

To ensure an equitable and consistent interview process, interviewers complete bi-annual equality and diversity training, as well as annual data protection training. New interviewers are required to watch a dedicated training video before participating in interviews. This video is also made available annually to returning interviewers as a refresher. In addition, short training videos are

provided for each interview station, which assessors are asked to watch in advance to familiarize themselves with the station's purpose and scoring criteria. When significant changes are made to the interview format, further training and briefing sessions are provided to ensure alignment and consistency.

7.3 List factors other than academic achievement used as admission criteria.

In addition to academic performance, applicants are assessed on a range of non-academic criteria:

- Relevant veterinary and animal handling experience (minimum required hours)
- Performance in MMIs, assessing attributes such as communication, ethical reasoning, resilience, and teamwork
- Responses to a structured supplementary questionnaire
- Contextual data (e.g., school background, care experience, POLAR classification, and socio-economic indicators)
- English language proficiency (if applicable, e.g., IELTS score of 7.0, no component below 6.5).

Further detail is provided in sections 7.1 and 7.2.

7.4 Complete Table A

See Appendix 7.1

7.5 Describe current plans for assessing the success of the selection process to meet the mission of the college.

The selection process is overseen by RAC, which ensures alignment with the RVC's mission, values, and strategic aims. A key focus of RAC is the ongoing evaluation of the fairness, equality, effectiveness and outcomes of admissions, including how well the process identifies students who will succeed on the program and contribute meaningfully to the veterinary profession. To assess the success of the process, RAC regularly reviews a wide range of data, including application and enrolment trends, demographic and contextual patterns, progression through admissions stages, interview scores and outcomes and recruitment activity and effectiveness. This information is reviewed at RAC meetings and forms part of annual strategic reporting and is used to monitor for potential bias or disproportionate outcomes and to evaluate whether goals are being achieved. Application outcomes are closely monitored, and the RVC continues to meet recruitment targets and progression benchmarks, suggesting that in practice the current process is effective.

The RAC also receives specific reports analyzing applicant demographics, behaviors, and experiences throughout the admissions journey. This identifies barriers, assesses the effectiveness of outreach strategies, and shapes future recruitment and selection approaches. In support of continuous improvement, findings are used to refine policies, scoring rubrics, and communications. Examples of recent changes include refinements to entry requirements, expansion of contextual scoring, and updates to assessment rubrics at both pre-interview and interview stages.

The RVC regularly rotates and updates the scenarios/questions used in its supplementary form and MMI interviews to minimize the risk of them being publicly available and to help maintain the integrity and equality of the assessment process. The MMI process is reviewed annually and updated as needed to ensure it reflects the attributes most predictive of success in veterinary education and practice. Recent adjustments include greater weighting for communication (now 24%), the introduction of a resilience and self-reflection station (11%), and an expanded role for the group task. Feedback from both interviewers and applicants also informs the evolution of the MMI process. The RVC has enhanced the applicant experience by providing clearer guidance and preparation materials ahead of interview, helping reduce anxiety and enabling more robust assessment of true potential.

Despite increased application numbers, the RVC has maintained rigorous selection standards. There is no evidence that increased applicant numbers have affected the quality of applicants. Student retention and progression, and graduate success, as indicated through graduate survey data and Veterinary Graduate Development Program (VetGDP – see section 11.1.4.1) outcomes documented by the RCVS, remain strong, demonstrating that the admissions process continues to identify those with the potential to thrive.

The RVC remains mindful of trends and data on student outcomes and experiences, using these, where possible, to reflect on whether the selection process continues to serve its intended

purpose. For example, in support of the RVC's APP, it tracks the performance of under-represented groups across each stage of the process. Progress against APP targets is reviewed by RAC as part of its oversight of admissions outcomes, helping ensure that diversity objectives remain central to ongoing evaluation and planning. Where disparities are observed, targeted interventions are introduced. These include interview preparation sessions, mock interviews and feedback, post-offer transition guidance and webinars and adjusted scoring through contextual information. These help maintain an equitable, evidence-informed selection process which is responsive to the needs of applicants and the profession.

7.6 Describe your policies and procedures for admitting transfer students who will receive a degree from your institution and state the number of transfer students admitted per year for the last five years.

The RVC does not admit transfer students.

Standard 8: Faculty

8.1 Complete Tables A and B. Assess the strengths of the faculty and support staff in fulfilling the college mission

Appendix 8.1 Table A shows a net increase in faculty over the five-year period. This increase has been predominantly driven by a desire to expand both our teaching and clinical activities. The RVC is able to attract, develop and retain high quality support staff in a range of roles, including those who work in direct support of its educational program, and those in other professional services departments.

8.2 State the current number of academic faculty (head count) who possess credentials as listed in Tables C and D.

Appendix 8.2 Tables C and D contain 299 Faculty, with a sum of 271.3 FTE.

8.3 Assess the challenges for your college in maintaining faculty numbers and quality.

Whilst recruitment and retention are strong at the RVC, challenges exist in certain specific academic disciplines (e.g., clinical pathology and diagnostic imaging) where there is a global shortage of suitably qualified individuals and where the RVC is competing directly with the private sector for talent.

At a university level, turnover is monitored and reported annually to the RVC's Finance & General Purposes Committee. These analyses show that turnover is low and is largely stable, with academic/academic clinician voluntary turnover at:

- 7.3% in the year to August 2022
- 3.0% in the year to August 2023
- 5.9% in the year to August 2024

The RVC's Employee Engagement Survey of summer 2024 provided data which suggested that it can expect a similarly stable level of retention in the coming years.

8.4 Provide information on the loss (what discipline/specialty) and recruitment of faculty (Table A).

Department	Gained/ Lost	2021	2022	2023	2024	2025	Total
Comparative Biomedical Sciences	Gained	0	0	3	2	1	6
	Lost	2	2	2	1	1	8
Clinical Science and Services	Gained	6	16	18	15	3	58
	Lost	11	8	7	19	4	49
Pathobiology and Population Sciences	Gained	4	5	5	5	0	19
	Lost	3	3	2	3	2	13
	Total Gained						83
	Total Lost						70

Appendix 8.1 Table A provides the numbers specialist faculty lost and recruited over the five-year period. The numbers of leavers and new recruits in any given specialist area are arguably too small to enable any meaningful insights however a breakdown of the faculty lost and gained by academic department are provided in the table below highlighting turnover is proportionally similar in all three departments.

8.5 Provide a concise summary of promotion/tenure policies, if applicable and the policy to assure stability for non-tenured, long-term faculty.

The RVC has defined promotion processes and criteria for its tenured faculty (Academics). Academic promotions are managed in two categories: i) Academics (Teaching Fellows, Senior Teaching Fellows, Principal Teaching Fellows, Lecturers and Senior Lecturers), and ii) Senior Academics (Readers, Associate Professors and Professors). All faculty are affiliated with an 'academic track' which, when aligned with an individual's specialist role, will determine the split of teaching, research, clinical teaching and scholarly duties the individual is required to perform. On the staff intranet there are explicit and detailed criteria for each career track at both Academic and Senior Academic levels.

The Academic Career Profiles Framework (ACPF) enables an individual, in consultation with their Head of Department, to create an Individual Career Profile (ICP) that recognizes career specialties and supports RVC and departmental strategic objectives. It also contains criteria which provide clarity regarding the standards expected at different academic levels.

The RVC typically employs only a small number of non-tenured faculty at any one time (Appendix 8.2 Table D shows tenure/non-tenure status of current faculty). For the majority of staff, both faculty and professional services, the RVC offers the security and stability of permanent open-ended contracts. However, all employees, regardless of position, must successfully complete a probationary period before confirmation in post.

8.6 Provide an estimate of the weight assigned to promotion/tenure and or compensation for teaching, research, service, or other scholarly activities.

There are multiple academic career paths for faculty, with details provided in the ACPF and the weight assigned to promotion and other success criteria will depend on the track a person is assigned to. A 70% Clinical Educator will have different objective criteria for promotion than those who are 50% teaching, and 50% research, for example. The academic track is determined by the Head of Department prior to recruitment and is specified in the recruitment documentation.

At the outset of the initial academic probation period, an ICP will be created which sets out the various levels of contribution expected. It outlines standards expected at each grade of appointment with separate sections for teaching, research and clinical (the term 'teaching' includes other associated activities such as assessment, marking and tutoring).

Each ICP is reviewed by the RVC's Academic Probation and Promotion Panel (APPP), the decision-making body whose purpose is to oversee and review probation and promotion processes for all faculty up to Grade 8 and to ensure that these are clear, robust, consistent and equitable.

The five track options are:

- Academic Research (70% research)
- 50% Teaching/Research
- 70% Teaching
- Research Clinician (50% Research)
- 70% Clinical Educator

The ICP will have both mandatory objectives for the grade and track-specific elements and additionally the individual and line manager will add between three and five personal SMART objectives appropriate to the level.

8.7 Briefly describe faculty professional development opportunities available in the college/university, including, but not limited to learning theory and instructional practices.

The RVC's Postgraduate Certificate of Veterinary Education (PG Cert VetEd) is compulsory for new faculty and is a pre-requisite for completing probation. The PG Cert VetEd also provides an accredited taught route to Advance HE (HEA) Fellowship, which demonstrates a personal and institutional commitment to professionalism in learning and teaching in higher education. Advance HE Fellowship is a globally recognized framework that supports the recognition and reward of excellent teaching and learning practices including an understanding of digital learning practices. The teams in Learning and Wellbeing provide staff training and development (e.g., Course design; technology-enhanced learning; how to support tutees). A range of asynchronous resources are available on the VLE including the Assessment, Learning and Teaching and the Supporting Students toolkits to support role-specific professional development needs. These ensure that staff are aware of best practice in course design, of institutional policies and practices relating to

learning and teaching and are confident in the use of technology to enhance teaching and learning. Departmental inductions cover specific topics and themes that new staff need to understand as part of their role.

In addition to the asynchronous resources, both whole institutional and program specific INSET days are offered on an annual basis to ensure staff are aware of current trends and best practice in providing an excellent student experience. Recent examples of INSET days are detailed in the table below.

Year	INSET day/webinar title
2025	Generative AI, Academic Integrity and Assessments
2024	Inclusive teaching: Supporting Different Facets of Diversity
2023	Reflection in Learning and Teaching: Thinking in New Directions
2022	What is Student Success?
2021	The Future of Assessment
2019	Blended Learning and Teaching

As part of the RVC's professional development offering, it runs a Management Development Program (MDP), which focuses on the process driven elements of a management role. This program is compulsory for all new starters Grade 6 or above and comprises such elements as appraisal, absence management, recruitment and selection, managing people and performance and introduction to finance. For those faculty members who have an interest and aptitude for wider leadership, the RVC has an 'Exploring Organizational Leadership course'.

The Continuing Professional Development (CPD) (Continuing Professional Development – RVC) unit offers high quality independent CPD for veterinarians and nurses from many areas of clinical practice. These CPD options include tutor-moderated intensive online learning, interactive online lectures, onsite ultrasound workshops and practical hands-on courses. These courses are available for RVC employees.

8.8 Describe the college's processes to annually monitor equity in compensation and career advancement

The RVC monitors equity in compensation in the following ways:

- Annual Gender Pay Gap analysis, with Annual Ethnicity Pay Gap Analysis (from 2026)
- Outcomes of the Special Reward Panel (awards one-off bonuses and pay rises for exceptional contribution)
- Outcomes of the Senior Staff Remuneration Committee (makes decisions regarding the remuneration of the RVC's most senior staff)
- Higher Education Role Analysis (HERA) job evaluation to ensure new and existing roles are graded and paid at the correct level.

Equity in career advancement is monitored through:

- The outcomes of the Academic Probation and Promotion Panel (APPP)
- The outcomes of the Senior Academic Probation and Promotion Panel (SAPPP)
- Professional development opportunities offered to all staff at all levels, underpinned by an annual appraisal system.

8.9 Describe current plans or major changes in program direction that would be affected by faculty retirements, recruitment and retention.

The RVC is fortunate in that there are few, if any, core curricular or clinical areas in which the institution is dependent upon a single member or small numbers of faculty to provide specific areas of the curriculum. This means that it is sufficiently resilient to withstand the departure of individual members of faculty. There are some areas where recruitment and retention has been historically challenging. However, through flexible employment opportunities, the RVC is still able to ensure all core didactic teaching is delivered by its own members of faculty. It does not, therefore, foresee any need to change current plans or modify the direction of its program.

8.10 Describe measures taken to attract and retain a diverse faculty.

The RVC provides a range of benefits and services to support all its staff. These are not only in line with its values but also serve as effective attraction and retention tools, which are needed to remain a competitive employer:

- The RVC states its commitment to equality and diversity in vacancy adverts
- A flexible working guide outlines the commitment to considering flexible working applications
- Prayer rooms on both campuses meet the needs of multiple faiths
- Parent feeding rooms on both campuses provide facilities to support parents returning to work
- A comprehensive list of policies and information to support its employees with caring responsibilities, which can be found on its family-friendly information page
- A range of guides and tools which can be found on its menopause at work webpage
- Free access to its onsite gyms to support the health and wellbeing needs of its staff
- Access to a free employee assistance program (Care First), providing counselling and information on topics such as bereavement, caring for elderly relatives and managing personal finances.

The Employee Engagement Survey (2024) indicated that the majority of RVC employees are satisfied with their total benefits package, and that the majority would still like to be working at the RVC in two years' time.

8.11 Describe how the college's commitment to diversity, equity, and inclusion impacts:

a) The training of faculty search committees (e.g., Guidelines from Human Resources, implicit bias training, etc.)
b) Promotion/tenure policies
c) Process to annually monitor equity in compensation, benefits, and advancement.

A management toolkit on recruitment supports managers and in order to ensure RVC recruitment follows a fair and transparent process, all recruitment panel members are strongly encouraged to attend the RVC recruitment course. It is a compulsory requirement for all chairs of recruitment panels and includes the following:

- The legislative framework in the context of recruitment and an understanding of unconscious bias
- How to develop competence and evidence-based questioning to secure the best candidate
- The RVC's status as a disability confident employer and what this means in practice
- The key principles in the different stages of the recruitment process, e.g., language in adverts, person specifications, and the most appropriate composition of panels.

Equality Impact Assessments are carried out for processes relating to the probation and promotions of faculty, and for reward processes including the SRP and SSRC as described in 8.8.

8.12 Describe programs for on-campus delivery of curricular content by individuals not employed full time by the institution (other than occasional guest lecturers), including subjects taught. Estimate the percentage of core curricular content delivered in this way.

External lecturers are used in the BVetMed curriculum when they can provide expertise not readily available from employed faculty. These lecturers are selected by the relevant strand leader in conjunction with the course director, are briefed accordingly and must provide appropriate learning outcomes as would apply to any other teaching session. A period of Elective teaching is offered for 2 weeks in Year 5 where more in-depth coverage of a variety of material is delivered. Some of this content is delivered by external speakers, usually by established partners who work with us in delivering rotations. For example, a specialist poultry veterinarian – already collaborating with the RVC in delivering the poultry tracking rotation – also contributes to teaching within the elective course. Additionally, the President and officers of the RCVS deliver an afternoon session of lectures. The amount of core curriculum teaching delivered by external speakers is no more than 1.5% of teaching hours.

8.13 Describe the role of interns, residents, and graduate students in teaching and evaluating veterinary students

The RVC utilizes research students, interns and residents to deliver teaching. To support them and ensure that teaching standards are maintained it delivers the Teaching and Learning in Higher Education (TLiHE) program. For interns and residents this is a compulsory program delivered in Year 1 of their studies. Any teaching undertaken by interns and residents is under supervision by a faculty member. Any PhD students involved in teaching must undertake the TLiHE if they intend to teach for more than six hours per year. The program aims to develop a conceptual approach to veterinary education and enhance the proficiencies of those who

undertake the course in terms of skills, practices and attitudes as competent and reflective veterinary and/or allied sector teachers. By the end of the program, students should be able to develop appropriate aims and learning outcomes to a teaching session, design teaching sessions and learning activities using relevant educational theory, course development and delivery tools and offer effective feedback and support to students.

Interns and residents are permitted to participate in undergraduate and, where appropriate, postgraduate teaching, under observation, as requested by their supervisor or the Program Director. PhD students do not deliver lectures except in specific and exceptional circumstances and never for core and mainstream topics.

8.14 For Table D, for subject areas in which a faculty member does not have advanced training (such as board certification or an advanced degree) in their area of curricular responsibility, describe qualifications, including education, training, experience, professional development, or a combination thereof, for subject matter expertise in the area the specific faculty member provides education in a narrative.

All faculty with significant curricular responsibilities have either an advanced degree or board certification in their area of responsibility, where such advanced qualifications exist. In the small number of areas where such additional expertise is not recognized by an advanced qualification (e.g., Primary Care Practitioners) those appointed to teach have some advanced practitioner qualifications and significant experience in their area of expertise.

Standard 9: Curriculum

9.1. State the overall objectives of the curriculum and describe how those objectives are integrated into individual courses.

The veterinary degree awarded by the RVC is referred to as the Bachelor of Veterinary Medicine (BVetMed). There are two degree pathways: a five-year program of study which can be undertaken by suitably qualified school-leavers and is also undertaken by some graduate entrants and, a four-year program, referred to as the Graduate Accelerated BVetMed (GAB) program, undertaken exclusively by graduate entrants who have previously completed a bachelor's level degree in the biological sciences.

There are four over-arching aims and objectives of the BVetMed curriculum:

- To develop the knowledge, skills, and attributes to promote and enhance animal health and welfare, and public health through scholarship, scientific and professional endeavor, and veterinary practice
- To equip students with the knowledge, skills, and attributes to meet the current and future challenges of all aspects of the veterinary profession
- To provide a learning environment that appreciates diversity, promotes excellence in learning and teaching, and embeds a desire for life-long learning
- To satisfy the requirements determined by the Royal College of Veterinary Surgeons (RCVS), the American Veterinary Medical Association (AVMA), and the European Association of Establishments for Veterinary Education (EAEVE).

These curricular aims and objectives are augmented by fifteen program level outcomes which are detailed in the curriculum digest (Appendix 9. Each year of study has year level outcomes which build incrementally as the program progresses.

The BVetMed program has a 'spiral' curriculum based on the concept of "strands" which are visited on multiple occasions. These strands run throughout the didactic part of the course (teaching that occurs before entry to the clinical rotations in the last two years of the program. Some strands are based on body systems, whereas other 'non-system' strands cover topics that either are not specifically system related, are relevant to basic sciences, or focus on diseases of multiple systems. There are nine 'system' strands, which are visited two or three times during the 5-year program. Teaching begins with the basic sciences, emphasizing normal structure and function, progressing to teaching of the clinical sciences, emphasizing the understanding of diseases, their diagnosis and management, and ultimately preparing students for clinical rotations. The teaching and assessment are delivered at an increasing level of complexity in each year in preparation for workplace-based rotational teaching, which is reflected in the increasing complexity of year-level outcomes.

The system strands are:

- Locomotor
- Neurology Ophthalmology and Special Senses
- Cardiovascular and Respiratory System
- Reproduction
- Urinary
- Alimentary
- Endocrine
- Lymphoreticular and Haemopoietic
- Skin.

The non-system strands are:

- Population Medicine and Veterinary Public Health including Animal Husbandry (PMVPH)
- Principles of Veterinary Practice (PVP)
- Principles of Science (POS)
- Integral and Applied Anatomy
- Scholarship and Evidence-Based Veterinary Medicine (SEBVM)

Within each year of the program, each strand taught has strand level learning outcomes that align to session-level learning outcomes (lecture, practical, directed learning etc.). Strand level outcomes are mapped to relevant program-level outcomes. The strand level learning outcomes are also mapped to AVMA CoE competencies. This ensures that the relevance of each learning outcome is clear and helps all graduates achieve the competencies by the time of graduation. The RVC maps all its learning objectives using curriculum mapping software “Sofia”.

The GAB is a 4-year pathway designed for graduate entrants. The first year of study for GAB students replaces the first two years of the 5-year BVetMed program. This bespoke transition year is designed to build on the existing foundational knowledge that students bring from their previous degrees (often biomedical sciences, animal sciences and pre-veterinary degrees) and focuses on strengthening and developing key knowledge and skills to enable students to succeed in the later years of the BVetMed program. The unit and module structure in the first year of GAB aligns with the strand-based system of the 5-year program, whilst teaching and assessment methods also mirror those on the 5-year program. After a single year of study, students on the GAB pathway join students on the 5-year program for the same final three years of their degree, referred to as Years 3, 4 and 5, hereafter.

Strand-based didactic teaching is concluded in the first term of the fourth year of the BVetMed after which students undertake a period of clinical experiential learning lasting approximately 14 months. During this period of hands-on clinical education students undertake at least 26 weeks of “core” and “tracking” intramural rotations (IMR) and complete 16 weeks of “clinical extramural studies” (c-EMS – equivalent to externships) ensuring that they each experience more than 40 weeks of hands-on clinical education. They also complete an eight-week research project.

The curriculum is centrally managed by the “Undergraduate Medicine Course Management Committee” (UGCMC). The UGCMC is chaired by the Undergraduate Associate Dean for Teaching and Learning. Membership includes the course (program) director, year leaders, strand leaders and heads of academic departments, all of whom are members of faculty. Other members include student representatives, external representatives and support staff. The majority of committee members are members of faculty. Faculty membership of the committee is by virtue of the curricular offices held by the individual faculty members. Turnover of committee members therefore occurs due to turnover of the members of faculty holding curricular responsibilities.

Institutional quality assurance practices mandate that the course is subject to an annual quality review process (an Annual Quality Improvement Review, or AQIR) with a more substantial periodic review of the entire curriculum being undertaken at least every six years. The AQIR and periodic review processes are among the ways in which curricular overlaps, redundancies and omissions can be identified. The aim of the periodic review process is to review “the continuing validity, relevance and currency of the programs aims, objectives, and content.” Annual and periodic reviews are informed by data gathered from various sources (see 9.3 below). The most recent periodic review of the BVetMed program was undertaken in February 2024.

9.2. Describe major curricular changes that have occurred since the last accreditation.

At the time of the last accreditation visit in 2018, the RVC was planning a significant revision of the BVetMed curriculum. The main aims of the curriculum revision were outlined in the 2018 self-study report. The new curriculum roll-out began with the first year of the 5-year program in 2021. This means the last cohort of students to graduate from the old curriculum did so in 2025 and the graduating year of 2026 will be the first cohort to graduate from the new curriculum.

The overall aims and structure of the curriculum were not changed but several innovations were introduced:

- Development of a “Scholarship and Evidence-Based Veterinary Medicine” strand
- Greater use of “Blended-Learning” approaches where appropriate
- Introduction of “reflect and review” weeks allowing students to consolidate and reflect on their learning
- Improved focus on professional skills in the “Principles of Veterinary Practice” strand
- Restructured rotation experience with the core rotations occurring in four “core blocks” and the introduction of preparatory and debrief weeks
- Greater focus on summative assessment of competencies during clinical rotation blocks
- Introduction of a longitudinal portfolio for students to keep a record of their achievements.

In parallel with the change in curricular structure, there have been modifications to the ways in which students are assessed. Current assessment practices are outlined in 9.8 below.

9.3 Describe the process used for curriculum assessment (including course/instructor evaluation) and the process used to assess curricular overlaps, redundancies, and omissions.

Multiple methods are employed to assess the curriculum, and feedback is gathered from various sources, including:

Feedback from current students:

- Student surveys relating to recent periods of teaching, e.g., strand or termly surveys
- Student representatives on UGCMC
- Student panels
- Annual or biennial national and international student satisfaction surveys.

Feedback from internal and external faculty:

Annual strand and year reviews conducted by faculty

- External examiners’ reports
- Curriculum mapping processes.

Feedback from recent graduates and employers:

- Graduate surveys
- Employer feedback (obtained through RCVS Veterinary Graduate Development Program).

Evidence of student achievement in internal and external assessments:

- Student achievement in internal assessments – outcomes of examination boards
- Student achievement in external assessments including the NAVLE.

These various sources of feedback are considered as part of the annual and periodic review processes which include:

- Annual quality improvement review (AQIR) processes
- Periodic reviews with external input.

  AQIRs and Periodic reviews also identify the need for curricular revision which will feed back into the UGCMC and other curriculum revision processes.

9.4 Describe the strengths and weaknesses of the curriculum as a whole.

The RVC’s recent curriculum revision has built on the strengths of its program, which has resulted in a curriculum with the following enhancements:

- It is competency based with clear mapping to accrediting bodies’ competencies
- Strong curriculum integration; both vertical (between years) and horizontal (within years)
- The spiral curricular structure ensures revisiting of topics building on previous knowledge while introducing more advanced clinical concepts
- Focus on collaborative problem solving, and development of analytical and reasoning skills
- A high number of practical learning opportunities

- A strong focus on scholarship and evidence-based veterinary medicine.
  The emphasis on problem-solving, competencies and retrieval and utilization of information has redirected focus away from the rather narrow objective of retention of information. The breadth and variety of assessment methods used may result in students who are less well prepared for major summative single best answer assessments such as the NAVLE.

9.5 Describe preceptor and externship programs (including the evaluation process).

The BVetMed program culminates in the clinical rotation phase of the program. During this period students undertake at least 26 weeks of clinical rotations which are equivalent to "preceptorships". They also complete 16 weeks of c-EMS, which are equivalent to externships.

Clinical rotations are undertaken either in facilities owned and managed by the College or in facilities owned by third parties that have entered into a contractual agreement with the College to provide clinical teaching and undertake student assessment (see Standard 4). Members of staff at these facilities are employed and/or trained by the RVC to undertake this work. All rotations have clearly stated learning objectives (mapped to Program Outcomes and AVMA CoE competencies) and represent opportunities for students to receive instruction and obtain practical experience with a wide range of species in different clinical settings.

Rotations are classified as "core rotations" which must be undertaken by all students and "tracking rotations" which students elect to undertake. There are 22 weeks of core rotations and four to six weeks of tracking rotations. A full list of the core and tracking rotations offered in the current academic year (2025/26) is outlined in the Curriculum Digest. Students on rotations are assessed and must pass each rotation that they undertake. Students' performance in each rotation will be graded according to published RVC criteria.

Students' levels of clinical competence in 14 aspects of clinical performance are assessed at the completion of each core block of rotations and these are aligned with Professional Activity, Practical Skills and Clinical Reasoning and Knowledge. (For more detail see Standard 11).

All students undertake extramural studies (EMS). In the earlier years of the course (before year 3 (of 5)) students undertake 10 weeks of animal husbandry EMS (AHEMS) working with normal animals. Following entry to year 3, 26 weeks of clinical-EMS (c-EMS) must be completed prior to graduation, this is a requirement of the Royal College of Veterinary Surgeons (RCVS). Approximately 16 weeks of c-EMS are undertaken after entry to the hands-on clinical phase of the program. All c-EMS is carried out with external placements, predominantly veterinary practices but in some cases, time may be spent in other settings such as research laboratories, veterinary public health or government institutions. All c-EMS must take place under the direct supervision of a qualified veterinarian or team of veterinarians.

One member of faculty is the designated c-EMS Director and two are designated c-EMS Co-Directors; for AHEMS there is a director and deputy director. These individuals work as part of a wider team, which includes the BVetMed course director. There is also a dedicated team of administrative staff to coordinate the processing of student placements.

Detailed instructions regarding c-EMS are provided to students by the faculty responsible for EMS and can be accessed through the VLE. During the first 8–14 weeks of c-EMS, placements must be undertaken in non-specialist practice in what is called the 'Preparatory Phase'; typically, this is undertaken before students progress to rotations. During this period, students familiarize themselves with the clinical workplace environment, with emphasis on aspects such as history-taking, record keeping, drugs, equipment and practical clinical skills. At the start of rotations students move to the 'Practical Phase' of c-EMS where they will be more directly involved with clinical cases and actively developing their practical clinical skills. At this stage, students may elect to spend time in more specialized practices to gain further experience of more advanced types of clinical work or undertake c-EMS in professional and non-practice environments.

Individual students are responsible for organizing their own placements within the rules that are determined by the RCVS, and locally by the RVC. A student must provide full details of any placement in advance of receiving permission to attend. A satisfactory approach to health and safety and appropriate insurance must be confirmed and verified by Academic Registry staff. Students planning placements overseas must ensure that insurance is in place to protect them in case of any accident. Placement providers receive a letter of agreement in advance of any student placement, setting out roles and responsibilities of both the practice and the student. One veterinarian is appointed as a mentor for the student. This mentor will have overall responsibility for

supervision of the student and provision of feedback on the student's performance while on placement. The placement completes a standardized online assessment form to confirm attendance and assess and give feedback on student performance. This form must be completed and returned to the RVC in order for the time spent at the placement to be counted. Feedback forms are sent to the student's personal tutor. If the feedback is largely positive, the tutor is asked to forward this directly to the student. If negative comments or concerns are raised, the student will receive more detailed feedback. In more serious cases this may result in a formal "cause for concern" being recorded for the student. If a student receives more than two such reports, then further support may be provided through an SPD meeting.

Following completion of rotations and c-EMS, further evaluation of students' practical skills is undertaken with OSCE examinations. Students also sit a finals written examination which must be passed before graduation.

9.6 Curriculum Digest

A curriculum digest can be found in Appendix 9.

9.7 Describe current plans for curricular revisions.

The RVC is currently completing a major curriculum revision and has no further plans for significant curricular change in the next few academic years. There are, however, plans to more fully integrate the student portfolio with the introduction of a "student record of achievement" into Years 1 and 2 of the BVetMed and the GAB year. The RVC also plans to refine use of OSCEs, with the development of longer, more integrated OSCEs to be used as part of the finals examination. These will have OSCE stations of greater duration constructed in such a way as to test more complex combinations of skills.

9.8 Provide a description of the testing/grading system (scoring range, pass levels, pass/fail) and the procedures for upholding academic standards.

The 5-year BVetMed curriculum consists of a largely didactic (3 years) and experiential/workplace-based learning (2 years) phases. Progression requirements vary according to the type of assessment being employed. Written examinations have a numerical threshold that must be reached which may be standard set. Practical examinations are often graded as pass/fail or competent/not yet competent. All students in each year of study undertake the same assessments and are judged against the same criteria. Assessments vary in nature to ensure constructive alignment during the program of study.

In the early years (Years 1–3 for the 5-year pathway and the first two years of the Graduate Accelerated pathway), there is assessment of knowledge and understanding (with single best answer questions, e.g., MCQ), analysis and application (e.g., problem-solving questions) and scholarship (e.g., critically appraised topic report) as well as communication skills (e.g., ISF orals) and practical skills (e.g., animal handling DOPS). During Years 4 and 5, clinical competencies are assessed using various methods such as portfolio-based personal and case-based reflections, DOPS and OSCEs. There are 'capstone' final assessments of clinical and professional reasoning and practical skills as well as a research project report. (For more detail see Standard 11).

Assessment outcomes are ratified by examination boards. At such boards, student data are anonymized to avoid bias in assessment decisions. Marking schemes are published for staff and students, such that the grading system is explicit to all. Internal (e.g., sample marking and reliability statistics) and external (e.g., external examiner oversight) quality assurance processes, including standard setting where necessary, ensure that students are treated equitably and that academic standards are upheld.

The following links point to institutional documents that are publicly available and outline the RVC's approach to different aspects of assessment.

- Link to assessment and award regulations (AARs):
- Link to document: How Exams are Marked:
- Link to Feedback Policy:
- Link to Regulations for Boards of Examiners:

9.9 Describe the opportunities for students to learn how different cultural and other influences (e.g., ethnic origin, socio-economic background, religious beliefs, educational level, disabilities and other factors) can impact the provision of veterinary medical services.

Students are given many opportunities to learn about different cultures and other influences on the provision of veterinary medical services. One of the strand-level aims and objectives for the Principles of Veterinary Practice strand is that students should "apply cultural sensibility to develop diversity and inclusivity within professional problem-solving and decision making." This is introduced through classroom-based teaching and directed learning exercises in BVetMed Year 3. It is further emphasized during intramural rotation teaching which illustrates the spectrum of veterinary care from tertiary-level referral hospitals through first-opinion veterinary practices to charity practices and shelters. Experiencing practice within these varied settings allows students to participate in the delivery of contextualized care and encounter clients across a breadth of cultures, ethnicities, socio-economic backgrounds, religious beliefs, educational levels and those with disabilities.

The RVC has recently established a "Cultural Competency" working group to identify areas of the curriculum where content could be added, amended, or adjusted to aid the development of a well-rounded understanding of the possible influence of different cultures, beliefs, values and perspectives on the ability to deliver veterinary care. The group reports to the CMC. An example of a topic discussed at a recent meeting, which often results in differences of opinion within a diverse student body is religious slaughter.

The LTAC, to which the CMC reports, has a standing agenda item to consider matters relevant to Equity, Diversity and Inclusion as they relate to learning, teaching and assessment.

9.10 Describe opportunities for students to learn principles of business management skills in veterinary medicine, and opportunities to learn personal financial management (e.g., coursework in financial literacy in the curriculum).

Principles of business management are an integral component of the "Principles of Veterinary Practice" strand. In Year 3, students have lectures covering these topics including specific lectures directed learning sessions and additional reading on veterinary business and financial management and marketing.

Standard 10: Research Programs

10.1 Describe up to five programs of research emphasis and excellence and specifically focus on how these programs integrate with and strengthen the professional program.

Research is at the heart of the of the RVC and 'discovery' is one of the three pillars at the core of the RVC's mission. The RVC's ambitions for research are outlined in the RVC Strategic Plan and the Research and Innovation Strategy. The RVC's research is organized under two main themes: "comparative physiology and clinical research" and integrated research into "livestock and food systems". These encourage a multidisciplinary approach integrating basic scientists, clinical researchers and students in addressing problems through a One Health approach, an ethos supported by the RVC's recognition by the World Organization for Animal Health and the Food and Agricultural Organization of the United Nations and partnership with the World Health Organization Influenza Reference Centre.

Examples of research in comparative physiology and clinical research include:

- The cardiovascular cell biology group study endothelial cells, cardiac cells, leukocytes, and platelets and explore vascular communication, regeneration, and disease through in vivo models in humans and animals
- The renal biology group researches factors associated with progression of kidney disease using *in vitro* and *in vivo* models, with emphasis on endothelial dysfunction, diabetes, inflammation, and glomerular filtration. A key area is naturally occurring chronic kidney disease (CKD) in cats, studied as a model for fibrosis. Research includes mineral bone disorder, hypertension, and hyperthyroidism, with strong clinical collaboration and emerging genetic insights
- The Veterinary Companion Animal Surveillance System (VetCompass™), launched in 2007, is a research program that uses pseudonymized electronic veterinary clinical records to generate evidence aimed at improving companion animal health and welfare. VetCompass covers over 29 million animals across all species from more than 1,500 UK

participating veterinary practices. Published evidence feeds into the RVC curriculum where appropriate. Undergraduate BVetMed students can access VetCompass data for their final-year Research Project. As of April 2025, VetCompass has generated over 150 peer-reviewed publications, with 48 of these including RVC undergraduate co-authors; demonstrating strong integration of research and education, and providing students with meaningful, real-world clinical research experience.

Examples of research in livestock and food systems include:

- Investigation of antibiotic-resistant bacteria in seafood products and risk of exposure to these by consumers in the UK
- RVC-led research on pre-harvest strategies to mitigate the risk of Campylobacter colonization of poultry has informed UK industry policies such as the avoidance of 'thinning' in poultry farms, which are likely to have contributed to a decrease in the prevalence of contamination in retail chicken.

The results of RVC research are communicated to students through inclusion of research data into lectures, practicals and directed learning sessions throughout the professional program thus ensuring the curriculum is "research-led". For instance, in the Urinary and Principles of Science Strand, teaching is given on the management of hypertension based primarily around RVC published research https://journals.sagepub.com/doi/10.1177/1098612X17693500. Furthermore, researchers in all research areas regularly supervise final year research projects undertaken by RVC clinical veterinary students (see below).

Pedagogical research is undertaken by members of the Lifelong Independent Veterinary Education (LIVE) Team and by members of RVC faculty studying for postgraduate qualifications in Veterinary Education including the RVC's MSc in Veterinary Education. This research is often based on, and results directly influence the delivery of, the BVetMed curriculum. This includes a project exploring clinical reasoning in production animal practice leading to the development of a clinical problem framework now embedded in teaching and assessment; research on the effective assessment of reflection which has influenced the support provided to students and assessors across the program; the development of teaching approaches to cultural competence now integrated into the Professional and Veterinary Practice (PVP) strand and a needs analysis within the shelter medicine rotations which led to the creation of a tool enhancing student engagement and improving feedback from assessors during workplace learning.

10.1.1 Provide a description (one page or less) of measures of faculty research activity, apart from publications and grants enumerated in Tables 10.3.2, 10.3.3, and 10.3.4; include faculty participation and presentation of original research in scientific meetings; involvement of faculty in panels, advisory boards or commissions; and national and international research recognitions received.

The Research Excellence Framework (REF) is the UK benchmark for research excellence. In the most recent REF (2021), 85% of faculty at the RVC were returned as research active and 88% of RVC research was rated as world-leading (4*) or internationally excellent (3*). The high number of research active faculty combined with the high quality of the research undertaken resulted in the RVC receiving the highest "indexed Research Power" in the United Kingdom in the field of "Agriculture, food and veterinary sciences". (https://www.timeshighereducation.com/news/ref-2021-agriculture-food-and-veterinary-sciences)

Fellowship of the Royal Society is a highly prestigious award granted by the Royal Society of London to individuals who have made a substantial contribution to the improvement of natural knowledge, including medical science. There are currently four members of RVC faculty who are Fellows of the Royal Society: Professors Alan Wilson, John Hutchinson, Joanne Webster and Oliver Pybus.

Many of the RVC's faculty are awarded national and international research recognitions and prizes: Recent examples include:

- Dr. Edd Knowles won the 2023 Peter Rossdale Equine Veterinary Journal Open Award for impactful research improving equine veterinary practice and knowledge.
- Professor Jonathan Elliott was awarded Honorary Member status in Small Animal Internal Medicine by the American College of Veterinary Internal Medicine.

- Dr. Sophie Mahendran won the British Society of Animal Science Presidents' Prize for her PhD on behavior and housing in calves.
- Dr Debbie Guest was awarded the prestigious Pet Plan Charitable Trust Veterinary Research Award for the most valuable research project undertaken at a Veterinary School or Animal Health Trust in the last five years.
- Professor Rosanne Jepson received the Blaine Award for outstanding contributions to the advancement of small animal veterinary medicine or surgery.
- Professor Stuart Reid was elected to the National Academy of Medicine (USA) in 2019.

RVC faculty are also represented on numerous advisory boards and research panels across the breadth of veterinary science. Recent examples include:

- Professor Damer Blake is a member of the BBSRC Pool of Experts (Pool of Experts – UKRI) and BBSRC/NC3Rs 'Non-animal technologies' funding assessment panel.
- Professor David Brodbelt sits on the Morris Animal Foundation Golden Retriever Lifetime Study Scientific Advisory Board 2025
- Dr Lucy Brunton is a member of the UKRI interdisciplinary assessment college
- Dr Julian Drewe is a member of the European Food Safety Authority Panel on Animal Health and Welfare
- Professor Jonathan Elliott sits on the PetPlan Charitable Trust Scientific Committee and is a UKRI Future Leadership Fellowship panel member
- Professor Patrick Lewis is a member of the BBSRC fellowship and training committee

RVC faculty are frequently invited to speak at National and International conferences across a range of scientific themes. Recent examples include:

- Professor Joanne Webster gave her Leeuwenhoek Medal Prize Lecture on "Beyond the microscope: uncovering the secret strategies of a parasitic worm." To The Royal Society, UK October 2024
- Professor Damer Blake gave a keynote presentation at the WVPA Africa/Middle East regional congress in Cairo "Coccidiosis: Separating Susceptibility to Eimeria Tennelle Infection from Pathology to Improve Control" 2024
- Professor Dirk Werling was a keynote speaker, hosted by Joint Centre of Nuclear Techniques in Food and Agriculture in Vienna: "Novel Test Approaches to Determine Efficacy and Potency of Irradiated and Other Vaccines" and was also a keynote speaker and Session Chair at International Pig Veterinary Society in Leipzig (Germany) 2024

10.2 Describe courses or portions of the curriculum where research-related topics are covered (for example – literature review/interpretation, research ethics, research methods or techniques, and study design).

Research related topics are covered in a dedicated strand, the Scholarship and Evidence-Based Veterinary Medicine strand (SEBVM), within the BVetMed curriculum. The strand spans all five years of the course and aims to equip undergraduate veterinary students with the quantitative and qualitative scientific skills necessary for a career practicing evidence-based veterinary medicine or as a foundation to pursue a career in research. The curriculum generally fosters scientific reasoning, critical analysis, and research skills. It builds scientific reasoning progressively through lectures, directed learning (DL), and formative and summative assignments. Key assessments include the Extended Essay in Year 1, Critically Appraised Topic Report (CATR) in Year 2 and a Research Project (RP) or Critiqued Scientific Review (CSR) in the final years.

In the first two years, students receive training in literature searching, academic writing, information quality, plagiarism, referencing, and database management. They also develop statistical analysis and population research skills through lectures and DL sessions. Assessment of critical analysis and scientific writing is embedded in end-of-year evaluations, including a compulsory formative 2,000-word essay in Year 1 and a summative 4,000 word CATR in Year 2. In the CATR students critically evaluate 6 to 10 peer-reviewed papers with tutor support.

Students entering via the GAB pathway, who already possess a bachelor's degree, join the SEBVM strand in Year 3. The students on the GAB pathway are considered to have fulfilled the SEBVM requirements of Years 1 and 2 by virtue of the research component of their undergraduate studies.

In Year 3, all students receive teaching related to study design, evidence-based veterinary medicine, and diagnostic test performance, preparing them for independent research. The SEBVM culminates with all students undertaking a research project or CSR which they complete during the final two years of their studies.

10.2.1 Describe/list the current opportunities for participation in research, including summer research programs (Merial, NIH, Howard Hughes, etc.), academic year programs (NIH fellowships, industry funded, curricular time allowed for research), student employment in research labs and projects, and individually mentored research experiences.

In the final two years of the course, every BVetMed student undertakes a mandatory research project dedicating at least eight weeks to research activity. They may choose between a traditional qualitative or quantitative project or a CSR using the 'PICO' format, which requires analyzing at least 60 publications. These projects align with Level 7 standards of the UK Framework for Higher Education Qualifications, comparable to a master's degree. The research project or CSR is a key component of the BVetMed Finals Part 3 exam, which students must pass to graduate. Students are allocated a member of faculty to act as their project supervisor and mentor. Typically, members of faculty support 3 – 5 students per year allowing them to individually mentor a small number of veterinary students annually.

All students have 8 weeks of dedicated curricular time to spend conducting their project and some students elect to spend an additional 6 weeks on their research project, instead of undertaking tracking rotations. Students engaged in laboratory-based projects interact with master's and PhD students, thereby obtaining insights into academic career pathways. Many students go on to present their projects at scientific or clinical conferences or publish in peer-reviewed journals.

Beyond undergraduate studies, BVetMed graduates frequently continue research as part of Senior Clinical Training Scholarship (residency) programs, where completing a project is required for their MVetMed or Diploma credentials. Other graduates pursue research degrees such as MRes or PhD programs at the RVC or elsewhere (see progression statistics in Table 11D). The emphasis on research and evidence-based practice throughout the curriculum ensures graduates are well-prepared for lifelong learning and professional development in veterinary medicine.

10.2.2 Describe college research seminars and presentation for veterinary medical students, including the number of internal and external speakers, endowed research lectureships, veterinary medical student research seminars, veterinary medical student poster presentations, and college research days and awards and presentations made by veterinary medical students at scientific meetings or seminars at external sites.

A faculty research seminar takes place weekly during term time, featuring invited national and international speakers. All members of the RVC, including BVetMed students, are able to attend these. In the academic year 2024/25 there were 28 research seminars, 20 of which featured external speakers. The seminars are usually given in person but also available to access synchronously remotely. Subject to the presenter providing consent, recordings of the seminars are also available for at least 12 months via the RVC intranet.

There are also weekly internal research seminars at which PhD and master's students present their research and Senior and Junior clinical training scholars (residents and interns) present their research at separate weekly seminars. These seminars are open to all postgraduate and veterinary undergraduate students, both in person and via Teams and provide interested undergraduate students with an opportunity for further valuable exposure to research being undertaken within and outside the RVC.

The RVC runs an annual Postgraduate Research Day where RVC postgraduate students present posters and abstracts to showcase research being undertaken at the RVC.

Many veterinary undergraduate students present findings from their research projects at national and international conferences through oral or poster presentations. When their research contributes to a scientific publication, they are credited as authors. LTAC receives an annual report on student research, including details of presentations and meetings and publications including students as co-authors.

Students run their own societies through the Students' Union, some of which have a clinical and research component. Examples include:

- The Zoological Society (https://www.rvcsu.org.uk/clubs-socs/zoosoc/) which is one of RVC's largest societies and offers RVC students an experience in the exotics field to supplement their interests.
- The Student Veterinary Emergency and Critical Care Society (https://www.rvcsu.org.uk/clubs-socs/sveccs/) offers a range of events including organizing monthly events on topics that go beyond what is taught in the classroom, such as case-based and interactive discussions and seminars.

10.2.3 Describe efforts by the college that facilitate the link between veterinary medical student research and subsequent or concurrent graduate education, and that enhance the impact of college research on the veterinary professional program.

The RVC facilitates links between veterinary medical student research and graduate education in a number of ways. These include opportunities for motivated students to engage in research while studying on the BVetMed program, additional to those activities undertaken by all students outlined above.

- Students on the 5-year BVetMed program can apply to intercalate and they are actively encouraged to do so by the RVC. Students who anticipate at the time of their application to the RVC that they will wish to intercalate can apply to undertake a 6-year BVetMed with an intercalated bachelor's degree (RVC Undergraduate Prospectus 24-25). Intercalation involves students interrupting their studies for a year in order to complete a one-year bachelor's degree. This is most commonly undertaken between the second and third year of study. Typically, between five and ten students make this choice annually. Students may choose to study on courses offered at the RVC such as the intercalated BSc in Comparative Pathology or may pursue degrees offered at other institutions. Occasionally students may intercalate to undertake a master's degree, or even a PhD while studying to achieve a BVetMed. However, concurrent DVM/master's or DVM/PhD programs are not offered at the RVC.
- BVetMed students can undertake vacation studentships. Some studentships are supported by funds available through the RVC's charity, the ACT, while others may be externally sponsored.
- Students can elect to undertake "Research Tracking". Students who choose to do this will dedicate the six weeks during which they otherwise would have done tracking rotations, to undertaking an extended research project. This will result in them spending 14 weeks undertaking the project instead of the normal eight.
- Where possible the RVC will facilitate opportunities for students to take part in research at other institutions such as the Cornell Leadership Program. This may require significant reorganization of a student's final year rotation schedule and is done in order to allow students to access these prestigious opportunities.

A proportion of BVetMed students go on to study advanced degrees involving research following completion of their veterinary degree program. Table 11D reports graduate outcomes including the numbers of graduates who were in advanced academic training 15 months post-graduation. However, those data do not capture students who choose to pursue further research at a later time in their careers.

BVetMed students work directly alongside Residents and Interns studying advanced degrees at the RVC. They are also likely to encounter MRes and PhD students. Over the last three years an average of 150 research students have been registered at the RVC at any one time, with approximately 140 PhD students and approximately 10 MRes students. In the earlier years of the curriculum BVetMed students may encounter PhD students who have trained to be "Student Success Coaches". All PhD students can become Student Success Coaches by undertaking a period of training in coaching and proactive skills development. The exposure of BVetMed students to students undertaking research degrees, some of whom are veterinarians themselves, helps introduce BVetMed students to the idea of careers in research for veterinarians.

College research directly impacts the professional program by informing curricular content and by pedagogical research informing the design of the curriculum and associated assessment. Examples of both types of impact are given in section 10.1 above.

10.3 Complete the Tables

See Appendix 10 for Tables 10.3.1-10.3.4.

Standard 11: Outcomes Assessment

11.1 Student educational outcomes must include, but are not limited to:

11.1.1 Evidence of direct observations of students performing and/or having attained entry level competence in skills that demonstrate mastery of the nine competencies. Processes must be in place to provide remediation for any of the nine competencies in which students do not demonstrate competence

The RVC constructively aligns its assessments to ensure the assessment used will appropriately test the outcome required. This ensures that all RVC students have reached the appropriate level of competence before graduation. Different styles of assessment are used to ensure different outcomes have been met. There is a significant focus on the continuous and direct observation of skills throughout, with a particular emphasis on this during the assessment of the rotation phase of the course in the final 18 months. It is routine for students to have a formative opportunity at a type of assessment prior to a summative examination in the same format. Remediation is available to students, with always at least one re-take opportunity following a failed summative examination with significant opportunity for remedial teaching.

The main methods of assessment employed for assessment of competence are

- Direct Observation of Procedural Skills (DOPS and eDOPS)
- Integrated Structure and Function Oral Examinations (ISF orals)
- Objective Structured Clinical Examinations (OSCEs)
- Continuous assessment of rotations
- Finals written examinations.

Pre-clinical practical (animal handling) skills are assessed in Year 1 (and GAB) through use of DOPS across a range of different species (cattle, sheep, horses, dogs and poultry). Students must be considered ‘safe’ in each species prior to undertaking AHEMS with that species. Students undertake an initial examination; and those students deemed “not yet safe” undergo targeted additional training in the relevant skills prior to two potential further opportunities for reassessment. The DOPS are also used as a component of the assessment that students undergo during rotations (see below).

Communication skills are taught and developed in the Principles of Veterinary Practice strand. Attendance at a session on simulated client history taking in second year is compulsory but formative. Communication is one component of the assessment in the ISF oral examinations in BVetMed 1, BVetMed 2 and GAB years. Communication skills are developed further in BVetMed 3 and then assessed in the formative OSCEs in Year 4, as part of continuous rotation assessment and, summatively, in the finals OSCEs prior to graduation.

OSCEs are used formatively in the penultimate year of the program with compulsory attendance at a multi-station OSCE before entry to the rotation phase of the program. OSCEs are then used summatively as part of the finals examination with students undertaking a 20-station examination. In order to be considered competent, students must pass a specified number of OSCE stations. The pass mark for stations is standard set by the borderline regression method. Students cannot graduate without passing the finals OSCEs. Those students who do not pass a sufficient number of OSCE stations at the first attempt (typically in April of their final year) may engage in remedial practical clinical skills teaching before undertaking a second series of OSCEs.

Competence is assessed continuously during the rotation phase of the program in the following ways. In each rotation students will be assessed on Professional Activity, Practical Skills and Clinical Reasoning and Application of Knowledge. Students may receive a grade of “Pass,” “Fail”. Additionally, they may also receive a “Cause for Concern”. A cause for concern (CFC) may be given if the clinical team assessing the student have concerns regarding their overall performance, but do not feel these concerns warrant a fail grade for the rotation. Students receiving more than one CFC during their rotation period may be required to enter the RVC’s “Student Performance Development” (SPD) process (see below). In each of the four “core blocks”

of rotations, which are 4 to 6 weeks in duration, students undergo more detailed assessment in the following categories and descriptors, which map directly to the AVMA CoE competencies.

Professional Activity

- Demonstrates behavior, communication style and personal conduct appropriate to different situations
- Considers the client's needs, interests of the animal and ethics as factors in their clinical decision-making, but without pre-judging the client or situation
- Works effectively as part of a team, including supporting others
- Takes responsibility for their own learning, including carrying out critical analysis of new information and research findings relevant to cases.

Practical Skills

- Gathers an adequate and appropriate history, performs physical examinations effectively; all within a reasonable time period
- Performs common procedures on patients effectively
- Plans and manages an animal under sedation/general anesthesia including pre-operative and postoperative care
- Delivers good patient nursing care.

Clinical Reasoning and Application of Knowledge

- Applies logical clinical problem-solving principles when appropriate to the case
- Creates a prioritized problem list and a list of potential likely and less likely differential diagnoses, develops a sound diagnostic plan and interprets results appropriately
- Develops an appropriate management and treatment plan
- Recognizes a patient requiring urgent or emergency care and initiates stabilization measures
- Formulates recommendations for preventative healthcare.
- Demonstrates appropriate awareness of disease control (biosecurity) and, where relevant, the interaction with veterinary public health

Across each of these 14 competence areas students are given one of the following scores

- Not observed/Not applicable
- Below expected competency
- Not yet competent (borderline)
- Meets expected competency.

Students must be deemed to have "met expected competency" in each of these by the end of rotations. Student achievement of competence across these areas is monitored after completion of each core rotation block. Any student not deemed competent will receive remediation advice before the next block of rotations.

Additionally, during the rotation period, students must undergo DOPS (referred to as e-DOPS) to demonstrate competence in specific clinical skills. These skills are:

- Closed gloving and gowning
- Microscopy
- Making a blood smear
- Blood sampling
- IV catheter placement
- Doppler blood pressure measurement, and
- Hygienic handwashing

Student completion of these DOPs is monitored as they progress through the rotation cycle. Students nearing the end of the rotation cycle who have not yet completed all the DOPs are reminded of the need to do so and of the remaining opportunities in their rotation cycle where these assessments can be undertaken.

Students must pass each core and their selected track rotations before they can proceed to take BVetMed finals examinations. Students receiving an overall assessment of 'Fail' in any rotation will be required to repeat that specific rotation (Core or Track). Student achievement on rotations is noted in an online system referred to as 'Gradebook'. After each rotation students receive their grades and feedback on their performance. They are encouraged to reflect on each of

their rotations (and each c-EMS placement) in an online portfolio system – PebblePad (see below). Students experiencing difficulty progressing through the rotation phase of the course may be required to participate in the Student Performance and Development (SPD) process, through which a bespoke remediation plan may be developed. Options available through the SPD process include a requirement to undertake remedial rotations, a recommendation to seek counselling, or advice on interrupting studies. Each student is individually supported to maximize their chances of successful demonstration of competence and completion of rotations.

In the new rotation structure (introduced for the graduating class of 2026) students must also demonstrate a problem-solving approach to individual cases by submitting six case reports during their final two years of study. The first two are "formative" and submitted prior to entry to clinical rotations with the final four cases being summative. Three of these summative cases must be passed prior to entry to the finals written examination.

The finals written examination consists of four long-answer examination papers in different species. Each paper is designed to test a student's approach to case scenarios and requires students to demonstrate appreciation of aspects of professionalism such as communication, ethics and welfare or spectrum of care. These questions directly assess domains relevant to the AVMA's nine competencies. Students cannot graduate without passing all rotation assessments and the finals examinations.

11.1.2 Describe how student progress is monitored in each academic year and how each student is given formative assessment for their further development or timely remediation.

As previously noted, the RVC applies the principle of constructive alignment to ensure that assessments effectively measure the intended learning outcomes. Students are assessed at multiple points throughout their program of study. Every academic year, or phase of study, culminates in a "progression" assessment that must be passed by the student to ensure they have reached an appropriate standard to enter the next stage of the course and that they are on target to achieve competence at the end of their program of study. A variety of assessments are used to allow various outcomes to be assessed. Continuous assessment of rotations and the capstone finals examination ensure that only students who have achieved the various competencies will graduate.

Throughout the program, intended learning outcomes are outlined for each teaching activity, e.g., lecture, practical, directed learning exercise or digital learning interaction. Outcomes are also stated for each year of study and for the program as a whole (see the curriculum digest). Assessments are blueprinted against the stated outcomes of a period of study to ensure an appropriate sample of the outcomes are tested in each assessment. Assessment and award regulations are published for each progression assessment and for the capstone finals assessments. These regulations make clear to students how they will be assessed and what standard they will need to reach in order to progress to the next stage of the course, or in order to graduate.

Assessments undertaken by students progressing through the BVetMed curriculum are as follows.

BVetMed 1 for progression to BVetMed 2

- Formative multiple-choice questions (MCQs) and problem-solving questions (PSQs) prior to summative in course assessments (ICAs) in December and March. Written feedback is provided on ICAs
- Formative opportunities for Paper 3 (scholarship) in Reflect & Review (R & R) weeks
- DOPS – two first attempts in each species with remedial teaching at second attempt and if a resit is required
- Reflective portfolio asset with formative feedback from tutor
- Extended essay with formative feedback from tutor
- Formative ISF oral exam in Spring term
- Summative end of year written and oral examination
- Resit examinations in late summer.

BVetMed 2 for progression to BVetMed 3

- Summative ICA in December
- Critically appraised topic report (CATR) formative feedback by tutor followed by summative assessment

- Reflective portfolio asset with formative feedback from tutor
- Formative opportunities for question styles that will be encountered in end of year examinations in R&R weeks
- Summative end of year written and oral examination
- Resit examinations in late summer.

GAB for progression to BVetMed 3

- Formative MCQ/PSQ prior to Summative ICA in December and March
- DOPS – two first attempts in each species with remedial teaching at second attempt and if resit is required
- 2 x reflective portfolio assets with formative feedback
- Formative ISF oral exam
- Formative PSQs in R&R weeks
- Summative end of year written and oral examination
- Resit examination in late summer.

BVetMed 3 for progression to BVetMed 4

- Formative Basic Factual and Clinical Reasoning MCQs prior to the summative papers
- Summative Principles of Veterinary Practice (PVP) reflective essay in Year 3
- Continuous assessment of engagement through Student Record of Achievement in PebblePad (80% completion threshold)
- Resit examinations in late summer.

BVetMed 4 for progression to rotations

- Formative OSCE
- PMVPH MCQ exam
- Portfolio-based assessments including formative case reports
- Resit opportunity prior to commencement of rotations.

Finals

- Part 1 Assessment of intramural rotations (IMR) and reflections on extramural studies (EMS) as outlined in 11.1.1. above. (Clinical competencies+ IMR/EMS reflections + portfolio-based assessments; Summative DOPS and OSCE)
- Part 2 (Clinical and Professional Reasoning Questions)
- Part 3 (Research Project as described in 10.2.1)
- (For graduates of 2026 – summative case reports submitted during the rotation period)
- Resit opportunities available following failure of any rotation or summative written assessment.

Individual students are aware of their own progress through results of formative and summative assessment. Whole-class or individual written feedback is provided for each significant assessment. Students assess their grades and can discuss these with their academic tutor. Tutors are provided with access to their tutees' examination papers. Students requiring additional remediation and/or academic support, or who fail summative progression assessments are encouraged to seek support through the Advice Centre and the SPD System (see above). Students may also be mandated to attend an SPD meeting as a condition of continuation with their program of study.

Annual progression assessments and finals examinations are overseen by examination boards which include external examiners. These are typically faculty from other institutions or experienced high-level veterinary practitioners. They are asked to confirm that progressing or graduating students have achieved the requisite level and are at a comparable level to students or graduates of other similar institutions.

Student performance data at the level of whole cohorts feed into annual quality monitoring processes in the AQIR which are produced for each year and for the course overall. This allows student outcomes to inform review and, if necessary, modification of teaching and assessment practices within the RVC. The RVC considers its student progression rates to be high, which represents good evidence, combined with external examiners feedback, that its teaching and assessment methods and its student support mechanisms are working well. The RVC has been judged to have outstanding progression by the Office for Students in the recent national Teaching Excellence Framework (TEF) 2023.

11.1.3 NAVLE school score report data and passage rates over the past five years (Table A) *Each college must submit a copy of the annual NAVLE School Score Report with the AVMA CoE Interim Report each year for those graduating students who sat for the examination.*

At the RVC, not all graduating students take the NAVLE. The number of students taking NAVLE over the last five years and the proportion passing are illustrated in Appendix 11.1 Table A.

The NAVLE results have been in decline since 2020/21 with the pass rate below 80% for the three years prior to the graduating class of 2025. Consequently, the RVC has been on probationary accreditation due to a major deficiency in Standard 11 since April of 2024.

The RVC has carefully analyzed student performance and sought to understand the reasons for the observed decline. It was also noted that the downturn in student performance was not unique to students at the RVC. The reduction in the pass rate was not coincident with any significant change in the BVetMed curriculum. The pass mark first fell below 80% for the graduating year of 2022. This initial reduction was in part attributed to changes in methods of delivery of teaching and assessment experienced by students in COVID affected cohorts. Lockdowns necessitating no in-person large group teaching significantly affected this cohort during the didactic phase of their education. There had also been a modification to the type of assessment these students underwent which may have affected their preparedness for a lengthy single best answer examination like the NAVLE.

For the graduating class of 2023 the pass rate remained below 80% and had declined further to only 63%. At this point it became clear that the poor results could not simply be attributed to COVID. The RVC carefully analyzed the data available to try to determine the characteristics and behavior of students most likely to succeed, and devised and implemented its NAVLE improvement plan, in an effort to maximize students' chances of success. The RVC recognized that successful students engaged early and consistently with resources like VetPrep and had typically completed at least 80% of VetPrep prior to taking the examination.

The RVC NAVLE improvement plan took a multifaceted approach encouraging students to engage in the types of study behavior associated with success. Students in their penultimate year of study indicate that they are intending to sit the NAVLE and are encouraged to sign a NAVLE agreement. This commits them to engage with the NAVLE support plan and outlines expectations. The support program includes:

- Funded access to VetPrep
- Funded access to 3 ICVA self-assessment tests
- Online sessions on revision techniques and NAVLE strategies
- One-to-one sessions to review preparation techniques and approaches to the exam
- Dedicated support resources
- Specific NAVLE focused teaching
- Financial support to take the examination.

Due to the lag between students sitting the NAVLE and the institution receiving its complete annual report, there was only a limited period in which the NAVLE improvement plan could be implemented for students sitting in the Fall window of 2023. The performance of the graduating year of 2024 did not show significant improvement. It was anticipated that the full benefit of the NAVLE improvement plan would only become apparent for graduates of 2025. The NAVLE results of the graduating cohort of 2025 do indeed confirm that there has been a significant improvement. At the time of writing this self-study report the RVC has recently received the ICVA report for the completed assessment cycle of 2024/25 confirming a pass rate of 86% (for further detail see Table A, Appendix 11.1). Early indications from formative assessments also indicate that further improvement is likely in succeeding years as the improvement plan realizes its full impact with the additional measures introduced for classes graduating in 2026 and beyond.

11.1.4 Complete Table B, Outcomes Assessment Tools. For the outcomes assessment tools used, provide a short narrative that summarizes:

11.1.4.1 The Survey responses

The **National Student Survey (NSS)** is conducted by the Office for Students and questions final year students about their overall experience of their course. The results feed into the AQIRs which are produced and considered as part of the Annual Quality Review Process. Response rates to the NSS from BVetMed final year students are consistently high (approximately 80%).

The **Student Barometer Survey** is commissioned by the RVC and is run by an independent company (Etio) and is widely used by universities to understand and improve the student experience. The survey is open to all students on all courses at RVC and there was a response rate of 30% at the most recent iteration of the survey in 2024.

The **Graduates 1 Year post-Graduation Survey** is sent to all graduates in the appropriate cohort. Though the response rate is generally very low, the responses received indicate a generally favorable set of results with few major concerns raised.

Graduate Outcomes Survey (HESA) This survey is a statutory survey conducted by the Higher Education Statistics Agency (HESA) with graduates 15 months after they complete their course. It concentrates on what graduates are doing at the time of the survey. The results for the 2022-23 cohort, surveyed in late 2024, are still to be fully analyzed and there is a delay in results being available

RCVS Education Outcomes Data – Veterinary Graduate Development Program (VetGDP) Graduate Survey and Advisor Surveys. These survey both graduates themselves and, separately, their advisors. Participation in the VetGDP program is a requirement of most new graduates in the UK and completion of the survey is a requirement of the VetGDP program. This ensures good survey response rates.

Student Strand Surveys. These internal surveys normally run after each strand or rotation or on a termly basis. Results are considered at the CMC and during annual strand and rotation reviews.

11.1.4.2 The college's analysis of the results.

National Student Survey. The results of the NSS are received and analyzed by the External Student Surveys Results working group, which identifies institution level cross cutting themes and develops an action plan. This group disseminates the results to the CMC, Student Development Committee, Learning Teaching and Assessment Committee, Teaching Quality Committee and other relevant groups (e.g., Annual Quality Improvement Groups).

Highlights from the NSS for 2025 are a positivity measure of 88.6% for the quality of teaching with a positivity measure of 95.7% for the question "how good are teaching staff at explaining things?". Learning opportunities have a positivity measure of 85.8%, an increase from 81.0% in 2024. Assessment and feedback have a lower positivity score of 68% but this is an improvement from 64.1% in 2024. Low scores in 2024 may in part have been influenced by a return to in person assessments with reduced access to online materials after a period of remote assessments and "open book" arrangements which were temporarily introduced as a response to the pandemic. The positivity rating for Learning Resources at 83.8% shows a significant rise from 75.5% in 2024. In response to the question *"to what extent do you get the right opportunities to give feedback on your course?"* 93.1% of respondents gave a positive response, again an increase from 77.5% in 2024.

The NSS results for the RVC generally compare favorably to the sector benchmarks except for the areas of "Organization and Management" and "Student Voice". Significant effort has been invested in making improvements in these areas and the year-on-year trends demonstrate signs of improvement.

Student Barometer Survey. Headline figures for BVetMed from 2024 (the last year for which results are available) show "overall satisfaction" of 92%, with 88% "overall happiness with RVC life" and these results have been largely consistent since 2017, the earliest year for which data are available. The result for "overall learning satisfaction" was 89% in 2024.

Graduate 1 Year Post-Graduation Survey. Unfortunately, due to very low return rates there is usually little meaningful feedback that can be analyzed from this survey.

Graduate Outcomes Survey (HESA). The results consistently show that the majority of RVC graduates are in full time employment (87.6% 2022 cohort), with a small number engaged with full time study or voluntary work. Over 90% agree or strongly agree that their current activity is meaningful, and a similar proportion agree or strongly agree that they are utilizing what they learned during their studies.

RCVS Education Outcomes Data; VetGDP Graduate Survey and Advisor Survey. These are conducted approximately 3 months after graduation. Results are considered by the relevant Curriculum Management Committee (CMC) and for 2025 a specific sub-group of the CMC was set up to consider results and formulate any specific actions.

11.1.4.3 Further actions based on the college's analysis.

The results of these surveys are considered carefully, alongside internal student strand and rotation feedback surveys and any resulting actions are listed in the minutes of CMCs and Annual Quality Improvement Reports, with a date for planned implementation and an update on progress to date. These action plans are monitored by the relevant committee and outcomes are fed back via the student reps and by university-wide communications, such as "You said…We did", and the institutional NSS response. See also section 6.7. In response to these survey findings, in combination with feedback from other sources such as regular student strand and rotation reviews, the following changes have been introduced in recent years:

- The Student Voice Strategy has been updated to improve opportunities for student feedback and discussion about the course, including the introduction of student panels
- The completion of the Large Animal Handling Facility (LAHF) at Boltons Park Farm which provides new facilities for handling and teaching with production animals and horses
- A review and rebuild of the LEARN teaching platform
- Introduction of Sofia curriculum mapping software so that students and faculty can track the teaching of intended learning outcomes for the BVetMed course and understand their relevance to program level outcomes and competencies
- New Timetable Viewer software has been introduced to ensure students can more easily manage their own teaching timetable
- The introduction of a new Primary Care Skills rotation with two days of equine and one day of production animal teaching to consolidate primary skills in all species
- Introduction of further small animal dentistry teaching in Year 3
- The RVC carefully analyzed the data available from our NAVLE performances to try to determine the characteristics and behavior of students most likely to succeed. As a result of this analysis a NAVLE improvement plan was devised and implemented in an effort to maximize students' chances of success.

11.1.4.4 The impact of any actions taken.

The effect of any changes is likely to be gradual, but some impacts may be summarized:

- Results from the RCVS VetGDP surveys improving since they started in 2021
- Improvement in NSS scores for "Learning Opportunities". The positivity score for "Assessment and Feedback" continues to improve. There is also an improvement in "Learning Resources" and "Organisation and Management". These in part will be due to program and administration improvements following consideration at CMCThe improvement in NAVLE performance with a most recent pass rate of 86% is documented above.

11.2 Program Outcomes

11.2.1 Student attrition rates with reasons (Table C)

Summarize student attrition by reporting student attrition from their initial matriculation cohort in Table B – Student Attrition. List the data for all the cohorts graduating in the last 5 years, as well as attrition thus far for currently enrolled students. List the cumulative attrition for each cohort from the time of matriculation. Colleges with multiple matriculation points per year should list each cohort separately.

See Appendix 11.2 Table C. RVC attrition rates do not exceed the 20% threshold.

11.2.2 Employment rates of graduates (within one year of graduation) (Table D)

Annually each college must submit data on employment during the first year following graduation. The Council on Education expects that a declining (negative) trend in proportionate employment from the college will be explained. Colleges with an average employment rate over five years of less than 80% must provide an assessment of the factors that are impacting the trend.

See Appendix 11.2 Table D. Employment Rates are not less than 80%.

11.2.3 Assessments by faculty (and other instructors, for example interns and residents) related to such subjects as adequacy of clinical resources, facilities and equipment, information resources, etc.; and preparedness of students entering phases of education

Faculty and other instructors are encouraged to report on adequacy of resources and student knowledge/skill acquisition through a number of mechanisms, including CMC and annual program reviews (AQIR). During Summer 2025, a short survey was distributed to gather this specific information at a high-level and this will be reported to the CMC for their consideration. From this survey it was noted that:

- 97% of instructors responding to the survey confirmed they were satisfied or very satisfied with facilities and equipment
- 80% confirmed they were satisfied or very satisfied with the adequacy of clinical resources
- 95% confirmed they were satisfied or very satisfied with the adequacy of information resources
- 75% confirmed they were satisfied or very satisfied with the preparedness of students for Year 4/5 clinical rotation years.

11.2.4 Additional assessment that might assist the college in benchmarking its educational program.

The following benchmarking exercises are undertaken in support of the educational program:

- Office for Students conditions of registration
- Outputs of the annual monitoring process to Professional Statutory and Regulatory Bodies
- Outcomes of accreditation evaluations by the international bodies by which the institution is accredited are a key aspect of benchmarking the performance of the RVC against the standards of the accreditors
- External Examiners reports
- INSET days/Examiners Forums – internal and external stakeholders are gathered together to discuss topics such as examinations and assessments
- QS Global Rankings
- External Student Surveys, e.g., NSS and BAROMETER.

External Examiners are one key aspect of RVC benchmarking. This system is a cornerstone of quality assurance in UK HEIs. External Examiners are recognized subject authorities, experienced in assessment at the appropriate level and are recruited from other UK veterinary schools, leading universities and veterinary practice. They are responsible for assuring students' attainment is comparable to that of other UK veterinary degree students, ensuring that assessments appropriately test learning outcomes (including via direct observation of oral and clinical examinations), confirming marking standards via sampling and providing a written report for consideration via the AQIR process.

11.3.1 Describe the adequacy of resources and organizational structure to meet the educational purposes (dean should provide).

As an institution within the larger federal University of London, the RVC has full control of its own finances and internal organizational structures (see Standards 1 and 2 above). Although the RVC teaches other courses and undertakes activities other than education, the provision of veterinary education is the *raison d'être* of the RVC. Budgetary autonomy and the ability to modify the internal organizational structure mean that the resources and structure have been tailored specifically to facilitate the optimal delivery of veterinary education.

Currently, resources and organizational structures are adequate to meet the RVC's educational purposes. The RVC is well placed as an agile institution to adapt appropriately, if necessary, in future.

11.3.2 Describe how the college evaluates progress in meeting its mission and fulfilling its commitment to diversity, equity, and inclusion (for example, benchmarking with other institutions, scholarly activity of the faculty, faculty awards, faculty and staff perception of teaching resources, student satisfaction with the educational program, teaching improvement benchmarks, faculty, staff, and student perception of the college climate, and others, etc.).

In pursuing its mission to educate, undertake research and provide clinical care, the RVC remains committed to fulfilling its legal obligations under the UK Equality Act (2010), the Public

Sector Equality Duty and the Higher Education (Freedom of Speech) Act 2023. The RVC would be happy to discuss diversity, equity and inclusion in the UK setting during the visit.

11.3.3 If your program assesses other outcomes, briefly describe the results.

As an international school, the RVC strives to meet the standards of multiple accreditors in addition to those of the CoE of the AVMA. These other standards include those of the RCVS and the EAEVE. Ensuring the RVC meets the standards of its accreditors, including periodic evaluations and the annual reporting processes, are vital components of its quality assurance processes, and the outcomes of accreditation visits feed directly into many of its institutional strategic and operational considerations.

The RVC was evaluated against the EAEVE standards in May 2025. Although the final report of the visit has yet to be approved by ECOVE, initial feedback on the visit was favorable, indicating that the RVC is likely to be judged to be broadly in compliance with EAEVE's standards. The most recent visit on behalf of RCVS was in 2018 and, at that time, the RVC was considered to be in compliance with the RCVS's standards. Another visit on behalf of RCVS will be taking place in Fall 2025.

11.4 Describe how outcomes findings at the student, programmatic, and institutional level are used by the college to improve the educational program (give examples).

Student progression and performance are monitored through an annual quality improvement process, carried out separately for each year of the program by the year leaders and for the program as a whole by the Course Director. The goals are to evaluate if programs are meeting their objectives and following RVC's academic policies, to identify areas of strength and weakness, to identify and mitigate future risks and to disseminate good practice and praise where appropriate. An AQIR is generated and then considered by a group consisting of an independent academic appointed by the college Teaching Quality Committee (TQC), a student representative, the Course Director, Year leaders, the Associate Dean for undergraduate teaching and representatives from the exams office and program support. Actions and meeting notes are considered by the CMC.The TQC also generates a summary report across all courses which is aimed at identifying areas of good practice that can be shared between courses and RVC-wide concerns requiring an institutional response. The summary report is considered by TQC, Academic Board and the RVC Council. Individual strand reviews are generated annually by strand leaders and are used by Year Leaders when generating AQIRs and are submitted separately to CMCs. Strand reviews allow strand leaders to ask the CMC to consider specific issues.

The BVetMed program is subject to periodic review every 6 years. This evaluates the continuing relevance and validity of the program, the appropriateness of its academic standards, the continuing high quality of learning opportunities for students and the program team's plans for future development. The periodic review is overseen by a panel consisting of two external members with expertise in the subject of the program or a cognate area, two independent members of RVC staff appointed by TQC and one student panel member. A report is produced which includes any recommended and required actions to be taken by the program team which has the opportunity to respond before the final report is considered by TQC and Academic Board. The Course Director is required to incorporate responses to any requirements and/or recommendations into the AQIR action plan for quality monitoring purposes. Interim periodic reviews are carried out every 3 years and involve representatives from TQC and the program management team. The purpose of these reviews is to monitor progress against actions raised in the periodic review and identify any emerging risks to program delivery and standards.

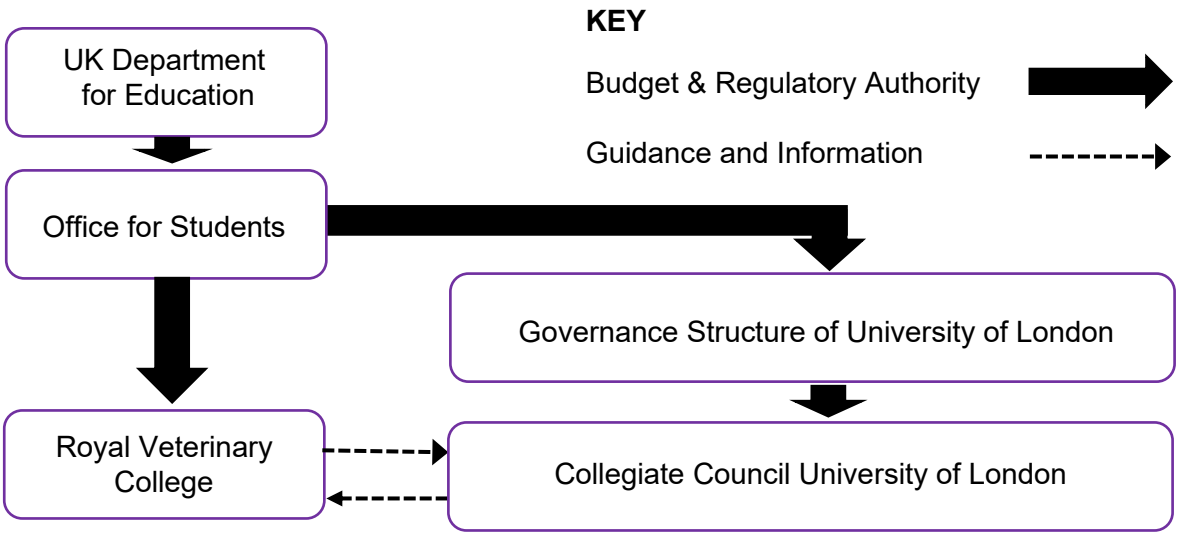
Examples of how issues documented in the quality assurance process relate to improvement of the education program have been outlined in detail above in sections 9.2, 9.3 and 11.1.3.4. Other examples of modifications to the educational program include:

- Various findings from the Quality Improvement processes informed the development of the new curriculum. This included
- the introduction of "Reflect and Review" weeks in the preclinical curriculum
- the introduction of preparation and debrief weeks in the new rotation structure

APPENDICES

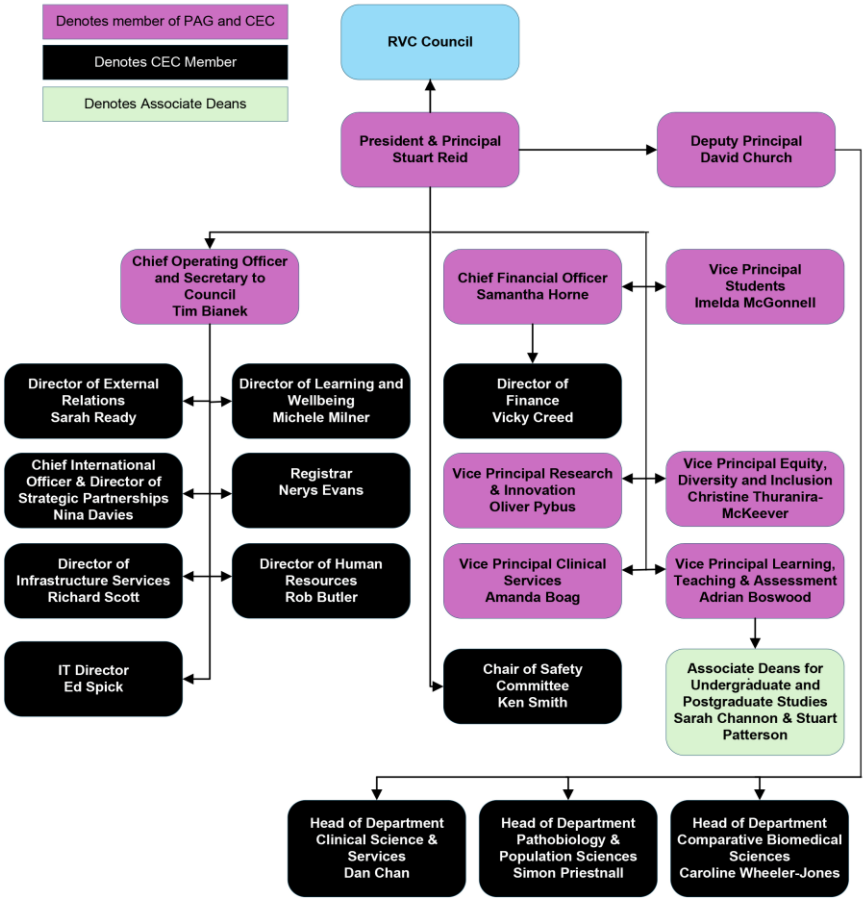
Standard 1: Organization

Appendix 1.1 shows the position of the RVC in the University of London (UoL) structure



Appendix 1.2 Flow chart of the organizational design of the college, listing names, titles (deans, associate/assistant deans, directors, department heads, etc.) and assignments of the college administrators.

Flow chart of the organizational design of the college listing names, titles (deans, associate/assistant deans, directors, department heads, etc.) and assignments of the college administrators.

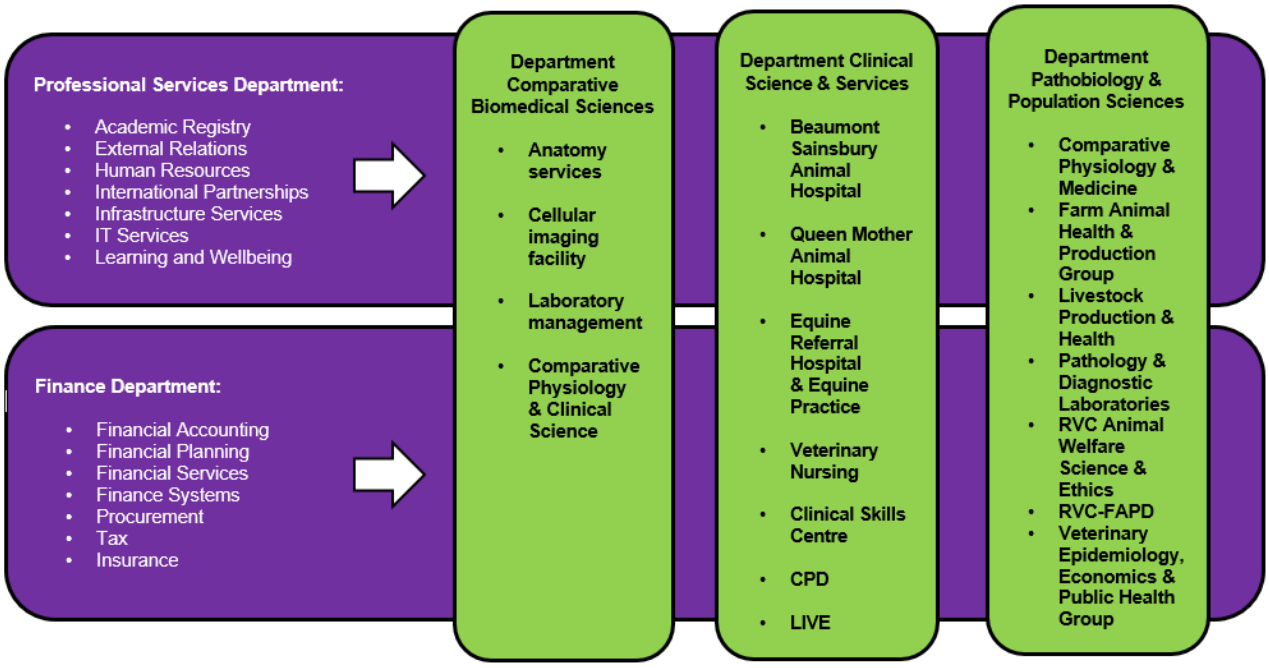


Appendix 1.3 provides the name, roles, and credentials of the Principal's Advisory Group (PAG) and College Executive Committee members.

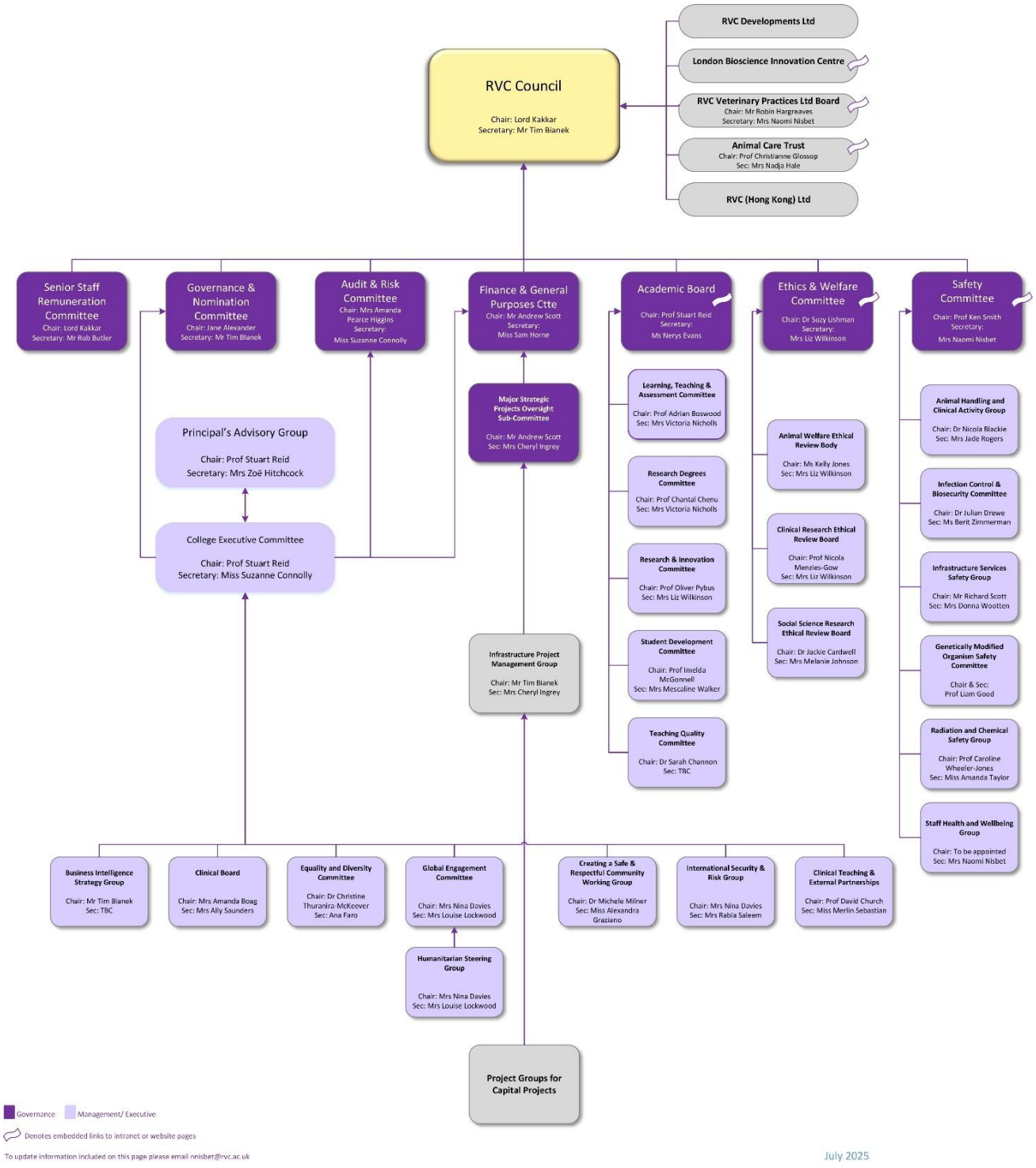
Full Name	Organisation Role	Credentials
Stuart WJ Reid	President & Principal	CBE BVMS PhD DVM DipECVPH FRSE FRSB FRCVS
David Church	Deputy Principal	BVSc PhD MACVSc FHEA MRCVS
Tim Bianek	Chief Operating Officer/ Secretary to the Council	MEng CEng MICE MBA
Samantha Horne	Chief Financial Officer	BA (Hons), BFP, FCA
Adrian Boswood	Vice Principal Learning Teaching & Assessment	MA VetMB MRCVS DVC DipECVIM-CA (Cardiology) FHEA
Oliver Pybus	Vice Principal Research & Innovation	BSc MSc Dphil MA FRS MAE
Amanda Boag	Vice Principal Clinical Resources	MA VetMB DipECVECC DipACVECC DipACVIM FHEA FRCVS
Imelda Mary McGonnell	Vice Principal Students	PhD FHEA
Christine Thuranira-McKeever	Vice Principal Equality, Diversity & Inclusion	PhD FHEA
Caroline Wheeler-Jones	Head of Department Comparative Biomedical Sciences	BSc Hons; PhD; FHEA
Dan Chan	Head of Department Clinical Science & Services	DVM, DipACVECC, DipECVECC, DipACVIM(Nutrition), MRCVS
Simon Priestnall	Head of Department Pathobiology & Population Sciences	BSc (Hons) BVSc PhD PGC(VetEd) FHEA FRSB DipACVP FRCPath FRCVS
Ken Smith	Head of Graduate School	BVM&S PhD FHEA FRCPath FRCVS
Nerys Evans	Registrar	BA (Hons)
Sarah Ready	Director of External Relations	HND Chartered Director (institute of Directors)
Nina Davies	Chief International Officer & Director of Strategic Partnerships	MA, GDL, LPC
Victoria Creed	Director of Finance	BA (Hons) FCA GDL LPC
Michele Milner	Director of Learning & WellBeing	PhD, PFHEA
Richard Scott	Director of Infrastructure Services	BSc (Hons) CIOB
Rob Butler	Director of Human Resources	BA (Hons), MSc
Ed Spick	Director of IT	BA (Hons), MA, PgDip, MBCS

Appendix 1.4 shows how support functions and the three academic departments operate in a matrix structure

Department Structures and Matrix of Aligned Operational Support



Appendix 1.5 – Governance, Leadership and Management Overview



Appendix 1.6 Governance Table: Standing Committees

Standing Committee	Reports to	Appointed by:	Membership Structure	Current Membership	Term Lengths	Renewable T
RVC Council	n/a	RVC Council	11 Independent Members University President & Principal (Ex-Officio) 2 Staff Members of the Academic Board 1 Student, normaly the President of the Students' Union	Lord Kakkar (Chair) Jane Alexander Robin Hargreaves Amanda Pearch Higgins Sonia Virdee Alia Cooper Zahid Latif Lubna Nasir Andrew Scott Sophie White Stephanie Armstrong Stuart WJ Reid Donald Palmer Simon Priestnall Alexis Engelen	3-year term 3-year term 3-year term 3-year term 3-year term 3-year term 3-year term 3-year term 3-year term 3-year term 3-year term University President & Principal 2-year term 1-year term 1-year term	No No No Yes, renewable once Yes, renewable once Yes, renewable once Yes, renewable once Yes, renewable twice Yes, renewable twice Yes, renewable twice Yes, renewable twice N/A No No No
Audit & Risk Committee (ARC)	RVC Council	RVC Council	No fewer than three independent members	Amanda Pearce Higgins (Chair) Alia Copper Sonia Virdee David Cook Alan Hill	3-Year term 3-Year term 3-Year term 3-Year term 3-Year term	No Yes, renewable once Yes, renewable once Yes, renewable once Yes, renewable twice
Ethics and Welfare Committee (EWC)	RVC Council	RVC Council	3 Independent Members 3 External Lay Panel Member RVC Co-Optee Univeristy President & Principal (Ex-Officio) Establishment Licence Holder (Ex-Officio) Students' Union President (Ex-Officio)	Suzy Lishman (Chair) Andrew Fleetwood Zahid Latif Vicky Robinson Frances Lee Lester Hilman Sue Williams Richard Piercy Stuart WJ Reid Jonathan Elliott Alexis Engelen	3-year term 3-year term 3-year term 3-year term 3-year term 3-year term 3-year term 3-year term Univeristy President & Principal Establishment Licence Holder Students' Union President	No Yes, renewable twice Yes, renewable twice Yes, renewable twice Yes, renewable twice Yes, renewable twice Yes, renewable twice Yes, renewable twice N/A N/A
Finance and General Purposes Committee (F&GPC)	RVC Council	RVC Council	4 Independent Members University President & Principal (Ex-Officio) Deputy Principal (Ex-Officio) Students' Union President (Ex-Officio)	Andrew Scott (Chair) Lord Kakkar Jane Alexander Angela O'Hara Nnenna Onuba Stuart WJ Reid David Church Alexis Engelen	3-year term 3-year term 3-year term 3-year term 3-year term University President & Principal Deputy Principal Students' Union President	Yes, renewable twice No No Yes, renewable once Yes, renewable twice N/A N/A N/A

Governance & Nominations Committee (GNC)	RVC Council	RVC Council	4 Independent Members University President & Principal (Ex-Officio)	Jane Alexander (Chair) Lord Kakkar Alia Cooper Lubna Nasir Stuart WJ Reid	3-year term 3-year term 3-year term 3-year term University President & Principal	No No Yes, renewable once Yes, renewable twice N/A
Senior Staff Remuneration Committee (SSRC)	RVC Council	RVC Council	4 Independent Members	Lord Kakkar (Chair) Jane Alexander Andrew Scott Stephanie Armstrong	3-year term 3-year term 3-year term 3-year term	No No Yes, renewable twice Yes, renewable twice
Safety Committee (SC)	RVC Council	RVC Council	Chair of Safety Committee Head of Department Comparative Biomedical Sciences Head of Department Clinical Science & Services & Chair of Radiation and Chemical Safety Group Head of Department Pathobiology & Population Sciences Chief Operating Officer Director, Infrastructure Services & Chair of Infrastructure Services Safety Group Director of Operations, LBIC Deputy Operations Manager, RVC Business Corporate Health and Safety Manager Biological Safety Officer and Dangerous Goods Safety Adviser Deputy Director of HR Department Safety Supervisor, Pathobiology & Population Sciences Department Safety Supervisor, Research & Innovation Office Laboratory Manager & Department Safety Supervisor, Comparative Biomedical Sciences Senior Research Laboratory Manager, Pathobiology & Population Sciences Chair of Clinical Activity and Animal Handling Group Chair of Genetically Modified Organism Safety Committee Chair of Infection Control and Biosecurity Committee RVC Radiation Protection Adviser UNISON representative SU General Manager SU President	Ken Smith Caroline Wheeler-Jones Dan Chan Simon Priestnall Tim Bianek Richard Scott Janette Richardson-Lee Caris Turner Beth Webster Beth Webster Rebecca Costello Katie Lovell Joanna Bailey Michael Avella Chris Durrant Nicola Blackie Liam Good Julian Drewe Jill Reay Rob Reeves Callum Roberts Alexis Engelen	All members are Ex-Officio	N/A

Academic Board (AB)	RVC Council	RVC Council	Voting Members: University Principal & President Members Professors Associate Professors Readers Heads of Departments Chairs of Academic Board's Sub-Committees Registrar Director of Learning and Wellbeing Vice Principal (Equality, Diversity, and Inclusion) Vice Principal (Learning, Teaching and Assessment) Vice Principal (Students) Vice Principal (Research and Innovation) Vice Principal (Clinical Services) SU President SU Postgraduate course representative OR SU Postgraduate Officer SU Undergraduate course representative OR SU Officer (Undergraduate) Members elected by non-professorial academic staff Non-Voting Members: Chief Operating Officer Members of Post-Doctoral Research Association	Stuart WJ Reid (Chair) Quorum: 40% of total membership (excluding non-voting members)	All members are Ex-Officio	N/A
Principal's Advisory Group (PAG)	RVC Council	RVC Council	University President & Principal (Ex-Officio) Deputy Principal (Ex-Officio) Vice Principals (Ex-Officio) Chief Operating Officer (Ex-Officio) Chief FInancial Officer (Ex-Officio) Academic Head of Department Representative (Ex-Officio)	Stuart WJ Reid (Chair) David Church Amanda Boag Adrian Boswood Imelda McGonnell Oliver Pybus Christine Thuranira-McKeever Tim Bianek Samantha Horne Caroline Wheeler-Jones	All members are Ex-Officio	N/A
College Executive Committee (CEC)	RVC Council	RVC Council	University President & Principal (Ex-Officio) Deputy Principal (Ex-Officio) Vice Principals (Ex-Officio) Chief Operating Officer (Ex-Officio) Chief FInancial Officer (Ex-Officio) Director of Finance (Ex-Officio) Head of Departments (Ex-Officio)	Stuart WJ Reid (Chair) David Church Amanda Boag Adrian Boswood Imelda McGonnell Oliver Pybus Christine Thuranira-McKeever Tim Bianek Samantha Horne Caroline Wheeler-Jones	All members are Ex-Officio	N/A

				Victoria Creed Ed Spick Simon Priestnall Dan Chan Nerys Evans Nina Davies Michele Milner Rob Butler Richard Scott Sarah Ready Ken Smith		

Standard 2: Finances

Appendix 2.1 Table A Expenditures for immediate past five fiscal years

Expenditure $	Fiscal year					% change
	2019-20	2020-21	2021-22	2022-23	2023-24	
1. Total Instruction, academic support, and student services[1,2]	26,345,553	26,702,183	25,527,421	26,139,325	31,523,318	
1A. Expenditures related to college owned and operated sites on and off campus	25,632,001	25,895,299	24,794,533	25,289,057	30,644,015	20%
1B. Expenditures and fees paid to privately-owned, off-campus entities for providing instruction	713,552	806,884	732,888	850,268	879,303	23%
1C. Fees paid to other accredited Institutions for providing instruction	0	0	0	0	0	
2. Research expenditures[1]	10,144,929	7,549,304	7,293,775	8,197,617	8,676,539	-14%
3. Outreach/continuing education[1]	1,096,631	1,020,638	1,004,174	1,118,626	1,153,954	5%
4.College/university/government-owned clinical service operations[1]	29,779,766	33,124,793	30,755,854	34,285,163	38,541,953	29%
5. Diagnostic lab and other clinical lab services	1,811,689	1,986,295	1,859,927	2,121,877	2,324,719	28%
6. Facilities operations and maintenance, utilities, and other expenditure for Infrastructure[3]	9,422,456	10,290,889	9,841,120	10,057,073	11,856,876	26%
7. Capital expenditures (renovations and new construction)[4]	11,399,112	15,036,584	8,892,734	6,579,979	10,126,373	-11%
8. Student aid (extramurally sponsored grants to students selected by the institution)	1,283,933	1,542,829	1,443,198	1,337,078	1,491,749	16%
9. Student aid (university sponsored aid to students, inclusion of gifts and endowment income)	699,873	747,214	692,665	580,974	754,560	8%
10. Other expenditures	7,028,273	7,637,626	6,165,712	6,959,378	8,919,467	27%
11. Total expenditures[5]	**99,012,214**	**105,638,357**	**93,476,581**	**97,377,089**	**115,369,509**	**17%**

Expenditure table footnotes

E1A, E2, E3, E4[1] These should include salary, wages and fringe benefits for faculty and staff engaged in each category of activity (instruction, research, and outreach/continuing education and teaching hospital services)

E1B[2] This should include total fees paid to privately owned and operated entities for providing instruction for the home institution's students.

E1C Fees paid by the home accredited institution to another accredited institution for training the home institution's students.

E6[3] If colleges are assessed fees for infrastructure support provided by the university, they should be recorded here. These could include expenditures for facilities operations and maintenance (O&M), utilities, and central university administration

E7[4] Capital expenditures include the acquisition and maintenance of fixed assets, such as land, buildings, and equipment. If capital expenditures are paid from college resources, they should be entered here.

E11[5] This should be the sum of expenditure rows 1-10.

Appendix 2.1 Table B Revenue for immediate past five fiscal years

Revenue $	Fiscal year					% change
	2019-20	2020-21	2021-22	2022-23	2023-24	
1. Government appropriation to college [1]	15,812,511	14,202,785	14,798,982	14,990,891	14,520,460	-8%
2. University appropriation to college (If veterinary student tuition is returned in this appropriation, subtract it and include it in line 3).[2]	0	0	0	0	0	
3. Revenue derived from students (tuition and other fees) that is available for college use. (Do not include any amount kept by or remanded to the university for central university use).[3]	32,789,185	35,497,729	35,642,728	41,081,917	48,025,672	46%
4.Tuition and fee revenue paid by other entities on the students' behalf (e.g. educational contracts & fees for clinical instruction)[4]	230,223	138,638	140,115	90,483	67,329	-71%
5. TOTAL Clinical Services Revenue [5]	29,818,469	35,666,530	31,795,159	35,892,346	39,822,130	
5A. Clinical services revenue from college/ university/ government-owned facilities	29,818,469	35,666,530	31,795,159	35,892,346	39,822,130	34%
5B. Clinical services revenue generated in privately-owned entities remanded to the college	0	0	0	0	0	
6. Diagnostic lab and other clinical lab revenue[6]	2,654,611	3,148,552	2,943,212	3,105,133	3,477,911	31%
7. Extramural grants and contracts[7]	10,565,900	8,202,614	7,825,080	8,683,632	9,296,820	-12%
8. Overhead (indirect costs or F&A) returned to the college, department, or faculty member	3,510,411	4,568,581	3,283,020	2,764,685	2,868,196	-18%
9. Current year gifts and endowment income[8]	2,311,500	1,590,300	1,728,740	1,779,080	1,017,452	-56%
10. Other revenue (CE registration, certificate program enrollment, IP royalties, and other miscellaneous revenue)	2,108,933	2,129,417	2,484,930	2,682,380	3,281,235	56%
11. Total revenue[9]	**99,801,743**	**105,144,146**	**100,641,965**	**111,070,546**	**122,377,203**	**23%**
12. Funds carried forward from previous year (college, department, and faculty)	0	0	0	0	0	

Revenue table footnotes

R1[1] Includes all appropriated public funds (state, province, region, country, etc.). Include salaries and fringe for positions supported directly by the government, if any.

R2[2] If tuition is returned to the college from the university, calculate student-derived revenue as the product of enrollment and tuition & fee rate (line R3) and subtract this amount from the university appropriation. Enter the remaining appropriation here.

R3[3] Line 3 includes all revenue derived from students (tuition and related fees) paid directly to the college or as a part of the university allocation to the college. If this number is not known, calculate student-derived revenue as the product of enrollment and tuition & fee rate. Enter that number here.

R4[4] Line 4 should include any revenue derived from contracts for providing veterinary student instruction (regional contracts, independent state-to-college contracts, contracts between colleges for clinical education, etc.).

R5[5] Revenue generated by animal care services. Government and university support for the teaching hospital should be reported in rows 1 and 2, respectively. R5A Revenue generated by college-owned and operated facilities. 5B Revenue generated by privately-owned clinical facilities and remanded to the college – e.g., revenue generated by college-paid veterinarians at private facilities that is remanded to the college.

R6[6] Revenue generated by clinical laboratories. This should not include revenue reported for the teaching hospital in line 3. Government and university support for clinical laboratories should be reported in rows 1 and 2, respectively.

R7[7] Total direct extramural awards. Also include awards that flow through university foundations. This should include grants for scholarly work related to research, instruction, and outreach, but should not include contracts to provide instruction (e.g., clinical year instruction for students from other institutions or contracts through which other states pay for instruction of residents of that state).

R9[8] Exclude planned gifts. Also exclude research funded through foundations already reported in line 7.

R11[9] This should be the sum of revenue rows 1-10

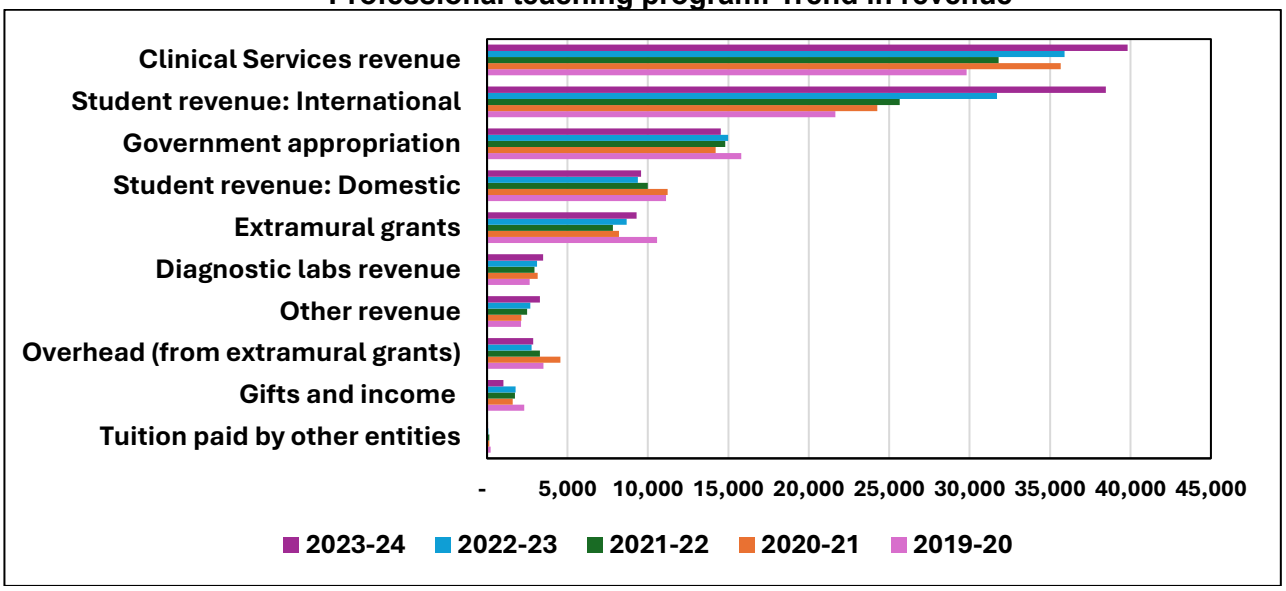
Appendix 2.1 Table C Endowment

Endowment $	Fiscal year					% change
	2019-20	2020-21	2021-22	2022-23	2023-24	
True endowment market value	17,933,763	21,313,800	20,165,380	20,956,814	23,781,469	33%

Appendix 2.2

Figures in $'M

Professional teaching program: Trend in revenue



Standard 3: Physical Facilities and Equipment

Appendix 3.0 Campus Maps

Camden Campus

Hawkshead Campus

Appendix 3.1 List and Locations of External Rotations

External Partner	Rotation Name	Delivery Site	Core or Track	Miles from Hawkshead	Travel Time from Hawkshead	Miles from Camden	Travel Time from Camden
Aberystwyth University	FA7	Pwllpeiran Upland Research Centre	Track	213	4:19	224	4:41
	FA8	Dunbia Llanybydder		242	4:21	234	4:44
		Hafren Veterinary Group (Newtown Branch)		178	3:29	191	4:37
		Wales Veterinary Science Centre		220	4:29	231	4:51
Acorn House Veterinary Hospital	SA8 Acorn	Acorn House Veterinary Hospital	Track	47	1:00	57	1:24
Blue Cross	Primary Care	Blue Cross Victoria Animal Hospital	Core	19	1:00	5	0:28
Charles Humphreys	Veterinary Public Health	C Humphreys & Sons	Core	33	0:46	36	1:07
Buckingham Equine Vets	EQ3	Buckingham Equine Vets	Track	48	1:00	59	1:27
Coach House Vets	EQSA1	Burlyns Surgery	Track	79	1:29	69	1:44
Stony Lane Laboratories Ltd	FA6	Crowshall Veterinary Services	Track	92	1.46	100	2:09
CVS (UK) Limited	EQ2	Bell Equine Veterinary Clinic	Track	56	1:04	44	1:25
Mayhew Animal Home	Primary Care Shelter Medicine	Mayhew Animal Home	Core	16	0.47	5.3	0.28
Synergy Farm Health Ltd	Farm Animal Practice 2: Synergy B	West Hill Barns &	Core	151	2:55	141	3:11
		Kingston Maurward College		140	2:37	130	2:53
Hammonds Vets Limited	FAEQ4 Hammonds	Hammonds Vets Ltd	Track	14	0.28	31	1.02
Horse Trust	EQUINE HOSPITAL 1	The Home of Rest for Horses	Core	34	0:58	40	1:16
Aspinall	ZA2 Aspinall	Port Lympne Reserve &	Track	84	1:41	72	1:54
		Howlett's Wild Animal Park		84	1:38	72	1:51
Pilgrim's Pride Ltd (T/A BQP)	FA5	British Quality Pigs	Track	104	2:06	107	2:28
RSPCA	Primary Care Shelter Medicine	Finsbury Park Animal Hospital	Core	16	0:43	2	0:11
RSPCA	Primary Care Shelter Medicine	Enfield branch	Core	8	0:20	12	0:47
		Emergency Foster Unit		16	0:43		0:11
		Cat Shelter				2	
Zoological Society of London	ZA1 ZSL	London Zoo	Track	15	0:39	1	0:07
Torch Farm and Equine	FA2	Torch Farm Vets, South Molton	Track	214	3:39	204	3:55
		Torch Farm Vets, Bideford		236	4:08	226	4:24
		Torch Farm Vets, Ilfracombe		236	4:12	226	4:27
Woodgreen Charity	SA6 Shelter Medicine	Woodgreen Godmanchester	Track	47	1:06	61	1:36

Appendix 3.2 Teaching, Learning Spaces and Meeting Rooms

Campus	Room	Primary Use	Capacity	Audio-Visual	Wireless Screen Sharing	Video Conferencing	Lecture Capture?	Hearing Induction Loop?	Comment
Camden	Great Hall	Lecture Theatre	250	Yes	Yes	Yes	Yes	Yes	
	LT1	Lecture Theatre	151	Yes	Yes	Yes	Yes	Yes	
	LT3	Lecture Theatre	100	Yes			Yes		
	Teaching Laboratory	Practical	96	Yes					
	McCunn Theatre	Lecture Theatre	100	Yes					
	Dissection Room	Practical	120	Yes					
	Council Room	Meeting	35	Yes	Yes	Yes	Yes	Yes	Combined with G9a for 58
	G9a	Meeting	23	Yes					
	F25	Seminar	20	Yes			Yes	Yes	
	F26	Computer Teaching Room	16	Yes			Yes	Yes	
	F1c	Seminar/Meeting	30	Yes			Yes	Yes	Combined with F3 for 54
	F3	Seminar/Meeting	24	Yes			Yes	Yes	
	F4	Semiar/Meeting	30	Yes			Yes	Yes	
	F7	Directed Learning	60	Yes			Yes	Yes	Combined for 120
	F8	Directed Learning	60	Yes			Yes	Yes	
	Library	Personal Learning	62					Yes	
	IT Open Access	Study	118						
	Library Pod	Study	16						
	F17	Seminar/Meeting	50	Yes	Yes	Yes	Yes	Yes	
Hawkshead	SLC Lecture Theatre S054	Lecture Theatre	450	Yes	Yes	Yes	Yes	Yes	Divided 350/100
	SLC Lecture Theatre S055	Lecture Theatre	126	Yes	Yes	Yes	Yes	Yes	
	Alumni Lecture Theatre	Lecture Theatre	327	Yes	Yes	Yes	Yes	Yes	
	Teaching Laboratory	Practical	120	Yes	Yes				
	Wet Laboratory	Practical	30	Yes	Yes				
	Necropsy Hall	Practical	40	Yes	Yes				Also SLR Cameras
	G047	Directed Learning	64	Yes	Yes	Yes	Yes	Yes	
	G048	Directed Learning	64	Yes	Yes	Yes	Yes	Yes	
	G051	Directed Learning	64	Yes	Yes	Yes	Yes	Yes	
	F066	IT Computer Teaching Room	16	Yes	Yes	Yes	Yes	Yes	
	F075	Study	10	Yes	Yes			Yes	
	F076	Study	10	Yes	Yes			Yes	
	G066	Study	8	Yes	Yes			Yes	
	G067	Study	8	Yes	Yes			Yes	
	G068	Study	8	Yes	Yes			Yes	
	G069	Study	8	Yes	Yes			Yes	
	Room 6	Seminar	24	Yes			Yes		
	G60	Seminar/CPD	45	Yes			Yes	Yes	
	G70	Seminar/CPD	60	Yes			Yes	Yes	
	F2	Meeting	30	Yes	Yes	Yes	Yes	Yes	
	Conf. 1 and 2	Seminar/Meeting	100	Yes			Yes		

	Conf. 3 & 4	Seminar/Meeting	40	Yes			Yes		
	Conf. 5 and 6	Seminar/Meeting	40	Yes			Yes		
	LACCF1a/b	Seminar	30	Yes			Yes		
	LACC F2	Seminar	20	Yes			Yes		
	S077	Meeting	4						
	SO80	Meeting	8	Yes	Yes	Yes		Yes	
	SO81	Meeting	16	Yes	Yes	Yes		Yes	
	Library	Study	45					Yes	
	IT Open Access	Study	71	Yes					
	F82	Meeting	22	Yes	Yes	Yes	Yes	Yes	
	QMHA Seminar	Seminar	45	Yes			Yes		
Bolton s Park Farm	Parlour Classroom	Seminar	28	Yes					
	LAHF Wet Laboratory	Practical	32	Yes					
	LAHF Clean Classroom	Seminar	32	Yes					

Standard 4: Clinical Resources

Appendix 4.1 Tables A, B, C, D, E, F & G

Note in tables A, B, C & the Equine Data in Table D, the previous fiscal year is only 48 weeks of data compared to 52 weeks for previous years; see section 4.1 for more detail

Teaching Hospital
Table A Clinical Resources – on-campus facilities

Species	Previous Fiscal Year		1 Fiscal Year Prior		2 Fiscal years Prior		3 Fiscal Years Prior		4 Fiscal Years Prior	
	Visits	Hosp	Visits	Hosp	Visits	Hosp	Visits	Hosp	Visits	Hosp
Canine	15,583	4,380	17,660	4,627	18,307	5,069	19,071	5,768	16,874	4,754
Feline	6,435	1,745	7,133	1,784	7,098	1,665	7,418	1,682	6,759	1,527
Bovine	0	0	0	0	0	0	0	0	0	0
Small ruminant	5	5	3	4	5	5	14	13	16	11
Equine	1,038	1,015	1,254	1,223	1,382	1,343	1,466	1,404	1,178	1,115
Porcine	0	0	0	0	0	0	0	0	0	0
Caged birds	495	98	491	82	440	86	355	69	-	-
Caged mammals	1,544	327	1,807	359	2,126	368	1,632	393	778	199
Wildlife	4	2	2	1	9	2	6	2	-	-
Zoo animal	1	1	0	0	0	0	0	0	-	-
Other	501	46	547	62	405	54	387	60	1,650	251

Patient visits – total number of times the patient visits the hospital (if Buffy visits the hospital 3 times this year, this will count as 3 visits)
Hospitalized — number of patients that were hospitalized

Table B Clinical Resources – college owned and operated off-campus facilities

Species	Previous Fiscal Year		1 Fiscal Year Prior		2 Fiscal years Prior		3 Fiscal Years Prior		4 Fiscal Years Prior	
	Visits	Hosp	Visits	Hosp	Visits	Hosp	Visits	Hosp	Visits	Hosp
Canine	6,926	318	7,307	382	7,081	376	7,892	544	-	-
Feline	2,866	179	2,922	241	2,743	267	2,791	303	-	-
Bovine	0	0	0	0	0	0	0	0	-	-
Small ruminant	0	0	0	0	0	0	0	0	-	-
Equine	0	0	0	0	0	0	0	0	-	-
Porcine	0	0	0	0	0	0	0	0	-	-
Caged birds	46	7	112	8	124	14	88	9	-	-
Caged mammals	272	21	431	32	407	45	504	70	-	-
Wildlife	6	4	10	4	7	3	12	0	-	-
Zoo animal	0	0	0	0	0	0	0	0	-	-
Other	34	3	105	5	102	3	27	10	-	-

Patient visits – total number of times the patient visits the hospital (if Buffy visits the hospital 3 times this year, this will count as 3 visits)
Hospitalized — number of patients that were hospitalized

Table C Clinical Resources – cases seen by students during required rotations at privately owned and operated facilities

Species	Previous Fiscal Year		1 Fiscal Year Prior		2 Fiscal years Prior		3 Fiscal Years Prior		4 Fiscal Years Prior	
	Visits	Hosp	Visits	Hosp	Visits	Hosp	Visits	Hosp	Visits	Hosp
Canine	6,231	*Not known*	7,286	*Not known*	6,905	*Not known*	7,471	*Not known*	6,546	*Not known*
Feline	11,087	*Not known*	12,127	*Not known*	12,807	*Not known*	10,291	*Not known*	9,835	*Not known*
Bovine	-	-	-	-	-	-	-	-	-	-
Small ruminant	-	-	-	-	-	-	-	-	-	-
Equine	-	-	-	-	-	-	-	-	-	-
Porcine	-	-	-	-	-	-	-	-	-	-
Caged birds	-	-	-	-	-	-	-	-	-	-
Caged mammals	1,224	*Not known*	1,443	*Not known*	1,529	*Not known*	1,697	*Not known*	1,654	*Not known*
Wildlife	-	-	-	-	-	-	-	-	-	-
Zoo animal	-	-	-	-	-	-	-	-	-	-
Other	-	-	-	-	-	-	-	-	-	-

Patient visits – total number of times the patient visits the hospital (if Buffy visits the hospital 3 times this year, this will count as 3 visits)
Hospitalized — number of patients that were hospitalized

Ambulatory/Field Service Program

Table D Clinical Resources – college owned and operated ambulatory services

Species	Previous Fiscal Year		1 Fiscal Year Prior		2 Fiscal years Prior		3 Fiscal Years Prior		4 Fiscal Years Prior	
	No. Farm Calls	No. Animals Treated	No. Farm Calls	No. Animals Treated	No. Farm Calls	No. Animals Treated	No. Farm Calls	No. Animals Treated	No. Farm Calls	No. Animals Treated
Bovine	102	102	98	98	110	110	-	-	-	-
Caprine	10	10	10	10	12	12	-	-	-	-
Equine	10,801	10,801	11,677	11,677	11,348	11,348	12,498	12,498	10,947	10,947
Ovine	42	42	30	30	34	34	-	-	-	-
Porcine	10	10	12	12	15	15	-	-	-	-
Other	7	7	6	6	7	7	-	-	-	-

Number of Farm (site) Calls — total number of calls/visits made to farms/operations
Number of Animals Examined/Treated — number of individual animals examined/treated Include only those patients, farm calls, and animals examined that have direct student involvement.

Table E Clinical Resources – Cases seen by students during required rotations at private practice ambulatory service

Species	Previous Fiscal Year		1 Fiscal Year Prior		2 Fiscal years Prior		3 Fiscal Years Prior		4 Fiscal Years Prior	
	No. Farm Calls	No. Animals Treated	No. Farm Calls	No. Animals Treated	No. Farm Calls	No. Animals Treated	No. Farm Calls	No. Animals Treated	No. Farm Calls	No. Animals Treated
Bovine	594	9,072	649	7,561	741	7,437	216	4,200	216	4,310
Caprine	45	315	43	312	52	321	12	300	12	300
Equine	46	46	27	27	144	144	-	-	-	-
Ovine	172	678	147	966	188	980	18	360	18	360
Porcine	15	105	11	78	18	85	0	0	0	0
Other	135	930	119	938	215	1,007	0	240	0	240

Number of Farm (site) Calls — total number of calls/visits made to farms/operations
Number of Animals Examined/Treated — number of individual animals examined/treated Include only those patients, farm calls, and animals examined that have direct student involvement.

Herd/Flock Health Program
Table F Clinical Resources for production medicine training by production group
For production medicine training for fourth and final year students, the RVC works with a group of practices in the south of England and Wales for clinical training. This is comprised of both Core (compulsory) and Tracking (elective) teaching.

Working with Synergy Farm Health, the largest independent farm animal practice in the UK, all students on the BVetMed receive four weeks of compulsory production animal training during their final year. This consists of the Farm Animal Practice Synergy A and B rotations. Across these four weeks several areas are covered in order to meet the required competencies.

Dairy	Core Teaching: Synergy Farm Health: Dairy resource – the practice looks after ~250 dairy herds and almost 70,000 adult dairy cattle. Students routinely interact with fifteen dairy farms which are set up for teaching – a resource of about 5,500 adult cattle plus youngstock and herd sizes ranging from 150-1200 adults. Tracking Teaching (Optional): • Farm Animal 1 – Herd/Flock Health Tracking rotation • Farm Animal 2 – Mixed Farm Animal Tracking rotation (run in collaboration with Torch Farm and Equine) • Farm Animal 7 – Mixed Farm Animal Practice tracking rotation in collaboration with Aberystwyth University
Beef Feedlots	In the UK whilst some beef feedlots do exist, the more common beef production methods are through beef – suckler (cow/calf) units where there is more contact with adult and youngstock reared on their dams. Please see below for the beef suckler clinical resources.
Cow-Calf	In the UK, Cow-Calf enterprises may include both dairy and beef farms and as such some teaching and clinical resources related to this area are integrated into the teaching described above within the dairy and beef feedlot sections. Core Teaching: Synergy Farm Health: Beef Cattle resource – the practice looks after ~800 beef herds and almost 60,000 beef cattle. Three farms are set up and routinely used for Core rotation teaching with herd sizes ranging from 25-200 adults and enabling students to undertake: • Beef farm visits focusing on beef herd health and management • Bull fertility visits – including semen evaluation and breeding discussions • Abattoir visits including beef production and associated teaching Tracking Teaching (Optional): • Farm Animal 1 – Herd/Flock Health Tracking rotation • Farm Animal 2 – Mixed Farm Animal Tracking rotation (run in collaboration with Torch Farm and Equine) • Farm Animal and Equine 4 – Mixed Large Animal Practice Tracking Rotation (run in collaboration with Hammond Vets Ltd) • Farm Animal 7 – Mixed Farm Animal Practice tracking rotation in collaboration with Aberystwyth University
Small Ruminants	Core Teaching: Synergy Farm Health: The practice looks after over 600 flocks of sheep and almost 70,000 breeding ewes and ~120 goat flocks. Students routinely interact with four flocks that are set up for teaching with sizes ranging from 350 to 1050 adult ewes. Tracking Teaching (Optional): • Farm Animal 1 – Herd/Flock Health Tracking rotation • Farm Animal 2 – Mixed Farm Animal Tracking rotation (run in collaboration with Torch Farm and Equine) • Farm Animal and Equine 4 – Mixed Large Animal Practice Tracking Rotation (run in collaboration with Hammond Vets Ltd) • Farm Animal 7 – Mixed Farm Animal Practice tracking rotation in collaboration with Aberystwyth University
Swine	Core Teaching: Core training has a 'backyard' medicine focus and is designed as such to enable all students to apply their training in both the context of backyard pet pigs which are common in the UK. Synergy Farm Health: Pig/herd resource – A small number of dedicated pet pig owners enabling all students to undertake: • Visits for individual pig examinations with group/herd health context discussed where relevant Tracking Teaching (Optional):

	• Farm Animal 1 – Herd/Flock Health Tracking rotation • Farm Animal 5 – British Quality Pigs British Quality Pigs (BQP) is part of Pilgrims UK which is a large specialist pork producer in the UK.
Poultry	Core Teaching: This training has a 'backyard' medicine focus and is designed as such to enable all students to apply their training in both the context of backyard pet poultry which are common in the UK. Synergy Farm Health: Chicken/flock resource – A small number of dedicated poultry owners enabling all students to undertake: • Visits for individual chicken clinical examinations with flock health context discussed where relevant Tracking Teaching (Optional): Working with one external collaborator in the east of England • Farm Animal 6 – Crowshall Veterinary Services Crowshall Veterinary Services is a specialist poultry practice based in the East of England. The practice has a large client resource of flocks and birds including 1100 chicken flocks with sizes ranging from 20 to 1.2 million birds, including layers, hatching and broilers. The practice also serves a large number of gamebird, duck, turkey and geese flocks.
Other	Camelid teaching occurs with Synergy Farm Health as part of Core teaching. Synergy Farm Health camelid resource – ~60 herds of camelids enabling all students to undertake structured routine herd health visits to Alpaca farms within the practice. This teaching includes health planning and individual clinical examination and handling training.

Necropsy

Table G Necropsy Table – Number of Necropsies involving Students

Species	Previous Fiscal Year	1 Fiscal Year Prior	2 Fiscal years Prior	3 Fiscal Years Prior	4 Fiscal Years Prior
Canine	217	182	184	151	199
Feline	147	90	113	78	96
Bovine	92 (250)	34	40	27	16
Caprine	16	11	12	3	5
Equine	58	36	42	20	42
Ovine	77 (900)	70	90	48	44
Porcine	24 (289)	3 (297)	13	21	12
Poultry	30 (289)	10 (297)	20	9	5
Other birds	6	1	24	15	7
Non-avian exotics	82	91	24	21	19
	23-24	22-23	21-22	20-21	19-20

Fiscal Year August-July

This table shows within parenthesis the number of animals that underwent food safety post-mortem inspection at an abattoir for cattle and sheep, and individual porcine and chicken necropsies performed on a one per student basis that contribute to the total. Bovine necropsies at an abattoir also include those carried out for fallen stock on farm rotations.

Appendix 4.4 Table H Clinical Resources – Off-Campus Facilities

Hospital Clinic, Shelter Name	Required Rotation **Y/N**	Rotation Name or Course #	Rotation Duration (Weeks)	Average No. Students/Year	Does this site receive students during at least 6m/year?* **Y/N**	Surgery **Y/N**	Necropsy **Y/N**	Clin Path **Y** on site, **Y** off site, **N**	Imaging **Y/N**	ICU **Y/N**	Isolation **Y/N**
Blue Cross Hospital	Y	Primary Care	1	300	Y	N	N	Y - Y	Y	N	Y
RSPCA: Finsbury Park Animal Hospital	Y	Primary Care - Shelter	2	300	Y	Y - FP/N - En	N	Y - Y	Y - FP/N - En	N	Y
Wood Green Godmanchester Charity	N	SA6 Shelter Medicine component	1	125	Y	Y	Y	Y - Y	Y	N	Y
London Zoo (ZSL)	N	ZA1	2	30	Y	N	Y	Y - N	Y	N	N
Howlett's Wild Animal Park	N	ZA2	2	12	N	N	Y	Y - Y	Y	N	N
Acorn House Veterinary Hospital	N	SA8	2	25	Y	Y	N	Y - Y	Y	N	Y
Coach House Vets	N	EQSA1 - Equine and Small Animal Practice - Coach House Vets	2	20	Y	Y	N	N - Y	Y	N	Y
Bell Equine Veterinary Clinic	N	EQ2	2	24	N	Y	Y	Y - N	Y	Y	Y
Buckingham Equine Vets	N	EQ3	2	27	N	N	Y	Y - N	Y	Y	N
Synergy Farm Health Ltd.	Y	Farm Animal Practice 1: Synergy A & Farm Animal Practice 2: Synergy B	4	300	Y	Y	Y	Y - Y	Y	N	N
RVC Dorset	N	Production Medicine	2	40	Y	Y	N	N - N	Y	N	N
Torch Farm Vets	N	FA2 Track	2	45	Y	Y	Y	Y - Y	Y	N	N
Hammond Vets Ltd	N	FA3 Track	2	22	Y	Y	Y	Y - Y	Y	N	N
British Quality Pigs	N	FA5 Track	2	10	N	Y	Y	Y - Y	N	N	N
Crowshall Veterinary Services	N	FA6 Crowshall	2	15	N	N	Y	Y - Y	N	N	N

Hospital Clinic, Shelter Name	Most Recent Annual Caseload by Species for Facility						Total # licensed veterinarians	Interns **Y/N**	Residents **Y/N**	Board Certified Specialists **Y/N**	# credentialed veterinary personnel	Current, New or Re-introduced?
	Canine	Feline	Equine	Bovine	Small Rum	Other						
Blue Cross Hospital, London	9,797	6,745	-	-	-	184	27	0	0	0	32	Existing
RSPCA: Finsbury Park Animal Hospital / Enfield / Finsbury Park Foster Unit.	112	4,563	-	-	-	-	3	0	0	0	5	Existing
Wood Green Godmanchester	3,340	4,757	-	-	-	1,275	6	0	0	0	15	Existing
London Zoo (ZSL)	-	-	-	-	-	3,500	12	0	2	5	6	Existing
Howletts Wild Animal Park	-	-	-	-	-	1,933	3	0	0	0	1	Existing
Acorn House Veterinary Hospital	6,926	2,866	-	-	-	358	14	0	0	0	18	Existing
Coach House Vets	4,351	578	1,897	-	119	51	5	0	0	0	2	Existing
Bell Equine Veterinary Clinic	-	-	1,077	-	-	-	26	3	1	7	9	Existing
Buckingham Equine Vets	-	-	10,107	-	-	-	8	0	0	1	5	Existing
Synergy Farm Health Ltd	-	-	-	13,807	1,721	506	60	2	3	6	23	Existing
RVC Dorset	-	-	-	102	52	17	7	0	3	2	0	Existing
Torch Farm Vets	-	-	-	5,726	1,179	237	26	2	1	2	12	Existing
Hammond Vets Ltd	-	-	1,018	636	1,114	1,262	5	0	0	0	0	Existing
British Quality Pigs	-	-	-	-	-	760,000	10	0	0	0	1	Existing
Crowshall Veterinary Services, Suf	-	-	-	-	-	2,040	13	0	1	1	4	New

Appendix 4.4 Table I Clinical Resources – Off-Campus Facilities

Off-campus site: Number & educational experience	Duration of rotation	Number of students per year	Faculty mentor approved		Off-site Evaluator	Written educational objective(s)	Educational outcomes assessed & student evaluations reviewed		
			Yes	No		Yes	No	Yes	No
Primary Care - Blue Cross (Core rotation)	1 week	300	Yes		Yes	Yes		Yes	
Primary Care - Shelter (Core rotation)	2 weeks	300	Yes		Yes	Yes		Yes	
SA6 - Shelter Medicine (Wood Green) (Track rotation)	1 week	125	yes		Yes	Yes		Yes	
ZA1 - Zoological Society London	2 weeks	30	Yes		Yes	Yes		Yes	
ZA2 - Aspinall	2 weeks	12	Yes		Yes	Yes		Yes	
SA8 - Small Animal Practice Acorn Vets (RVC)	2 weeks	25	Yes		Yes	Yes		Yes	
EQSA1 - Equine and Small Animal Practice - Coach House Vets	2 weeks	20	Yes		Yes	Yes		Yes	
EQ2 - Equine Hospital Practice - Bell Equine Veterinary Clinic	2 weeks	24	Yes		Yes	Yes		Yes	
EQ3 - Equine First Opinion Practice - Buckingham Equine Vets	2 weeks	27	Yes		Yes	Yes		Yes	
Farm Animal Practice 1: Synergy A & Farm Animal Practice 2: Synergy B (Core rotations)	4 weeks	300	Yes		Yes	Yes		Yes	
FA1 Production Medicine	2 weeks	40	Yes		Yes	Yes		Yes	
FA2 Torch (farm)	2 weeks	45	Yes		Yes	Yes		Yes	
FAEQ4 Hammonds (equine, farm)	2 weeks	22	Yes		Yes	Yes		Yes	
FA5 British Quality Pigs (pigs)	2 weeks	10	Yes		Yes	Yes		Yes	
FA6 Crowshall (poultry)	2 weeks	15	Yes		Yes	Yes		Yes	

Standard 5: Information Resources

Appendix 5.1 Key Staff – Library, IT and Digital Learning

Role	Role Holder	Qualification
Library Resources Manager	Louise Avie	
Research Support Librarian	Anna Griffiths	MSc Library and Information Studies
Information Assistant (Cataloguing)	Gemma Panayi	MA Library and Information Science
Information Assistant	Alex Seymour	MA Library and Information Studies
Information Assistant	Molly Gill	MA Library and Information Studies
Information Assistant	Barbara Doran-Twyford	
Information Assistant	Mei Yi Choi	
IT/AV & Library Services Assistant	Martin Bent	
Student Library Assistants	Various	
IT Director	Ed Spick	Member of the British Computing Society
		Postgraduate Certificate in Business Administration
		IT Information Library Foundations Certification
		PRINCE2 Foundation Certificate
		Master of Arts
		Bachelor of Arts
Head of Digital Transformation	Izzy Hamer	Member of the British Computing Society
		BCS International Diploma in Business Analysis
		BCS Professional Certificate in Business Architecture
		BCS Professional Certificate in Benefits Planning & Realisation
		BCS Professional Certificate in Data Analysis
		BCS Professional Certificate in Stakeholder Engagement
		APM Fundamentals of Project Management
		Bachelor of Arts
Head of Data and Applications	Jenny Wilshaw	Doctor of Philosophy Veterinary Medicine
		Bachelor of Veterinary Medicine
Head of IT Services	Gwyn Jervis	ITIL Service Strategy
		PRINCE2 Foundation Certificate
		ITIL Service Operation
		IT Information Library Foundations Certification
		BSc Business Information Management
Cyber Security Manager	Ed Burskys	Bachelor of Business Administration
		Bachelor of Applied Science
Director of Learning and Wellbeing (LWB)	Michele Milner	PhD, MA, MA, BA, BEd and Principal Fellow of Advance HE (PFHEA), Fellow of the Centre for Online and Distance Education, University of London.
Head of Digital Learning	Samir Patel	PGCert, PgDip, BSc
Senior Learning Technologist	Gopal Sharma	MA Education and Technology
Learning Systems Developer	Brian Merritt	MBA Technology, Management, Life.
Learning Technologist	Jago Brown	MSc Information Systems and Management
Learning Technologist	Adam Hebditch	MMus Performance (Trumpet)
Learning Systems Administrator	Adam Salem	BSc Computing
Learning Systems Administrator	Currently vacant	-
Multi-media Developer	Brian Cox	-
Digital Learning Champions	10-15 students	-
Head of Educational Development	Veronica Brewster	PhD and Fellow of Advance HE (FHEA), BSc, PGCert
Educational Developer (Curriculum)	Tamarra Jabbar	PhD, MSc, BSc Veterinary Medicine & Surgery
Educational Developer (Study Skills)	Amanda Rosier	MSc, BSc
Educational Developer (Study Skills)	Angela Burgess	PhD, MSc, BSc, Associate Fellow of Advance HE (AFHEA)
Educational Developer (Study Skills)	Jess Watson	BVM BVS Veterinary Medicine & Surgery
Learning Resources Developer	Sonya Powney	MSc, BA
Events Coordinator	Paula Mann	-
NAVLE administrator	Lucy Collins	-
Student Success Coaches	3-5 PhD students	-

Standard 6: Students

Appendix 6.1 Tables A-D
Table A. Veterinary Medical Program enrolment for last five years

Class	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025
First year	332	343	220	211	197	198
Second year	290	330	365	317	311	301
Third year	289	290	295	353	316	287
Fourth year	274	274	297	289	349	307
Fifth year	196	196	287	297	289	342
# Graduated	291	270	289	291	291	TBC
Students from other institutions enrolled for the entire clinical year only*	14	10	5	8	4	0

* Represents student or students admitted for only the clinical year from other accredited and non-accredited schools
Accelerated counted G=1;3=2;4=3;5=4 to 2020-21
Accelerated counted G=2;3=3;4=4;5=5 from 2021-22
Veterinary Gateway Programme year zero is not included, the Gateway route is counted in BVM1-5 only.

Table B. Interns, Residents, and Graduate Students (enter each person in only one category) per year for last five years

2019/0	25	66	0	0	77	145
2020/1	25	67	0	0	88	159
2021/2	26	75	0	0	79	159
2022/3	29	76	0	0	62	150
2023/4	28	78	0	0	66	142
2024/5	TBC	TBC	0	0	59	124

Table C. DVM Students per year for last five years

Academic Year	DVM		
	Total	* Min	% Min
2019/0	1387	299	21.56%
2020/1	1433	348	24.28%
2021/2	1469	377	25.66%
2022/3	1469	430	29.27%
2023/4	1465	478	32.63%
2024/5	1436	522	36.35%

*Min – student from historically underrepresented ethnic groups including Black, Asian , mixed and other ethnicities (both home and international)
To note: the description of the ethnicities is the one the OfS uses.

Table C. DVM Students per year for last five years (UK Nationals only)

Academic Year	DVM		
	Total	* Min	% Min
2019/0	908	105	11.56%
2020/1	899	123	13.68%
2021/2	862	126	14.62%
2022/3	767	127	16.56%
2023/4	720	143	19.86%
2024/5	622	132	21.22%

Min= students from historically underrepresented ethnic groups including Black, Asian, mixed and other ethnicities. UK nationals only.

Table D. Other educational programs

Year	ACTIVITIES		
	Veterinary Technician Program *Number enrolled*	**Undergraduate Programs** *Number enrolled*	**Other** *Number enrolled*
2019/20	191	413	317
2020/21	194	390	329
2021/22	184	424	287
2022/23	172	446	261
2023/24	177	458	272
2024/25	187	462	285

*Veterinary Nurses
** All other undergraduate students Not Vets and Not Veterinary Nurses
*** All other non-Master's Postgraduate not captured in Table B

Appendix 6.2 RVC Students' Union (SU) Clubs and Societies

Clubs	Societies
1. Badminton 2. Basketball 3. Boat Club 4. Equestrian Team 5. Hockey 6. Ice Skating 7. Judo Club 8. Men's Football 9. Men's Rugby 10. Netball 11. Polo 12. Pole Fitness 13. Riding Club 14. Rounders & Dodgeball 15. RVC Dance 16. Squash Club 17. Touch Rugby 18. Triathlon & Athletics 19. UoL Canoe Polo - Active for all UoL members, not run by RVCSU 20. Volleyball 21. Women's Football 22. Women's Rugby	1. Farm Animal Veterinary Society (FAVS) 2. Student Equine Veterinary Association (SEVA) 3. Shelter Medicine 4. Student Small Animal Veterinary Society (SSAVS) 5. Student Animal Welfare 6. Surgical Society 7. Student Veterinary Emergency and Critical Care Society (SVECCS) 8. Student chapter of the American College of Veterinary Internal Medicine (SCACVIM) 9. Art Society 10. Asian Society 11. Caledonian Society 12. Christian Union 13. Islamic Society 14. Jewish Society 15. K-Pop Society 16. Line Dancing 17. Mature Students Association 18. Motorsports 19. Mountaineering 20. Music Society 21. Nerd Society 22. Neurodivergent Society 23. Performing Arts Society 24. RVC LGBTQ+ 25. RVC Snow 26. RVC Sub Aqua 27. South Asian Society 28. Veggie & Vegan 29. Zoo Society

Standard 7: Admission

Appendix 7.1 Table A

Year*	UK Fee payers		Non-UK Fee Payers		CONTRACT STUDENTS		TOTAL	
	A/P**	O/A***	A/P	O/A	A/P	O/A	A/P	O/A
2020	1449/199	360/222	517/104	311/127	5/5	5/5	1971/303	676/349
2021	1527/178	234/138	788/115	347/183	8/8	8/8	2323/293	589/321
2022	1575/173	193/114	859/146	413/199	4/4	4/4	2438/319	610/312
2023	1295/170	198/111	924/135	404/174	0/0	0/0	2219/305	602/285
2024	1266/106	174/101	1256/195	442/192	0/0	0/0	2522/301	616/293

* Academic year of entry (e.g., 2020 = 2020/1)
**A/P = Applications/Positions Available
***O/A = Offers Made/Acceptances
Data includes students from BVetMed 5-year, Graduate Accelerated and Gateway routes.

Standard 8: Faculty

Appendix 8.1 Table A: Loss and recruitment of faculty (both tenure track and clinical track/equivalent) for past 5 years.

Department	Discipline/Speciality	2021		2022		2023		2024		2025		Total Gained	Total Lost
		Gained	Lost	Gained	Lost	Gained	Lost	Gained	Lost	Gained	Lost		
Clinical Science and Services	Anaesthesia and Analgesia		4	3	1	1		2	2			6	7
	Cardiology					1						1	
	Clinical Skills		1			1	3	2				3	4
	Diagnostic Imaging	1		2	2			1	2			4	4
	Emergency and Critical Care					1			1			1	1
	Equine			2	1	1		1				4	1
	Medicine					1						1	
	Ophthalmology					1		2	1			3	1
	Orthopaedics		2										2
	Radiology					3	1					3	1
	Small Animal	2	2	5	2			5	7	2	2	14	13
	Surgery					2	1			1	1	3	2
	Veterinary Dermatology							1			1	1	1
	Veterinary Education	2			1				1			2	2
	Veterinary Nursing		2	2			1		1			2	4
	Veterinary Oncology	1		2	1	2	1	1	2			6	4
	Veterinary Science					1						1	
	Neurology & Neurosurgery					2			2			2	2
	Lifelong Independent Veterinary Education					1						1	
Comparative Biomedical Sciences	**Basic Sciences**							2		1	1	3	1
	Biomedical Science		1			3	1		1			3	3
	Comparative Endocrinology		1										1
	Reproductive Immunology				1								1
	Veterinary Anatomy				1								1
	Pharmacology						1						1
Pathobiology & Population Sciences	Animal Management	2										2	
	Animal Welfare Science and Ethics					1						1	
	Antimicrobial Resistance										1		1
	Clinical and Veterinary Microbiology				1								1
	Clinical Pathology		1						2				3
	Farm Animal Pathology			1								1	
	Human-Animal Interactions and Ethics				1								1
	International Development										1		1
	One Health							1				1	
	One Welfare							1				1	
	Pathobiology and Population Science		1										1
	Small Ruminant Health and Flock Management	1										1	
	Veterinary & Animal Ethics			1								1	

	Veterinary Bacteriology						1						1
	Veterinary Clinical Microbiology	1										1	
	Veterinary Parasitology							1	1			1	1
	Veterinary Pathology		1										1
	Veterinary Public Health			1								1	
	Virology			1								1	
	Wildlife, Health and Emerging Disease			1	1							1	1
	Conservation Medicine					1						1	
	Zoo and Wildlife Pathology					1						1	
	Veterinary Epidemiology, Economics & Public Health Group					1		2				3	
	Farm Animal Health & Production Group					1						1	
	Social Sciences						1						1
	Total	**10**	**16**	**21**	**13**	**26**	**11**	**22**	**23**	**4**	**7**	**83**	**70**

Appendix 8.1 Table B: Staff support for teaching and research

AREA	FTE Clerical	FTE Technical	Other
Clinical Teaching	129.97	202.01	21.83
Non-Clinical Teaching	177.81	12.24	0.00
Research	13.29	34.22	0.00
TOTAL	**321.07**	**248.47**	**21.83**

Appendix 8.2 Table C – Faculty Table by Rank and Highest Level of Education

CVM Faculty Table by Rank and Highest Level of Education									
Title	**Bachelors Only**	**Masters**	**Non-DVM Doctorate**	**DVM ** only**	**DVM+Masters**	**DVM+ Doctorate**	**DVM+ Board Certified**	**DVM+ Board Certified+Masters**	**DVM+ Board Certified+ Doctorate**
Administrator	0	4	3		2	2	3	2	1
Professor*	0	16	11	0	13	25	21	10	16
Associate Professor*	0	35	29	0	20	22	29	15	11
Assistant Professor*	23	4	0	11	4	0	3	2	0
Instructor	15	1	0	15	1	0	0	0	0
Lecturer	9	38	18	7	31	12	29	21	5
Part-time Faculty (<75% time)	12	10	7	13	12	6	16	7	4

* include all 'track' types - for example, tenure track, non-tenure track, clinical track, practice track, research track

** DVM or equivalent – for example, VMD, BVSc, BVM

Appendix 8.2 Table D - CVM Faculty Table by Department

Dept (*Group by Department*)	Name	Rank	Classification (Tenure/ Non-Tenure/ Other Classification	DVM (Year Graduated)	Education (Degrees)	Advanced training (e.g. board, certification, MS, PhD)	Other Qualifications*(as described in 8.14)	Area(s) of Curricular Responsibility	FTE with college	% Teaching
CBS	*Stephen Frean*	*Associate Professor*	*Tenure Track*	*1990*	*BVSc*	*PhD*	*FHEA, MRCVS*	*Anatomy and Physiology*	*1.0*	*100*
CBS	*Claire Russell*	*Associate Professor*	*Tenure Track*		*BSc(Hons)*	*DPhil, PGCAP*		*Embryology*	*1.0*	*30*
CBS	*Donald Palmer*	*Associate Professor*	*Tenure Track*		*BSc(Hons)*	*MSc, PhD, PGCAP*	*FHEA, FRSB*	*Immunology*	*1.0*	*70*
CBS	*Sarah Channon*	*Associate Professor*	*Tenure Track*		*BSc*	*MSc, PhD*	*FHEA*	*Anatomy and Physiology*	*1.0*	*70*
CBS	*Isabel Orriss*	*Associate Professor*	*Tenure Track*		*BSc*	*PhD*	*FHEA*	*Cell Biology*	*1.0*	*50*
CBS	*Raymond Macharia*	*Associate Professor*	*Tenure Track*	*1987*	*DVM*	*MSc, PGCAP, PhD*		*Anatomy and Physiology*	*1.0*	*100*
CBS	*Yu-Mei Chang*	*Associate Professor*	*Tenure Track*		*CStat*	*PhD*		*Informatics*	*1.0*	*50*
CBS	*Gemma Brierley*	*Lecturer*	*Tenure Track*		*BSc*	*PGCert(VetEd), PhD*	*FHEA*	*Anatomy and Physiology*	*1.0*	*30*
CBS	*Elisavet Vasilopoulou*	*Associate Professor*	*Tenure Track*	*2021*	*BSc*	*PhD*		*Anatomy and Physiology*	*1.0*	*50*
CBS	*Elizabeth Finding*	*Lecturer*	*Tenure Track*	*2005*	*BVetMed (Hons)*	*MVetMed, PhD, DipACVIM (LAIM), Cert VA*	*FHEA, MRCVS*	*Anatomy and Physiology*	*1.0*	*50*
CBS	*Adam Fellows*	*Lecturer*	*Tenure Track*		*BSc*	*PhD*		*Anatomy and Physiology*	*1.0*	*50*
CBS	*Ashton Faulkner*	*Lecturer*	*Tenure Track*		*BSc*	*PGCert(VetEd), PhD*	*FHEA*	*Anatomy and Physiology*	*1.0*	*30*
CBS	*Christina Beaton-Warboys*	*Lecturer*	*Tenure Track*		*BSc*	*PhD*		*Anatomy and Physiology*	*1.0*	*50*
CBS	*Renato Previdelli*	*Lecturer*	*Tenure Track*	*2017*	*MIMV*	*Cert AVP,MScVetEd, PhD*	*SFHEA, MRCVS*	*Anatomy and Physiology*	*1.0*	*70*
CBS	*Lisa Thurston*	*Lecturer*	*Tenure Track*	*1995*	*BSc*	*PhD*		*Anatomy and Physiology*	*0.5*	*100*
CBS	*Abir Mukherjee*	*Lecturer*	*Tenure Track*		*BSc*	*PGCAP, MSc, PhD*	*FHEA*	*Anatomy and Physiology*	*1.0*	*50*
CBS	*Andrea Gaede*	*Lecturer*	*Tenure Track*		*BSc*	*PhD*		*Biomechanics*	*1.0*	*50*
CBS	*Chantal Chenu*	*Professor*	*Tenure Track*		*HDR*	*PhD*		*Anatomy and Physiology*	*1.0*	*30*

CBS	James Usherwood	Professor	Tenure Track		BA	MRes, PhD		Biomechanics	1.0	30
CBS	Jonathan Elliott	Professor	Tenure Track	1985	Vet MB	DipECVPT, Cert SAC, MA, PhD	FHEA, MRCVS	Clinical Pharmacology	0.5	30
CBS	Richard Bomphrey	Professor	Tenure Track		BSc Biological Sciences	PGCert(VetEd), PhD		Biomechanics	1.0	30
CBS	John Hutchinson	Professor	Tenure Track		BS	PGCAP, PhD		Biomechanics	1.0	5
CBS	Alan Wilson	Professor	Tenure Track	1987	BSc BVMS	PhD	FHEA, MRCVS, FRS	Biomechanics	1.0	10
CBS	Patrick Lewis	Professor	Tenure Track		BSc	PhD		Neurosciences	1.0	30
CBS	Andrew Pitsillides	Professor	Tenure Track		BSc	PhD, DSc		Anatomy and Physiology	1.0	30
CBS	Ali Fouladi-Nashta	Associate Professor	Tenure Track	1987	DVM	MSc, PhD	FHEA	Reproduction	1.0	30
CBS	Denis Larkin	Associate Professor	Tenure Track		BSc	MSc, PhD		Anatomy and Physiology	1.0	30
CBS	Claire Thornton	Associate Professor	Tenure Track		BSc	PGCAP, PhD		Anatomy and Physiology	1.0	30
CBS	Scott Roberts	Associate Professor	Tenure Track		BSc	PhD	FHEA	Anatomy and Physiology	1.0	30
CBS	Antonio Galvao	Associate Professor	Tenure Track	2006	DVM	PhD	MRCVS	Reproduction	1.0	30
CBS	Chavaunne Thorpe	Associate Professor	Tenure Track		BSc	PGCert(VetEd), PhD		Anatomy and Physiology	1.0	30
CBS	Christopher Richards	Associate Professor	Tenure Track		BSc	PGCert(VetEd), PhD		Anatomy and Physiology	1.0	30
CBS	Matthew Gage	Associate Professor	Tenure Track		BSc	PGCert(VetEd), PhD	FHEA	Anatomy and Physiology	1.0	50
CBS	Caroline Pellet-Many	Associate Professor	Tenure Track		BSc	MSc, PhD		Anatomy and Physiology	1.0	50
CBS	Bradley Cobb	Associate Professor	Tenure Track		BSc	PGCAP		Anatomy and Physiology	1.0	50
CBS	Helen Stolp	Associate Professor	Tenure Track		BSc	PhD	FHEA	Pharmacology	1.0	50
CBS	Emma Boardman	Lecturer	Non-Tenure Track	2009	BVetMed	PGDip(VetEd), MSc	FHEA, MRCVS	Anatomy and Physiology	1.0	100
CBS	Andrew Hibbert	Lecturer	Non-Tenure Track		BSc	PhD	FHEA, FRMS	Anatomy and Physiology	1.0	100
CBS	Steven Allen	Lecturer	Non-Tenure Track		BSc	PGCAP, PhD	FHEA	Embryology and Genomics	1.0	100

CBS	Katherine Pickles	Assistant Professor	Non-Tenure Track	2018	BVM BVS	PGCert(VetEd)	FHEA, MRCVS	Anatomy and Physiology	1.0	100
CBS	Ariana Roscoe	Assistant Professor	Non-Tenure Track	2021	BVSci		MRCVS	Curricular Support	1.0	100
CBS	Saira Khurshid Akhtar	Lecturer	Non-Tenure Track	2016	BVetMed	PGCert(VetEd)	MRCVS	Anatomy and Physiology	1.0	100
CBS	Caroline Wheeler-Jones	Professor	Tenure Track		BSc(Hons)	PhD	FHEA	Cardiovascular Physiology and cell signalling	1.0	40
CSS	Elisabetta Mancinelli	Lecturer	Tenure Track	2002	DVM	Dip SMMS	FHEA, MRCVS	Exotic medicine	0.5	70
CSS	Victoria Baldrey	Associate Professor	Tenure Track	2003	BSc(Hons), BVSc	DZooMed(Avian)	FHEA, MRCVS	Exotic medicine	0.8	70
CSS	Joanna Hedley	Associate Professor	Tenure Track	2003	BVM&S	PGCert(VetEd), DipECZM (Herpetology), DZooMed(Reptilian)	MRCVS	Exotic medicine	1.0	70
CSS	Jill Maddison	Professor	Tenure Track	1979	BVSc	DipVetClinStud, PhD	FHEA, MRCVS, FACVSc	Small Animal Internal Medicine	0.6	70
CSS	Richard Piercy	Professor	Tenure Track	1994	VetMB	DipACVIM, MS, MA, PhD	FRCVS	Equine Medicine and neurology	1.0	5
CSS	Nichola Coombes	Lecturer	Tenure Track	1994	RVN, VetEd	MSc	FHEA	Clinical Skills	0.8	7
CSS	Fiona Brown	Assistant Professor	Non-Tenure Track	2002	BSc(Hons), RVN	PGDipVetEd	FHEA	Clinical Skills	0.5	100
CSS	Carly Tyler	Assistant Professor	Non-Tenure Track		BSc Equine Studies	RVN	FHEA	Curricular Support	1.0	100
CSS	Christina Maden	Assistant Professor	Non-Tenure Track		BSc(Hons), RVN	PGCert(VetEd)	FHEA	Clinical Skills	1.0	100
CSS	Clodagh Mullins	Assistant Professor	Non-Tenure Track	2021	BVetMed		MRCVS	Clinical Skills	1.0	100
CSS	Laura McGillycuddy	Assistant Professor	Non-Tenure Track	2005	BVetMed		MRCVS	Curricular Support	1.0	100
CSS	Emily Bowcock	Assistant Professor	Non-Tenure Track	2020	BVSc		MRCVS	Curricular Support	0.6	100
CSS	Charlotte Fenn	Assistant Professor	Non-Tenure Track	2009	BVM		MRCVS	Curricular Support	0.6	100

CSS	Anna Dalton	Assistant Professor	Non-Tenure Track	2001	VetMB	CertES(Orth), MA	FHEA, MRCVS	Equine Primary Care practice	0.4	100
CSS	Michael Hewetson	Associate Professor	Tenure Track	1999	BSc, BVSc	DipECEIM, CertEM(Int.med), PhD	FHEA, MRCVS	Equine Medicine	1.0	70
CSS	Jayesh Dudhia	Associate Professor	Tenure Track		BSc(Hons)	PGCert(VetEd), PhD	FHEA	Research project supervisor	0.4	50
CSS	Tahiyya Shaik	Assistant Professor	Non-Tenure Track	2014	BVSc		MRCVS	Rotation teaching - Equine Diagnostic Imaging	1.0	10
CSS	Andrew Fiske-Jackson	Associate Professor	Tenure Track	2004	BVSc	MVetMed, DipECVS	FHEA, MRCVS	Equine Surgery	1.0	70
CSS	Bettina Dunkel	Professor	Tenure Track	2001	DVM	DipACVIM, DipECEIM, DipACVECC, PhD	FHEA, MRCVS	Equine Medicine	1.0	70
CSS	Rupert Dash	Lecturer	Tenure Track	2016	BVetMed	MVetMed, TLiHE	MRCVS	Diagnostic imagining (equine)	1.0	70
CSS	Jennifer Reed	Lecturer	Tenure Track	2011	BVM	PGCert(VetEd), DipACVIM(LAIM)	FHEA, MRCVS	Equine Medicine	1.0	70
CSS	Alexander Hawkins	Lecturer	Tenure Track	2015	BSc Path, BVSc	MVetMed	FHEA, MRCVS	Equine Surgery	1.0	70
CSS	Justin Perkins	Professor	Tenure Track	1998	BVetMed MS, CertES	DipECVS	FHEA, MRCVS	Equine surgery	1.0	10
CSS	Nicola Menzies-Gow	Professor	Tenure Track	1997	VetMB	CertEM(IntMed), DipECEIM, MA, PhD	FHEA, FRCVS	Equine Medicine	0.4	50
CSS	Roger Smith	Professor	Tenure Track	1987	VetMB	MA, DipECVS, DEO, DipECVDI, DipECVSMR, PhD	FHEA, FRCVS	Equine Surgery	1.0	30
CSS	Dagmar Berner	Associate Professor	Tenure Track	2010	DrMedVet	PGCert(VetEd), DipECVDI	FHEA, MRCVS	Diagnostic imaging (equine)	1.0	70
CSS	Melanie Perrier	Associate Professor	Tenure Track	2004	DrMedVet	PGCert(VetEd), DipECVS, DipACVS, CERP	MRCVS	Equine surgery	1.0	70
CSS	David Bolt	Associate Professor	Tenure Track	1994	DrMedVet	MS, DipECVS, DipACVS, DipECVDI (Associate - Large Animal)	FHEA, MRCVS	Equine surgery	1.0	70
CSS	Elizabeth Armitage-Chan	Professor	Tenure Track	2001	Vet MB	DipACVAA, PGCAP, PhD	FHEA, MRCVS	Veterinary Education and Professional skills	0.9	50
CSS	Tierney Bennett	Lecturer	Tenure Track		BSc	PGCert(VetEd), DipECVAA, MSc, DipECVAA, PhD	FHEA	Veterinary Education and Professional skills	0.5	50
CSS	Emily Hall	Lecturer	Tenure Track	2007	VetMB	PGCAP , MA	FHEA, MRCVS, MRSB	Veterinary Education and Professional skills	1.0	100
CSS	Rachel Davis	Associate Professor	Tenure Track		BSc	PGCAP, PhD		Veterinary Education and Professional skills	0.8	50
CSS	Avril Senior	Associate Professor	Tenure Track	1997	BVSc	MA	FHEA, MRCVS	Veterinary Education and Professional skills	0.4	70

CSS	Judith Bradbury	Lecturer	Non-Tenure Track		BVSc	MVetMed	FHEA MRCVS	Principles of Veterinary Practice	1.0	70
CSS	Rosamund Ford	Lecturer	Non-Tenure Track	2004	BSc Vet Medicine & Surgery	PGCert(VetEd)	FHEA, MRCVS	Principles of Veterinary Practice	0.7	100
CSS	Emma Driver	Lecturer	Non-Tenure Track	2017	BVMS	PGCert(VetEd)	FHEA, MRCVS	Principles of Veterinary Practice	1.0	100
CSS	Thaleia-Rengina Stathopoulou	Associate Professor	Tenure Track	2009	DVM	MVetMed, DipECVAA, TLiHE	FHEA, MRCVS	Anaesthesia & analgesia	1.0	70
CSS	Mari Kaartinen	Lecturer	Tenure Track	2001	MSc	PGCert(VetEd), DipECVAA, PhD	FHEA, MRCVS	Anaesthesia & analgesia	1.0	70
CSS	Aoife Ryan	Lecturer	Tenure Track	2016	BVetMed	DipECVAA	FHEA, MRCVS	Anaesthesia & analgesia	1.0	70
CSS	Iris Veen	Lecturer	Tenure Track	2013	DVM	DipECVAA	MRCVS	Anaesthesia & analgesia	1.0	70
CSS	Nicola Ho	Lecturer	Tenure Track	2017	BVetMed	PGCert(VetEd) , MVetMed, DipACVAA	FHEA, MRCVS	Anaesthesia & analgesia	1.0	70
CSS	Ludovic Pelligand	Professor	Tenure Track	2001	DrMedVet	DipECVAA, DipECVPT, CertVA , PhD	FHEA, MRCVS	Anaesthesia & analgesia	1.0	50
CSS	Carolina Palacios Jimenez	Associate Professor	Tenure Track	2000	DVM	PGCert(VetEd), DipECVAA, CertVA, PhD	FHEA, MRCVS	Anaesthesia & analgesia	1.0	70
CSS	Marc Armour	Assistant Professor	Non-Tenure Track	2018	BVetMed	MVetMed	MRCVS	Anaesthesia & analgesia	1.0	10
CSS	Cristina Parra Martinez	Assistant Professor	Non-Tenure Track		BVSc		MRCVS	Anaesthesia & analgesia	1.0	10
CSS	Sophie Mead	Assistant Professor	Non-Tenure Track	2018	VetMB	MA	MRCVS	Anaesthesia & analgesia	1.0	10
CSS	Joshua Hannabuss	Lecturer	Tenure Track	2016	BVetMed	PGDipVCP, MVetMed, DipACVIM	MRCVS	Cardiology	1.0	70
CSS	Alice Morey	Lecturer	Tenure Track	2018	BVM&S	MS, DipACVIM	MRCVS	Cardiology	1.0	70
CSS	David Connolly	Professor	Tenure Track	1988	BSc, BVetMed	CertVC, CertSAM, DipECVIM, PhD	FHEA, MRCVS	Cardiology	1.0	50
CSS	Virginia Luis Fuentes	Professor	Tenure Track	1984	VetMB	MA, CertVR, DipACVIM, DipECVIM, DVC, PhD	FHEA, MRCVS	Cardiology	1.0	50
CSS	Anke Hendricks	Associate Professor	Tenure Track	1995	DrMedVet	PGCertAP, CertVD, DipECVDI	FHEA, MRCVS	Dermatology	0.6	70
CSS	Ross Bond	Professor	Tenure Track	1985	BVMS	DipECVD, DipACVD, PhD	FHEA, MRCVS	Dermatology	1.0	50

CSS	Anette Loeffler	Professor	Tenure Track	1994	DrMedVet	DipECVD, Dip ACVD, PhD	FHEA, MRCVS	Dermatology	1.0	50
CSS	Ewan Ferguson	Lecturer	Non-Tenure Track		BVMS	DVD	FHEA, MRCVS	Dermatology	0.8	70
CSS	Stefano Cortellini	Associate Professor	Tenure Track	2010	DMV	MVetMed, DipACVECC, DipECVECC	FHEA, MRCVS	Emergency & Critical Care	1.0	70
CSS	Dominic Barfield	Associate Professor	Tenure Track	2002	BSc, BVSc	MVetMed, DipACVECC, DipECVECC	FHEA, MRCVS	Emergency & Critical Care	1.0	70
CSS	Laura Cole	Lecturer	Tenure Track	2011	VetMB	PGCert(VetEd), MA, DipAVECC, TLiHE	FHEA, MRCVS	Emergency & Critical Care	1.0	70
CSS	Erica Tinson	Lecturer	Tenure Track	2008	BSc, BVSc(Hons)	DipACVECC, MVS	FHEA, MRCVS	Emergency & Critical Care	1.0	70
CSS	Karen Humm	Professor	Tenure Track	2001	VetMB	CertVA, DipACVECC, DipECVECC, MA, MSc	FHEA, MRCVS	Emergency & Critical Care	0.8	70
CSS	Simon Cook	Associate Professor	Tenure Track	2011	BVSc	DipACVECC, DipECVECC	FHEA, MRCVS	Emergency & Critical Care	1.0	70
CSS	Thomas Greensmith	Associate Professor	Tenure Track	2010	BVetMed	PGCert(VetEd), MVetMed, DipACVECC, DipECVECC	FHEA, MRCVS	Emergency & Critical Care	1.0	70
CSS	Hannah Matson	Assistant Professor	Non-Tenure Track	2016	DVM	MVetMed, DipACVECC, DipECVECC	MRCVS	Emergency & Critical Care	1.0	10
CSS	Barbara Glanemann	Associate Professor	Tenure Track	2001	DrMedVet	PGCert(VetEd), DipECVIM-CA	FHEA, MRCVS	Small Internal Medicine	0.8	50
CSS	Aarti Kathrani	Associate Professor	Tenure Track	2006	BVetMed(Hons)	DipACVIM (Nutrition), PhD	FHEA, MRCVS	Small Internal Medicine and Nutrition	1.0	50
CSS	Jack Lawson	Lecturer	Tenure Track	2009	BVetMed	MVetMed, DipACVIM, PhD	FHEA, MRCVS	Small Internal Medicine	1.0	70
CSS	Rebecca Geddes	Lecturer	Tenure Track	2007	VetMB	GPCert(FeIP), PGCert(VetEd), MA, MVetMed, DipACVIM, TLiHE, PhD	FHEA, MRCVS	Small Internal Medicine	1.0	50
CSS	Sarah Tayler	Lecturer	Tenure Track	2015	BVetMed(Hons)	MVetMed, DipACVIM, TLiHE, PGDipVCP	FHEA, MRCVS	Small Internal Medicine	1.0	70
CSS	Rosanne Jepson	Professor	Tenure Track	2003	BVSc	PGCert(VetEd), MVetMed, DipACVIM, DipECVN, PhD	FHEA, MRCVS	Small Internal Medicine	1.0	50
CSS	Harriet Syme	Professor	Tenure Track	1994	BSc, BVetMed	DipACVIM, DipECVN, PhD	FHEA, MRCVS	Small Internal Medicine	1.0	50
CSS	Lucy Davison	Professor	Tenure Track	1997	VetMB	MA, DipECVN-CA, DSAM , PhD	FHEA, MRCVS	Small Internal Medicine	1.0	0
CSS	Ruth Gostelow	Associate Professor	Tenure Track	2006	BVetMed(Hons)	PGCert(VetEd), MVetMed, DipACVIM, DipECVN-CA, PhD	FHEA, MRCVS	Small Internal Medicine	0.8	50
CSS	Christopher Scudder	Associate Professor	Tenure Track	2007	BVSc	MVetMed, DipACVIM-SAIM, DipECVN-CA, PhD	FHEA, MRCVS	Small Internal Medicine	1.0	50
CSS	Androniki Psifidi	Associate Professor	Tenure Track	2004	DVM	PGCert(VetEd) , PhD	FHEA, AUA	Genomics	1.0	30
CSS	Elsa Beltran	Associate Professor	Tenure Track	2002	Ldo Vet	PGCert(VetEd), DipECVN	FHEA, MRCVS	Neurology	0.4	70

CSS	Joseph Fenn	Associate Professor	Tenure Track	2009	BVetMed	MVetMed, DipECVN	FHEA, MRCVS	Neurology	1.0	70
CSS	Abbe Crawford	Lecturer	Tenure Track	2008	BVM&S, BSc	PGCert(VetEd) , PhD	FHEA, MRCVS	Neurology	1.0	70
CSS	Sophie Wyatt	Lecturer	Tenure Track	2012	BVetMed(Hons)	MVetMed, DipECVN, TLiHE	FHEA, MRCVS	Neurology	1.0	70
CSS	Steven De Decker	Professor	Tenure Track	2005	DVM	PGCert(VetEd), MVetMed, DipECVN, TLiHE, PhD	FHEA, MRCVS	Neurology	1.0	70
CSS	Alberta De Stefani	Associate Professor	Tenure Track	2001	DrVetMed	PGCert(VetEd) , DipECVN, PhD	FHEA, MRCVS	Neurology	1.0	70
CSS	Kishan Sharma	Assistant Professor	Non-Tenure Track	2021	BVMSci Vet Med		MRCVS	Curricular Support	1.0	20
CSS	Francesco Rogato	Lecturer	Tenure Track	2017	DVM	MVetMed, DipACVECC	MRCVS	Oncology	1.0	70
CSS	Alexandra Guillen	Associate Professor	Tenure Track	2013	DVM	PGCert(VetEd), DipECVN	FHEA, MRCVS	Oncology	1.0	70
CSS	Andrew Yale	Lecturer	Tenure Track	2015	BVMedSci(Hons) , BVM, BVS(Hons)	PgDipVCP, MVetMed, DipECVN-CA (Oncology), TLiHE	FHEA, MRCVS	Oncology	1.0	70
CSS	Isabelle Desmas-Bazelle	Lecturer	Tenure Track	2008	DVM	MVetMed, DipACVIM (Oncology), TLiHE	FHEA, MRCVS	Oncology	0.6	70
CSS	Serena Maini	Lecturer	Tenure Track	2007	BVS	PGCert(VetEd)	FHEA, MRCVS	Ophthalmology	0.8	70
CSS	Charlotte Dawson	Associate Professor	Tenure Track	2009	BVetMed	MVetMed, DipECVO, TLiHE	FHEA, MRCVS	Ophthalmology	0.8	70
CSS	Roser Tetas Pont	Associate Professor	Tenure Track	2006	DVM	MSc., DipECVO , PGCert(VetEd)	FHEA, MRCVS	Ophthalmology	0.8	70
CSS	Maria-Christine Fischer	Associate Professor	Tenure Track	2012	Dr.med.vet.	DipECVO	FHEA, MRCVS	Ophthalmology	0.4	70
CSS	Amy Andrews	Assistant Professor	Tenure Track	1993	BSc, BVetMEd	PGDipVetEd,MVetMed, DipECVO	MRCVS	Ophthalmology	0.2	70
CSS	Joshua Winter	Lecturer	Tenure Track	2017	BVetMed	PGDipVCP, MVetMed, DipECVS	MRCVS	Small Animal Surgery	1.0	70
CSS	Helen Strickland	Lecturer	Tenure Track	2012	BVetMed	MVetMed, DipECVS	FHEA, MRCVS	Small Animal Surgery	1.0	70
CSS	Carlos Sanchez Villamil	Lecturer	Tenure Track	2016	DVM	CertAVP, DipECVS	FHEA, MRCVS	Small Animal Surgery	1.0	70
CSS	Charlotte Banks	Lecturer	Tenure Track	2018	DVM	PGDipVCP, MVetMed, DipECVS	MRCVS	Small Animal Surgery	1.0	70
CSS	Richard Meeson	Professor	Tenure Track	2007	VetMB	PGCert(VetEd), MA, MVetMed, ECVS, PhD	FHEA, FRCVS	Small Animal Surgery	1.0	50
CSS	Matthew Pead	Associate Professor	Tenure Track	1984	BVetMed	CertSAO, PhD	FHEA, MRCVS	Small Animal Surgery	0.6	70

CSS	Martina Li	Assistant Professor	Non-Tenure Track	2019	BVetMed		FHEA, MRCVS	Curricular Support	1.0	100
CSS	Tanja Vedel	Lecturer	Tenure Track		DVM	DipECVDI	MRCVS	Diagnostic Imaging (small animal)	0.4	70
CSS	Angel Cesar Llanos Diez	Lecturer	Tenure Track		Ldo Vet	CertAVP, MVetMed, DipECVDI	MRCVS	Diagnostic imaging (small animal)	0.9	70
CSS	Luis Mate De Haro	Lecturer	Tenure Track	2015	BVM	DipECVDI	MRCVS	Diagnostic imaging (small animal)	0.6	100
CSS	Helen Dirrig	Lecturer	Tenure Track	2011	BVetMed(Hons)	PGCert(VetEd) , MVetMed, DipECVDI, DipACVR	FHEA, MRCVS	Diagnostic imaging (small animal)	0.5	70
CSS	Francisco Llabres-Diaz	Associate Professor	Tenure Track	1998	DVR	PGCert(VetEd), DipECVDI	MRCVS	Diagnostic imaging (small animal)	1.0	70
CSS	Foteini Kormpou	Assistant Professor	Tenure Track	2014	DVM	PGCert(DI), PGDip(VCP)	MRCVS	Diagnostic imaging (small animal)	0.6	70
CSS	Victoria Lipscomb	Professor	Tenure Track	1996	VetMB	CertSAS, MA, DipECVS,	FHEA, MRCVS	Small Animal Surgery	1.0	70
CSS	Rebekah Knight	Lecturer	Tenure Track	2012	BVetMed	DipECVS, PgC(SAS) PGDip(VCP)	FHEA, MRCVS	Small Animal Surgery	1.0	70
CSS	Anna Frykfors Von Hekkel	Lecturer	Tenure Track	2013	BVetMed(Hons)	PGCert(VetEd) MVetMed, DipECVS, TLiHE, PGDipVCP	FHEA, MRCVS	Small Animal Surgery	1.0	70
CSS	Floryne Buishand	Associate Professor	Tenure Track	2010	DVM	DipECVS, PhD	FHEA, MRCVS	Small Animal Surgery	1.0	50
CSS	Matthew Simpson	Lecturer	Tenure Track	2016	BVMS	MVetMed, DipECVS	FHEA, MRCVS	Small Animal Surgery	1.0	70
CSS	Daniel Brockman	Professor	Tenure Track	1987	BVSc	DipECVS, DipACVS, CertVR CertSAO	FHEA	Small Animal Surgery	1.0	50
CSS	Christiane Kafarnik	Associate Professor	Tenure Track	2001	Dr.med.vet	DipECVO, PhD	FHEA, MRCVS	Ophthalmology	0.8	50
CSS	Matteo Rossanese	Associate Professor	Tenure Track	2009	DVM	PGCert(VetEd), MSc., SPSA, CertAVP	FHEA, MRCVS	Small Animal Surgery	1.0	70
CSS	Oliver Taylor	Assistant Professor	Non-Tenure Track	2017	BVetMed	MVetMed, DipECVS	MRCVS	Small Animal Surgery	1.0	20
CSS	Christopher Webb	Assistant Professor	Non-Tenure Track	2012	VetMB	PGCert(VetEd) , MA	MRCVS	Curricular Support	1.0	20
CSS	Hayley Carne	Lecturer	Tenure Track		RVN, BSc(Hons)	Grad Dip VN, PGCert(VetEd)		Interprofessional Skills	1.0	15
CSS	Hilary Orpet	Associate Professor	Tenure Track		RVN, BSc(Hons)	CertEdDipCABT(COAPE), MSc VetEd, DipAVN(Surgical)	FHEA	Interprofessional Skills	1.0	15
CSS	Marie Jones	Lecturer	Non-Tenure Track	2007	RVN BSc Hons	Cert Ed DipAVN(Medical)	FHEA	Interprofessional Skills	1.0	15

CSS	Sarah Batt-Williams	Lecturer	Non-Tenure Track		VetEd	MSc.		Interprofessional Skills	1.0	15
CSS	Samantha McGaw	Assistant Professor	Non-Tenure Track		RVN BSc Hons	PGCert(VetEd)	FHEA	Interprofessional Skills	0.4	15
CSS	Evelyn O'Byrne	Lecturer	Non-Tenure Track		DipAVN(Med) RVN	PGCert(VetEd)		Interprofessional Skills	0.8	15
CSS	Niamh Clancy	Lecturer	Non-Tenure Track		Dip AVN (SA), DipHE CVN, DipVN, RVN	PGCert(VetEd)	FHEA	Interprofessional Skills	0.8	15
CSS	Kelly Druce	Assistant Professor	Non-Tenure Track		BSc Vet Nursing	PGCert(VetEd)		Interprofessional Skills	0.6	25
CSS	Kelly O'Flaherty	Assistant Professor	Non-Tenure Track		RVN BSc Hons	PGCert(VetEd)		Interprofessional Skills	0.8	15
CSS	Lauren McCree	Assistant Professor	Non-Tenure Track		RVN, BSc Hons	PGCert(VetEd)		Interprofessional Skills	1.0	15
CSS	Gina Parkes	Assistant Professor	Non-Tenure Track		RVN	PgDip Vet Ed, DipAVN (S.A.	FHEA	Interprofessional Skills	0.3	30
CSS	Catherine Kendall	Assistant Professor	Non-Tenure Track		RVN BSc Hons			Interprofessional Skills	1.0	15
CSS	Perdita Welsh	Associate Professor	Tenure Track		BSc(Hons), DipAVN (Surg), RVN	PGCert(VetEd)	FHEA	Interprofessional Skills	0.8	10
CSS	Daniel Chan	Professor	Tenure Track	1998	DVM	DipACVECC, DipECVECC, DipACVIM (Nutrition), PGCAP	FHEA, MRCVS	Emergency and Critical Care and Nutrition	1.0	50
CSS	Rowena Packer	Associate Professor	Tenure Track		BSc(Hons)	PGCert(VetEd), PhD	FHEA	Form and function research	1.0	30
CSS	Evie Yon	Lecturer	Non-Tenure Track		RVN BSc(Hons)	PGCert(VetEd), PhD	FHEA	Curricular Support	1.0	10
CSS	Vicky Lilley	Assistant Professor	Non-Tenure Track		RVN			Curricular Support	0.2	10
CSS	Duncan D'Arcy-Howard	Other Academic Personnel	Tenure Track	1998	BVetMed	PGCert(VetEd), CertAVP(VDI)	FHEA, MRCVS	Primary Care Practitioner	0.8	25
CSS	Laura Ruiz Oliver	Other Academic Personnel	Tenure Track	2002	DVM	CertAVP, PGCertVPS	MRCVS	Primary Care Practitioner	0.6	25

CSS	*Christina Ntougka*	*Other Academic Personnel*	*Tenure Track*	*2019*	*DVM*	*CertAVP, PGCertVPS*	*MRCVS*	*Primary Care Practitioner*	*0.6*	*25*
CSS	*Christina Kleespies*	*Other Academic Personnel*	*Tenure Track*	*2015*	*BVetMed*		*MRCVS*	*Primary Care Practitioner*	*0.9*	*25*
CSS	*Chloe Stone*	*Other Academic Personnel*	*Tenure Track*	*2013*	*VetMB*	*MA*	*FHEA, MRCVS*	*Primary Care Practitioner*	*0.5*	*25*
CSS	*Jack Fawsitt*	*Other Academic Personnel*	*Tenure Track*	*2020*	*BVetMed, BSc(Hons)*		*MRCVS*	*Primary Care Practitioner*	*1.0*	*25*
CSS	*Lyzanne Warner*	*Other Academic Personnel*	*Tenure Track*	*2013*	*BVSc(Hon)*	*PGCert(VetEd)*	*FHEA, MRCVS*	*Primary Care Practitioner*	*0.4*	*25*
CSS	*Nicole Regan*	*Other Academic Personnel*	*Tenure Track*	*2021*	*BVSc*		*MRCVS*	*Primary Care Practitioner*	*1.0*	*25*
CSS	*Angela Spatz*	*Other Academic Personnel*	*Tenure Track*	*2000*	*BVSc*	*PGCert(VetEd)*	*FHEA, MRCVS*	*Primary Care Practitioner*	*0.4*	*25*
CSS	*Naida Dzanic*	*Other Academic Personnel*	*Tenure Track*	*2020*	*BVSc*		*MRCVS*	*Primary Care Practitioner*	*0.8*	*25*
CSS	*Joanne Brand*	*Other Academic Personnel*	*Tenure Track*	*1997*	*BVetMed*	*PGCert(VetEd)*	*FHEA, MRCVS*	*Primary Care Practitioner*	*0.6*	*25*
CSS	*Roisin Bolger*	*Other Academic Personnel*	*Tenure Track*	*2005*	*MVB*	*PGCert(VetEd)*	*MRCVS*	*Primary Care Practitioner*	*0.4*	*25*
CSS	*Nadene Stapleton*	*Other Academic Personnel*	*Tenure Track*	*2005*	*BVSC*	*CertAVP(ZooMed)*	*FHEA, MRCVS*	*Primary Care Practitioner*	*1.0*	*25*
CSS	*Beth Walding-Field*	*Other Academic Personnel*	*Tenure Track*	*2004*	*BSc(Hons), BVSc,*	*CertSAM, PGCert(VetEd)*	*FHEA, MRCVS*	*Primary Care Practitioner*	*0.7*	*25*
CSS	*Emma Lyons*	*Other Academic Personnel*	*Tenure Track*	*2017*	*BVM, BVS*		*MRCVS*	*Primary Care Practitioner*	*0.8*	*25*
CSS	*Emily Marsden*	*Other Academic Personnel*	*Tenure Track*	*1998*	*BVM&S*		*MRCVS*	*Primary Care Practitioner*	*0.4*	*25*
CSS	*Genevieve Smith*	*Other Academic Personnel*	*Tenure Track*	*2010*	*Vet MB (Cantab)*		*FHEA, MRCVS*	*Primary Care Practitioner*	*0.4*	*25*
CSS	*Laura Daniell*	*Other Academic Personnel*	*Tenure Track*	*2004*	*BVSc*	*PGCert(VetEd)*	*MRCVS*	*Primary Care Practitioner*	*0.8*	*25*

CSS	Jillian Crosby	Other Academic Personnel	Tenure Track	2017	BVetMed	PGCert(VetEd), PGDip(VCP)	MRCVS	Primary Care Practitioner	0.8	25
CSS	Charlotte Brook	Other Academic Personnel	Non-Tenure Track	2023	BVetMed		MRCVS	Primary Care Practitioner	0.6	25
CSS	Laura Frost	Other Academic Personnel	Tenure Track	2009	VetMB	CertAVP(GSAS)	MRCVS	Primary Care Practitioner	0.8	25
CSS	Goncalo Fonseca Esteves	Other Academic Personnel	Tenure Track	2003	DVM		FHEA, MRCVS	Primary Care Practitioner	1.0	25
CSS	Fraser Hudson	Other Academic Personnel	Non-Tenure Track	2020	BVetMed		MRCVS	Primary Care Practitioner	1.0	25
CSS	Deanna Molsher	Other Academic Personnel	Tenure Track	2023	BVetMed		MRCVS	Primary Care Practitioner	1.0	25
CSS	Jessica Timmins	Other Academic Personnel	Tenure Track	2018	BVetMed		MRCVS	Primary Care Practitioner	1.0	25
CSS	Sara Lourenco De Matos Serro Fidalgo	Other Academic Personnel	Tenure Track	2018	DVM		MRCVS	Primary Care Practitioner	1.0	25
CSS	Samantha Castle	Other Academic Personnel	Tenure Track	2003	BVSc	CertAVP(EM)	FHEA, MRCVS	Primary Care Practitioner	0.8	25
CSS	Harold Hodges	Other Academic Personnel	Tenure Track	2018	BSc(Hons), BVetMed	PGDip(VCP)	FHEA, MRCVS	Primary Care Practitioner	1.0	25
PPS	Richard Booth	Associate Professor	Tenure Track	2005	BVSc , BSc(Hons)	PhD	FHEA, MRCVS	Production Animal Medicine	1.0	70
PPS	Steven Van Winden	Associate Professor	Tenure Track	1996	DVM	MSc, DipECBHM, PhD	FHEA, MRCVS	Production Animal Medicine	1.0	50
PPS	Neil Paton	Lecturer	Tenure Track	1999	BVMS, BSc	PGCert(VetEd), PhD	FHEA, MRCVS	Production Animal Medicine	1.0	70
PPS	Sophie Mahendran	Lecturer	Tenure Track	2012	BVMedSci, BVM, BVS(Hons)	MSc, DipECBHM	FHEA, MRCVS	Production Animal Medicine	1.0	70
PPS	Peter Plate	Lecturer	Tenure Track	1990	DrMedVet	PGCert(VetEd)	FHEA, MRCVS	Production Animal Medicine	1.0	70
PPS	James Crilly	Lecturer	Tenure Track	2010	VetMB,	PGCert(VetEd), DipECSRHM, CertAVP	FHEA, MRCVS	Production Animal Medicine	0.1	70
PPS	Christine Nicol	Professor	Tenure Track		MA	DPhil		Animal Behaviour	0.2	10
PPS	Mehroosh Tak	Associate Professor	Tenure Track		BA	PGCert(VetEd), PGCAP, MA, PhD	FHEA	Agribusiness	1.0	50

PPS	John Fishwick	Associate Professor	Tenure Track	1985	VetMB	PGCert(VetEd), MA, DCHP DipECBHM	FHEA, FRCVS	Production Animal Medicine	1.0	70
PPS	Nicola Blackie	Associate Professor	Tenure Track		BSc	PGCert Higher Education Practice, PhD	FHEA	Animal Husbandry	1.0	50
PPS	George Williams	Assistant Professor	Non-Tenure Track	2021	BVetMed	PGCert(VetEd), PGDip(VCP)	FHEA, MRCVS	Production Animal Medicine	1.0	80
PPS	Sally Baker	Lecturer	Non-Tenure Track	1996	BVM&S	MSc VetEd	FHEA, MRCVS	Production Animal Medicine	1.0	100
PPS	Beth Reilly	Lecturer	Non-Tenure Track	2017	BVetMed	PGCert(VetEd), PGDip(VCP)	FHEA, MRCVS	Production Animal Medicine	1.0	80
PPS	Bernat Marti Garcia	Lecturer	Tenure Track	2017	BVetMed (Barcelona)	PGCert(VetEd), MSc Veterinary Health Sciences, DipECVP	FHEA, MRCVS	Anatomic Pathology	0.8	70
PPS	Henrietta Martineau	Associate Professor	Tenure Track	1998	BVMS	PGCert(VetEd), MVM, PhD	FHEA, MRCVS, FRCPath	Anatomic Pathology	1.0	50
PPS	Judy Hyde	Lecturer	Tenure Track		BSc(Hons)	PGCert(VetEd), PhD	FHEA	Virology	0.6	50
PPS	Daniel Goldhill	Lecturer	Tenure Track		BSc	PGCert(VetEd), PhD	FHEA	Virology	1.0	50
PPS	Barbara Haesler	Professor	Tenure Track	2002	BVSc(Hons)	PGCert(VetEd), PhD	FHEA, MRCVS	Veterinary Public Health	0.8	30
PPS	Joanne Webster	Professor	Tenure Track		BSc(Hons)	PhD		Parasitology	1.0	10
PPS	Alejandro Suarez Bonnet	Associate Professor	Tenure Track	2006	DVM	MVetMed, DipACVP, PhD	FRCVS	Anatomic Pathology	1.0	50
PPS	Balazs Szladovits	Associate Professor	Tenure Track	1996	DVM	PGDipl(VetEd), DipACVP	FHEA, MRCVS	Clinical Pathology	1.0	30
PPS	Rina Nabeta-Oyamada	Lecturer	Tenure Track	2015	B.Vet Sci	M.Vet.Sci., DipACVP, PhD		Clinical Pathology	1.0	30
PPS	Sharon Kendall	Associate Professor	Tenure Track		BSc	PhD	FHEA	Bacteriology	1.0	30
PPS	Eduard Roos	Lecturer	Tenure Track		BSc (Zool)	PhD		Wildlife Health	1.0	30
PPS	Virginia Marugan-Hernandez	Associate Professor	Tenure Track		BEng	PhD	FHEA	Parasitology	1.0	30
PPS	Ellen Knuepfer	Associate Professor	Tenure Track		Dipl-Biol	PGCert(VetEd), PhD		Molecular Parasitology	1.0	30
PPS	Clive Bate	Lecturer	Tenure Track		BSc	PGCert(VetEd), PhD	FHEA	Virology	1.0	70
PPS	Eleanor Milnes	Lecturer	Tenure Track	2010	VetMB	MA, MVetSci, DVSc , DipACZM, DipECZM	MRCVS	Wildlife Health	0.5	50
PPS	Felicity D'Mello	Lecturer	Tenure Track		BSc	PGDip(VetEd), PhD	FHEA	Virology	0.6	70

PPS	Alexandros Chardas	Lecturer	Tenure Track	2011	DVM	MVetMed, DipACVP	FHEA, MRCVS	Pathology	1.0	50
PPS	Sian-Marie Frosini	Associate Professor	Tenure Track	2013	BVetMed	PGCert(VetEd), PhD	FHEA, MRCVS	Bacteriology	1.0	70
PPS	Sara Healy	Lecturer	Tenure Track	2008	BVetMed	MSc, PhD	MRCVS	Parasitology	1.0	70
PPS	Sarah Hill	Lecturer	Tenure Track		BSc	PhD		Virology	1.0	30
PPS	Elizabeth Preston	Lecturer	Tenure Track		BSc	MRes, PhD	FHEA	Wildlife Ecology	1.0	70
PPS	Dylan Yaffy	Lecturer	Tenure Track	2020	BVetMed, BSc(Hons)	PGCert(VetEd), MVetMed, DipACVP	FHEA, MRCVS	Pathology	1.0	50
PPS	Nicola Lewis	Professor	Tenure Track	1998	BSc, BVetMed	PGCert(VetEd), PhD	FHEA, MRCVS	Virology	0.3	30
PPS	Liam Good	Professor	Tenure Track		BSc	PhD	FHEA	Bacteriology	1.0	30
PPS	Damer Blake	Professor	Tenure Track		BSc	PGCert(VetEd), MSc, DipECVPH, PhD	FHEA	Parasitology	1.0	50
PPS	Brian Catchpole	Professor	Tenure Track	1992	BVetMed	MSc, PhD	FHEA, FRCVS	Immunology	1.0	70
PPS	Jonathan Williams	Associate Professor	Tenure Track	2005	BVSc	PGCert(VetEd), DipECVP, PhD	FHEA, MRCVS	Anatomic Pathology	1.0	50
PPS	Sonja Jeckel	Associate Professor	Tenure Track	1995	DrMedVet	PGCert(VetEd)	FHEA, MRCVS, FRCPath	Anatomic Pathology	1.0	70
PPS	Robert Noad	Associate Professor	Tenure Track		BSc	PGCAP, PhD	FHEA	Virology	1.0	70
PPS	Stuart Patterson	Associate Professor	Tenure Track	2007	BVetMed	PGCert(VetEd), MSc, MVetSci, PhD	FHEA, MRCVS	Wild Animal Systems	1.0	70
PPS	Siobhan Abeyesinghe	Associate Professor	Tenure Track		BSc (Hons)	PGCert(VetEd), MSc, PhD	FHEA	Animal Behaviour	1.0	50
PPS	Troy Gibson	Associate Professor	Tenure Track		BSc	PGCert(VetEd), PGDipSci, PhD	FHEA	Animal Welfare	1.0	50
PPS	Charlotte Burn	Associate Professor	Tenure Track		BA	PGCert(VetEd), MSc, DPhil, PhD	FHEA	Animal Behaviour & Ethics	1.0	50
PPS	Andrew Crump	Lecturer	Tenure Track		BSc	PGCert(VetEd), DipACVP, PhD		Animal Behaviour and Welfare	1.0	50
PPS	Louise Whatford	Lecturer	Tenure Track		BSc	PGCert(VetEd), PhD	FHEA	One Welfare	1.0	70
PPS	Karen Hiestand	Lecturer	Tenure Track	2001	BSc, BVSc	PGCert(VetEd), MSc, MA, ECAWBM (AWSEL), PhD	FHEA, MRCVS	Veterinary Ethics	0.8	70
PPS	Maria Diez Leon	Associate Professor	Tenure Track		BSc	PGCert(VetEd), MSc, PhD		Wild Animal Systems	1.0	50
PPS	Isobel Jane Faiers	Lecturer	Non-Tenure Track		BSc	PGCert(VetEd)	FHEA	Animal Husbandry	1.0	100

PPS	Lottie Prowse	Assistant Professor	Non-Tenure Track		BSc(Hons)	PGCert(VetEd)	FHEA	Animal Husbandry	1.0	100
PPS	Jacqueline Cardwell	Associate Professor	Tenure Track	1994	VetMB	MA, MScVetEd, PhD	FHEA, MRCVS	Epidemiology	1.0	50
PPS	Daniel O'Neill	Associate Professor	Tenure Track	1987	MVB BSc	PGCert(VetEd), MSc, PhD	FHEA, FRCVS	Epidemiology	1.0	30
PPS	Kim Stevens	Associate Professor	Tenure Track		BScAgric	PGCAP, MScAgric, PhD	FHEA, FRSS	Epidemiology	1.0	50
PPS	Kenneth Smith	Professor	Tenure Track	1988	BVM&S	FRCPath, PhD	FHEA, FRCVS	Anatomic Pathology	1.0	7
PPS	Nikolaos Dadios	Lecturer	Tenure Track	1996	BVetMed	PGCert(VetEd)	FHEA, MRCVS	Veterinary Public Health	1.0	70
PPS	Sarah Allen	Lecturer	Tenure Track	2006	BVetMed	PGCert(VetEd), MSc, PhD	FHEA, MRCVS	Epidemiology	1.0	30
PPS	Camilla Pegram	Lecturer	Non-Tenure Track	2015	BVetMed	MRes, PhD	FHEA, MRCVS	Epidemiology	1.0	50
PPS	Dirk Pfeiffer	Professor	Non-Tenure Track	1984	DrMedVet	MANZCVSc, DipECVPH, PhD	FHEA	Epidemiology	0.2	10
PPS	David Brodbelt	Professor	Tenure Track	1993	VetMB	PGCert(VetEd), MA, DVA, DipECVAA, PhD	FHEA, FRCVS	Epidemiology	1.0	30
PPS	Kristien Verheyen	Professor	Tenure Track	1995	DVM	MSc, PhD	FHEA, MRCVS	Epidemiology	1.0	30
PPS	Julian Drewe	Professor	Tenure Track	2001	BVetMed	CertZooMed, DipECZM, MSc, PhD	FHEA, MRCVS	Epidemiology	1.0	50
PPS	Francisco Javier Guitian Martinez	Professor	Tenure Track	1993	LV MSc	DipECVPH, PhD	FHEA	Vet Public Health	0.8	30
PPS	Pablo Alarcon-Lopez	Associate Professor	Tenure Track	2005	VetMed	PGCert(VetEd), MSc, PhD	FHEA, MRCVS	Vet Public Health	1.0	50
PPS	Martin Walker	Associate Professor	Tenure Track		BSc	PhD	FHEA	Epidemiology	1.0	30
PPS	Lucy Brunton	Associate Professor	Tenure Track		BSc	PGCert(VetEd), MSc, PhD	FHEA	Epidemiology	1.0	50
PPS	Kurt Arden	Associate Professor	Tenure Track	2016	BVM, BVS, BVMedSci(Hons) CertHealthSci	PGCAP, MVetSci, DipECVPH	FHEA, MRCVS	Veterinary Public Health	1.0	70
PPS	Jean-Christophe Arnold	Assistant Professor	Non-Tenure Track	2015	BVMS	MSc, TLiHE		Veterinary Public Health	1.0	100
PPS	Fiona Tomley	Professor	Tenure Track		BSc	PhD		Parasitology	0.5	0

PPS	*Dirk Werling*	*Professor*	*Tenure Track*	*1991*	*DrMedVet*	*PhD*	*FHEA, MRCVS*	*Molecular Immunology*	*1.0*	*30*
PPS	*Simon Priestnall*	*Professor*	*Tenure Track*	*2004*	*BSc(Hons), BVSc*	*PGCert(VetEd), DipACVP, PhD*	*FHEA, FRCPath, FRCVS, FRSB*	*Anatomic Pathology*	*1.0*	*50*
PPS	*Natalie Chancellor*	*Assistant Professor*	*Non-Tenure Track*		*BSc*			*Curricular support*	*1.0*	*50*
PPS	*Marta Gruarin*	*Lecturer*	*Tenure Track*	*2010*	*DVM*	*DipACVP, PhD*		*Clinical Pathology*	*1.0*	*30*
PPS	*Dong Xia*	*Associate Professor*	*Tenure Track*		*BSc*	*PGCert(VetEd), MSc, DipECVPH, PhD*	*FHEA*	*Informatics*	*1.0*	*70*
Principal's Office	*Amanda Boag*	*Administrator*	*Tenure Track*	*1998*	*VetMB*	*MA,DipECVECC, DipACVECC, DipACVIM*	*FRCVS, FHEA*	*Emergency and Critical Care plus oversight of all RVC clinical training facilities*	*0.6*	*10*
Principal's Office	*Imelda McGonnell*	*Administrator*	*Tenure Track*		*BSc*	*PhD*		*Embryology*	*1.0*	*35*
Principal's Office	*David Church*	*Administrator*	*Tenure Track*	*1976*	*BVSc*	*PhD*	*FHEA, MRCVS, MACVSc*	*Small Animal Medicine*	*1.0*	*20*
Principal's Office	*Stuart Reid*	*Administrator*	*Tenure Track*	*1987*	*BVMS, DVM*	*DipECVPH, PhD*	*CBE, FHEA, FRSE, FRCVS*	*Epidemiology*	*1.0*	*15*
Principal's Office	*Oliver Pybus*	*Administrator*	*Tenure Track*		*BSc*	*MSc, PhD*		*Molecular Virology*	*0.8*	*0*
Principal's Office	*Christine Thuranira-Mckeever*	*Administrator*	*Tenure Track*		*BA(Hons)*	*MA, PhD*	*FHEA*	*Distance Education*	*1.0*	*15*
Principal's Office	*Adrian Boswood*	*Administrator*	*Tenure Track*	*1989*	*VetMB*	*MA, DVC, DipECVIM-CA (Cardiology)*	*FHEA, MRCVS*	*Cardiology*	*1.0*	*20*

*CBS - Comparative Biomedical Science, CSS - Clinical Science and Services, PPS - Pathobiology and Population Sciences

Table Definitions:
FTE — An FTE is based on the contract with the employee. For example: If a dean hires a professor on a full-time basis, that contract counts as “1.0 FTE” whether or not the professor teaches. Similarly, if the professor is hired for a half-time, the FTE is “0.5”
Titles — To simplify consolidation of these data, use the standard academic titles to the maximum extent possible.
Administrators = include deans, associate deans, assistant deans, directors, etc., who are involved in college-level administration and who are faculty members. Do NOT include department heads, chairs, section heads, etc., of programs not included in college-level administration.
Other Academic Personnel = all salaried academic staff (full or partial FTE) not granted the rank of administrator, professor, associate professor, or assistant professor.
Other Academic Staff = all paid academic staff in a teaching or research position. Do NOT include non-academic staff in this category. Non-academic staff refers to all clerical and technical staff.
Non-Clinical Resident = residents in basic science programs.

Standard 9: Curriculum

Appendix 9: Curriculum digest of the BVetMed

The Curriculum of the BVetMed is designed to meet four overall program objectives and 15 program learning outcomes as detailed below.

Program Objectives

- To develop the knowledge, skills, and attributes to promote and enhance animal health and welfare, and public health through scholarship, scientific and professional endeavor, and veterinary practice.
- To equip students with the knowledge, skills, and attributes to meet the current and future challenges of all aspects of the veterinary profession.
- To provide a learning environment that appreciates diversity, promotes excellence in learning and teaching, and embeds a desire for life-long learning.
- To satisfy the requirements determined by the Royal College of Veterinary Surgeons (RCVS), the American Veterinary Medical Association (AVMA), and the European Association of Establishments for Veterinary Education (EAEVE).

Program Learning Outcomes

1. Describe the normal structure and function of animals including principles of homeostasis and explain the aetiology, pathophysiology and pathogenesis of common diseases that affect them.
2. Explain the key components that constitute primary and preventative healthcare and advise on, and implement, recommended prophylaxis, nutrition, and husbandry programs to improve animal care, prevent disease and inform client education.
3. Advise on animal management and welfare, and safeguard human, animal, and environmental health (One Health); including principles of biosecurity, food safety, risk assessment & mitigation, zoonosis, and surveillance.
4. Recognise, prevent, and diagnose diseases and disorders of animals. Be able to select and interpret appropriate diagnostic tests and formulate a treatment plan; considering pain management, client financial status & patient referral when indicated.
5. Develop sound clinical reasoning skills including a logical problem-solving approach to effectively solve clinical problems and make decisions.
6. Demonstrate technical and procedural competence.
7. Apply scientific principles, method and knowledge to clinical practice and research. Proficiently search for and critically analyse literature and use evidence-based medicine to influence clinical decision-making.
8. Explain how knowledge of the veterinary business environment influences the practice, its team, its clients, marketing, and financial management.
9. Communicate effectively with the public, colleagues, and other professionals both verbally and in writing, including constructing and updating clinical records and correspondence, using appropriate terminology for the audience concerned.
10. Explain the principles and behaviors that underpin professionalism, teamwork, and ethical decision-making (judgement) and apply these in a veterinary setting.
11. Engage in life-long learning and self-reflection to improve overall competence. Recognise professional limits and seek support when needed.
12. Be able to cope with incomplete information and effectively use information services and information technology.
13. Explain fundamental scientific, pharmacological, and medical principles that underpin veterinary medicine.
14. Use the principles of anaesthesia to suggest and safely perform an anaesthetic plan, from carrying out an anaesthetic risk assessment through to patient recovery.
15. Understand the relationship between productivity, production systems and economics.

There are two routes by which students can complete the BVetMed program. Students can enter as undergraduate students and complete a 5-year pathway. Alternatively, students may enter as graduates with a relevant animal-related first degree and complete the program in 4 years. Students on the 4-year pathway study a single “Graduate Accelerated BVetMed” (GAB) year

before converging with the students from the 5-year pathway to study a common final three years of the BVetMed.

Each year of study before the clinical phase of the program has a distinct set of learning objectives. Year-level objectives are made clear to students through the virtual learning environment (RVC LEARN).

Program structure

The objectives and outcomes of the program are achieved by use of an integrated systems-based spiral curriculum. The RVC describes the components of its programs as “strands” to emphasize the interwoven relationships between discrete periods of teaching (rather than using the term modules which might imply discrete self-contained periods of teaching). System strands and non-system strands are detailed under Standard 9. Each strand has an identified academic lead, often with a deputy. Strand leaders are members of the CMC.

Systems strands undergo two or three “visits” in the first three years and one term (or two years and one term for the GAB pathway) before students enter the clinical phase of the program. Broadly the first visits (in years one and two) are designed to familiarize students with the normal structure and function of those systems. The final visit before the clinical phase introduces students to diseases of those systems including their presentation, diagnosis, management and prevention.

Non-systems-based strands are often taught more frequently or continuously and therefore appear several times in the strand sequence (see Figure 9.1).

Strand-based teaching concludes in the first term of the fourth year at which point students progress to the clinical phase of the program. Students undertake approximately 14 months of clinically-based experiential learning.

During this 14-month period all students will do the following

- Undertake and satisfactorily pass 22 weeks of core rotations (the same 22 weeks for all students).
- Undertake and satisfactorily pass 4 – 6 weeks of tracking rotations (different students may make different choices for these rotations).
- Satisfactorily complete 16 weeks of clinical Extramural Studies (c-EMS – 10 weeks of this will have been completed prior to entry to rotations.)
- Complete and pass their 8-week supervised research project or Critiqued Scientific Review (or a 14-week project if the student chooses to track in research).
- Undertake and pass a practical OSCE examination.
- Pass finals written examinations.
- Each student will have an individualized study timetable for this period. Core rotations run for 48 weeks a year meaning that the core rotation period lasts approximately a year.

Table 9.1 – The 22 weeks of core rotations undertaken by every student.

Core rotation blocks (rotation cycle 25/26) contain the following 22 weeks of rotations:

CORE BLOCK A	Farm Animal Practice 2 (2 weeks), Emergency Medicine (2 weeks), Blue Cross (1 week), (Charity Practice) Small Animal Medicine (1 week)
CORE BLOCK B	Farm Animal Practice 1 (2 weeks), Pathology (2 weeks), Shelter Medicine (2 weeks)
CORE BLOCK C	Beaumont 1 (2 weeks), (Small Animal Primary Care) Beaumont 2: Exotics (1 week), Diagnostic Imaging (1 week), Anaesthesia (1 week), Clinical Skills (1 week)
CORE BLOCK D	Equine 1 (2 weeks), Equine 2 (2 weeks), EMS (2 weeks)

Table 9.2 – A list of all track rotations available to students in the graduating class of 2026
Track rotations are as follows:

EQUINE	
EQSA1	EQSA1 Coach House Vets (2 weeks)
EQ2	EQ2 Bell Equine (2 weeks)
EQ3	EQ3 Buckingham Equine Vets (2 weeks)
EQ4	EQ4 Equine Diagnostic Imaging (2 weeks)
EQ5	EQ5 Advanced Equine Care (2 weeks)
FARM ANIMAL	
FA1	FA1 Production Medicine (2 weeks)
FA2	FA2 Torch Farm Vets (2 weeks)
FAEQ4	FAEQ4 Hammonds Farm and Equine Vets (2 weeks)
FA5	FA5 British Quality Pigs (2 weeks)
FA6	FA6 Poultry: Crowshall Veterinary Services (2 weeks)
FA7	FA7 Mixed Farm Practice Wales (2 weeks)
FA8	FA8 VPH Wales (2 weeks)
SMALL ANIMAL	
SA1	SA1 Soft Tissue Surgery (2 weeks)
SA2	SA2 Neurology (2 weeks)
SA3	SA3 Cardiology (1 week) & Critical Care (1 week)
SA4	SA4 Oncology (2 weeks)
SA5	SA5 Ophthalmology (2 weeks)
SA6	SA6 Dermatology (1 week) & Shelter Medicine (1 week)
SA7	SA7 Ortho Surgery (2 weeks)
SA8	SA8 Acorn House (2 weeks)
SA9	SA9 Anaesthesia (2 weeks)
ZOO	
ZA1	ZA1 Zoological Society London ZSL (2 weeks)
ZA2	ZA2 Aspinall (2 weeks)
RESEARCH	
RA1	RA1 Research (6 weeks)

Students undertake 2 or 3 of the two weeks' blocks outlined above (except students electing to do research).

Figure 9.1 Bachelor of Veterinary Medicine Degree (BVetMed) and Bachelor of Veterinary Science Degree (BVSc) Academic Year Plan 2024-25

W/Beg	College Week	First Year	Second Year	Third Year	Fourth Year	Fifth Year	CMIS Week	Week Beginning
16-Sep-24	1			Induction, Professional & Clinical Foundations	PMPVH / PVP	Core/Track/EMS 8	1	16-Sep-24
23-Sep-24	2	Induction	Careers	Alimentary	PMPVH / PVP		2	23-Sep-24
30-Sep-24	3	Locomotor	CVRS / LYM / POS	"	PMPVH / PVP	Core/Track/EMS 9	3	30-Sep-24
07-Oct-24	4	"	"	"	R&R week / PMPVH / PVP / Exam		4	07-Oct-24
14-Oct-24	5	Development	CVRS / LYM / POS / PVP	Reflect & Review Week (R&R)	Formative OSCEs		5	14-Oct-24
21-Oct-24	6	R&R week / Animal Handling	CVRS / LYM / POS / SEBM	Reproduction	Rotation Induction		6	21-Oct-24
28-Oct-24	7	Nervous Sytem	R&R week	"	EMS	Core/Track/EMS 10	7	28-Oct-24
04-Nov-24	8	CVRS	LYM / POS / PVP	"	EMS / Research Project Block 1		8	04-Nov-24
11-Nov-24	9	R&R week / Animal Handling	PMVPH / PVP / ENDO	"	EMS / Research Project Block 1		9	11-Nov-24
18-Nov-24	10	Urinary	POS / ENDO	Skin	EMS / Research Project Block 1		10	18-Nov-24
25-Nov-24	11	DOPS	POS / ENDO / SEMB	"	EMS / Research Project Block 1	Core/Track/EMS 11	11	25-Nov-24
02-Dec-24	12		POS / PVP / SEMB	"	EMS		12	02-Dec-24
09-Dec-24	13	Alimentary	POS	R&R / Revision / Exams	EMS		13	09-Dec-24
16-Dec-24	14					Core/Track/EMS 12	14	16-Dec-24
23-Dec-24	15	**Christmas Holiday**	**Christmas Holiday / AHEMS**	**Christmas Holiday**	**Christmas Holiday**	**Christmas Holiday**	15	23-Dec-24
30-Dec-24	16						16	30-Dec-24
06-Jan-25	17	Alimentary	Nervous System / POS	CVS / Respiratory	Resit exam / EMS		17	06-Jan-25
13-Jan-25	18	"	Nervous System / POS	"		Core/Track/EMS 12	18	13-Jan-25
20-Jan-25	19	R&R week	Nervous System / POS / Skin	"	Research Project Block 1 / EMS		19	20-Jan-25
27-Jan-25	20	Aimentary	R&R week	"			20	27-Jan-25
03-Feb-25	21	"	POS / Skin / Locomotor	R&R		Core/Track/EMS 13	21	03-Feb-25
10-Feb-25	22	R&R week / Animal Handling	Locomotor / POS	Production medicine			22	10-Feb-25
17-Feb-25	23	Animal Handling / Reproduction / Endocrine	Locomotor / POS / PVP	"			23	17-Feb-25
24-Feb-25	24	Reproduction	R&R week	"		Track/EMS 14	24	24-Feb-25
03-Mar-25	25	DOPS	POS	VPH Essentials			25	03-Mar-25
10-Mar-25	26		POS	R&R		EMS	26	10-Mar-25
17-Mar-25	27	Reproduction	PMVPH / PVP	Revision / Exams		Electives	27	17-Mar-25
24-Mar-25	28			NOSS			28	24-Mar-25
31-Mar-25	29	***AHEMS***	***AHEMS***	"		OSCE	29	31-Mar-25
07-Apr-25	30			"			30	07-Apr-25
14-Apr-25	31	**Easter / AHEMS**	**Easter / AHEMS**	**Easter**		**Easter**	31	14-Apr-25
21-Apr-25	32						32	21-Apr-25
28-Apr-25	33	Reproduction	Urinary	Locomotor			33	28-Apr-25
05-May-25	34	"	Urinary / POS / PVP	"		Revision	34	05-May-25
12-May-25	35	R&R week	R&R week	"			35	12-May-25
19-May-25	36	Reproduction	Revision	R&R		Finals	36	19-May-25
26-May-25	37	Revision / DOPS Part 2	"	Urinary			37	26-May-25
02-Jun-25	38	Revision		"	See IMR Schedule 2025-26 (Available 16th May 2024)		38	02-Jun-25
09-Jun-25	39		Examination / Board	LR&H			39	09-Jun-25
16-Jun-25	40	Examination / Board		"			40	16-Jun-25
23-Jun-25	41			Endocrine		Graduation TBC	41	23-Jun-25
30-Jun-25	42			R&R			42	30-Jun-25
07-Jul-25	43			Revision / Exams			43	07-Jul-25
14-Jul-25	44	AHEMS	AHEMS	**EMS / Private Study**			44	14-Jul-25
21-Jul-25	45						45	21-Jul-25
28-Jul-25	46						46	28-Jul-25
04-Aug-25	47						47	04-Aug-25
11-Aug-25	48	Resit examinations, see examination timetable for dates					48	11-Aug-25
18-Aug-25	49	before booking placements / AHEMS		Revision / EMS / Private Study			49	18-Aug-25
25-Aug-25	50	"		Revision / EMS / Private Study			50	25-Aug-25
01-Sep-25	51	"		Resit exams / EMS / Private study			51	01-Sep-25
08-Sep-25	52	"		Resit results - see exam timetable / EMS / Private study			52	08-Sep-25
15-Sep-25	53	" end of Sumer Break		EMS / Private study			53	15-Sep-25

Abbreviations: AHEMS: Animal Husbandry Extra-Mural Studies, CVRS; Cardiovascular and Respiratory Strand, DOPS; Direct observation of practical skills, EMS; Extra Mural Studies, ENDO; Endocrine, LR&H; Lymphoreticular and Haematological, NOSS; Neurology Ophthalmology and Special Senses, OSCE: Objective Structure Clinical Examination, POS; Principles of Science, Prof Studies; Professional Studies, PVP; Principles of Veterinary Practice, PMVPH; Population Medicine and Veterinary Public Health, R & R; Reflect and Review, SEBVM; Scholarship and Evidence Based Medicine, VPH; Veterinary Public Health.

Standard 10: Research Programs

Appendix 10 Table 10.3.1

Fiscal Year	Total college DVM enrollment	DVM Students involved in research**	Peer-reviewed pubs with DVM student as author or co-author	DVM /PhD students enrolled*	DVM/MS/MPH students enrolled*
2019-20	1387	100%	9	0	0
2020-21	1433	100%	9	0	0
2021-22	1469	100%	8	0	0
2022-23	1469	100%	8	0	0
2023-24	1465	100%	16	0	0

*No joint degrees offered
**At some point in their program

Appendix 10 Table 10.3.2

		Number Faculty*	Total Faculty FTE	Faculty in Research[1]**	Total Research FTE	Research Faculty teaching in DVM curr**	No. unique peer-reviewed pubs[2]	No. book chapters including original findings
CBS	2019-20	58	56	21	21	2	73	N/A
	2020-21	54	52.8	18	18	4	74	N/A
	2021-22	59	56.43	18	17.23	6	105	N/A
	2022-23	54	52.2	11	11	5	80	N/A
	2023-24	62	60.2	19	18.2	5	63	N/A
CSS	2019-20	112	102.36	11	9.06	2	133	N/A
	2020-21	112	98.4	12	10.4	3	135	N/A
	2021-22	127	112.33	18	15.37	4	173	N/A
	2022-23	132	115.63	20	17.07	4	120	N/A
	2023-24	132	116.24	17	14.73	5	109	N/A
PPS	2019-20	103	94.12	33	31.37	3	190	N/A
	2020-21	90	80.06	23	21.11	4	196	N/A
	2021-22	105	92.51	32	27.61	7	236	N/A
	2022-23	110	99.16	34	30.26	10	154	N/A
	2023-24	105	94.81	31	27.46	12	106	N/A
TOTAL CVM	2019-20	273	252.48	65	61.43	7	396	N/A
	2020-21	256	231.26	53	49.51	11	405	N/A
	2021-22	291	261.27	68	60.21	17	514	N/A
	2022-23	296	266.99	65	58.33	19	354	N/A
	2023-24	299	271.25	67	60.39	22	278	N/A

*All faculty, including full- and part-time faculty.
**Research faculty are defined as faculty with ≥ 20% time devoted to research activity.
[1]The number of individual faculty members within each department involved in research, total research FTE, and research productivity (tabulate below for each of the last three years). For example: Dept. A has 35 faculty members with 30 involved in research and 6 FTE assigned to research
[2] Count of unique publications only – a publication containing multiple co-authors must be counted only once in this table
RVC Data context: Peer-reviewed publication totals include estimated department mappings where changes have taken place over this period.
RVC Data context: A total of 232 outputs had authors from multiple departments; these have been evenly distributed as much as possible to comply with the unique publications requirement for this table, e.g., in 2020, 8 outputs were associated with both CBS and CSS authors from the RVC. 4 was added to the total for each department.

Appendix 10 Table 10.3.3

		RCUK		UK Govt		EU Govt		Charities (Open and Competitive)		Industry		Other		Total		No. Patents
		Number	$ Value*	Number	$ Value*	Number	$ Value*	Number	$ Value*	Number	$ Value*	Number	$ Value*	Number	$ Value*	
CBS	2019-20	8	$1,485,214.65	2	$351,120	0	$0.00	4	$104,306	6	$495,357	1	$578,813	21	$3,3014,811	0
	2020-21	6	$951,528.6	1	$179,905	1	$155,770	6	$950,515	9	$1,122,829	0	$0.00	23	$3,360,547	1 (7)
	2021-22	10	$1,908,870.3	2	$50,528	1	$103,800	7	$424,593	8	$812,172	0	$0.00	28	$3,300,963	3 (20)
	2022-23	4	$771,824.13	4	$1,219,038	0	$0.00	7	$423,333	1	$152,809	0	$0.00	16	$2,567,004	0
	2023-24	2	$727,172.10	2	$320,954	0	$0.00	7	$642,373	1	$117,347	0	$0.00	12	$1,808,205	1 (2)
CSS	2019-20	5	$452,418.75	2	$29,160	0	$0.00	10	$2,569,486	7	$2,584,229	0	$0.00	24	$5,635,294	1 (6)
	2020-21	4	£477,156.15	1	$280,415	0	$0.00	9	$726,318	9	$3,523,083	2	$116,867	25	$5,123,839	0
	2021-22	2	$22,086.00	1	$6,750	0	$0.00	18	$1,987,741	9	$1,456,757	1	$228,681	31	$3,702,015	0
	2022-23	4	$957,681.89	3	$811,317	0	$0.00	16	£881,508.00	1	$5,093,442	1	$5,192	25	$7,749,142	1 (7)
	2023-24	0	$0.00	2	$489,808	0	$0.00	8	$352,200	3	$217,767	2	$24,658	15	$1,085,433	0
PPS	2019-20	20	$4,958,267.85	0	£0.00	3	$665,550	7	$995,738	3	$87,341	2	$292,548	35	$6,999,445	0
	2020-21	13	$2,368,473.75	6	$223,133	0	$0.00	13	$1,091,520	7	$300,579	6	$4,715,235	45	$8,698,941	1 (2)
	2021-22	8	$1,265,191.65	8	$889,122	3	$469,203	14	$768,483	5	$350,044	2	$146,925	40	$3,888,969	1 (7)
	2022-23	13	$5,382,293.39	3	$334,546	0	$0.00	13	$2,631,468	2	$483,841	1	$30,789	32	$8,862,933	1 (2)
	2023-24	7	$1,813,306.85	6	$304,613	0	$0.00	9	$702,580	3	$169,481	4	$918,079	29	$3,908,061	0
Institutional**	2019-20	2	$687,630.60	0	$0.00	0	$0.00	1	$6,710	0	$0.00	0	$0.00	3	$694,340	0
	2020-21	2	$2,605,182.75	0	$0.00	0	$0.00	4	$53,486	0	$0.00	0	$0.00	6	$2,658,668	0
	2021-22	4	$1,365,500.70	0	$0.00	0	$0.00	0	$0.00	0	$0.00	0	$0.00	4	$1,365,501	0
	2022-23	0	$0.00	0	$0.00	0	$0.00	0	$0.00	0	$0.00	0	$0.00	0	$0.00	0
	2023-24	0	$0.00	0	$0.00	0	$0.00	0	$0.00	0	$0.00	0	$0.00	0	$0.00	0
TOTAL CVM	2019-20	33	$6,895,901.25	4	$380,280	3	$665,550	21	$3,669,531	16	$3,166,927	3	$871,360	83	$16,343,890	1 (6)
	2020-21	23	$3,797,158.50	8	$683,454	1	$155,770	28	$2,768,352	25	$4,946,490	8	$4,832,102	99	$19,841,995	2 (9)
	2021-22	20	$3,196,147.95	11	$946,400	4	$573,003	39	$3,181,818	22	$2,618,973	3	$375,605	103	$12,257,448	4 (27)
	2022-23	21	$7,111,799.41	10	$2,364,901	0	$0.00	36	$3,936,305	4	$5,730,093	2	$35,981	73	$19,179,079	2 (9)
	2023-24	9	$2,540,478.95	10	$1,115,376	0	$0.00	24	$2,226,820	7	$504,596	6	$942,737	56	$6,801,699	1 (2)

Only count grant, contract or patent in the year it is awarded to faculty holding a primary (≥50%) appointment within the college.
*Include only the component of the total budget awarded to the college
**For administrative purposes some awards are attributed centrally, whilst being held by a member of department faculty
"RVC Data context: RCUK, EU Govt and UK Govt could be considered equivalent to state and federal funding AVMA terminology for UK Veterinary Schools"
RVC Data context: Patent numbers are given as X (Y), where X is the number of original domain patents (typically UK) and Y includes any affiliated patents in different territories.

Appendix 10 Table 10.3.4

		Intramurally Sponsored Grants (Internal)[1]		Startup and Pilot Funding Awarded (Internal)[1]	
		Number	Total $ Value*	Number	Total $ Value*
TOTAL CVM	2020-21	17	233,661	0	0
	2021-22	24	636,495	1	14,071
	2022-23	6	151,374	1	6,850
	2023-24	15	370,596	4	88,731
	2024-25	13	283,460	4	110,284

[1]College or University level
*Report the total of all individual grants/funds awarded by year

Standard 11: Outcome Assessment

Appendix 11.1 Table A NAVLE

Year	Students taking exams(s)	Students passing exam(s)	Average Scores (SD)
2024-25	125	108	467 (53)
2023-24	100	60	430 (66)
2022-23	115	72	437 (66)
2021-22	93	66	447 (57)
2020-21	87	73	468 (56)
2019-20	69	60	471 (50)

Appendix 11.1 Table B Outcomes Assessment Tools (past 5 years, by year)

Survey Audience	Outcomes Assessment Tool Used	Number Sent Out					Number Returned/Responded				
		4 years prior	3 years prior	2 years prior	1 year prior	Current year	4 years prior	3 years prior	2 years prior	1 year prior	Current year
		2020/21	**2021/22**	**2022/23**	**2023/24**	**2024/25**	**2020/21**	**2021/22**	**2022/23**	**2023/24**	**2024/25**
Final Year Students	National Student Survey (NSS) (email)	267	287	295	289	343	216	240	248	241	277
All BVetMed Students at RVC	Student Barometer Survey (every 2 years)	COVID year		1469		1465	COVID year		582		473
Graduates 1-year Post Graduation	RVC Graduate Survey (email + letter)	256	242	296	286	to be surveyed in 2025/26 academic year	21	19	26	11	to be surveyed in 2025/ 26 academic year
Graduates 15 months post graduation (HESA)	Graduate Outcome Survey	271	288	290	pending	pending	154	161	132	pending	pending
Employers of Graduates 1-year post Graduation	RVC Employers Survey (email) and by various routes, e.g. Alumni Magazine	Unknown due to different distribution sources					0	0	19	3	survey opens 01/07/2025 and closes 12/12/2025
RCVS VetGDP Advisor Survey	Survey is sent by RCVS to all VetGDP Advisors. We are not informed of exact number sent out	Unknown					144	163	154	169	not available
RCVS Graduate Survey	Survey is by RCVS to all recent graduates on VetGDP program. We are not informed of exact number sent out	Unknown					165	195	172	178	not available

Appendix 11.2 Table C Attrition

		Relative Attrition						Absolute Attrition			
Graduating Cohort	Cohort Enrolment at the Time of Matriculation	Academic Difficulty	Personal Reasons	Transfer to Another DVM Program	Other Reasons (Intercalation)	Total Relative Attrition	Percent Relative Attrition	Academic Difficulty	Personal Reasons	Total Absolute Attrition	Percent Absolute Attrition
2019	281	31	0	2	14	47	16.73%	5	15	20	7.12%
2020	301	34	0	2	6	42	13.95%	9	10	19	6.31%
2021	314	56	0	2	3	61	19.43%	7	8	15	4.78%
2022	302	40	0	2	15	57	18.87%	7	12	19	6.29%
2023	319	53	0	0	4	57	17.87%	5	18	23	7.21%
Total	1517	214	0	8	42	264	17.40%	33	63	96	6.33%

Appendix 11.2 Table D Employment Rates

Data from Graduate Outcomes survey, collected at 15 months post-graduation.

Graduating Class	Total # graduates (number of respondents)	# Employed in field related to veterinary training	# Graduates in advanced clinical training (internships/residencies)	# in advanced academic training (Masters/PhD)
2023	132	118	5	0
2022	160	142	7	0
2021	154	141	11	0
2020	197	178	13	2
2019	176	164	4	3
2018	168	153	9	1

Appendix E: Distance Education

Overview of the use of distance education at the RVC

The Royal Veterinary College (RVC) is an autonomous higher education institution (HEI) recognized as a university by the independent regulator for HE in England; the Office for Students (OfS). The RVC is also part of the larger federal University of London (UoL) and the veterinary degree awarded by the RVC, the Bachelor of Veterinary Medicine (BVetMed), is a recognized degree of the UoL. The parent organization of the RVC is therefore the UoL and the national regulator of higher education for England is the OfS.

The BVetMed degree has two main degree pathways, a five-year program usually undertaken by students directly from school, and a four-year program undertaken by graduate entrants with a first degree in a relevant subject related to the biological sciences (for more detail see standard 9). The final three years of both pathways are identical. The BVetMed program has an integrated spiral curriculum based on “strands” that are regularly revisited during the period of preclinical teaching; as such it is not taught in discrete credit bearing “courses”. Progression assessments take place between academic years and are synoptic assessments of all the material taught in an academic year. Academic credit is awarded at the level of the academic year – as such the remainder of this narrative will focus on the academic unit of a year of teaching and will not refer to individual courses.

Each academic year is divided into three terms. For students undertaking the 5-year pathway of the BVetMed the “preclinical” part of the program consists of the didactic teaching in the first three years and one term (ten terms). For students undertaking the 4-year pathway the preclinical part of the program consists of the teaching in two years and one term (seven terms). (In their first year of study the graduate entrant students are taught separately. In their second year of study, they join the students in the 5-year pathway studying BVetMed year 3.) The final five terms of the program represent the period of clinical teaching during which all students undertake intramural rotations, externships and complete a research project.

It has long been a strategic aim of the RVC to develop students as lifelong independent learners. For instance, in 2005 the RVC established the LIVE centre, the aim of which was to promote Lifelong Independent Veterinary Education. The RVC’s current institutional strategy includes the educational aim to “Offer, and evolve, curricula which prepare students for their career destinations and lifelong learning with a focus on cultural competency and learning outcomes, and deploying modes of delivery which accommodate the needs of all its students.” The strategy goes on to outline that this is with a view to achieving recognition “as an authority in, and an example of, quality, progressive and technologically advanced educational and professional standards.” Furthermore, the RVC aims to develop “a diverse community of lifelong learners enabled to understand and proactively curate their own learning and experiences, with a growth mindset and a continuing connection to RVC as a place to further their development.”

The institutional strategic plan is complemented by sub-strategies which expand further on these aims. There is a "Learning, Teaching, Assessment and Student Experience” strategy (LTASE strategy) a “Data and Digital Technology Strategy” and a “Blended Learning Strategy” which outline in greater detail how the RVC intends to achieve these strategic aims.

The RVC’s LTASE strategy states that:

“To achieve its aims the RVC must have teaching that is:

- Evidence based (learning from and undertaking pedagogical research)
- Research informed and meets the needs of diverse learners
- Incorporates technology where appropriate
- Rises to the challenge of artificial intelligence [AI]
- Employs various methods of delivery appropriate to the intended aims while suited to the needs of diverse learners”

One of the stated aims of the BVetMed program is “To provide a learning environment that appreciates diversity, promotes excellence in learning and teaching, and embeds a desire for life-long learning.”

The fifteen program level learning outcomes include the following.

On graduation students should:

- Apply scientific principles, method and knowledge to clinical practice and research. Proficiently search for and critically analyse literature and use evidence-based medicine to influence clinical decision-making.
- Engage in life-long learning and self-reflection to improve overall competence. Recognise professional limits and seek support when needed.
- Be able to cope with incomplete information and effectively use information services and information technology.

The RVC believes that in order to achieve its institutional strategic aims, the aims of the BVetMed program and to ensure its students achieve all of the BVetMed program level learning outcomes, it is necessary to use a variety of different types of educational interaction. Some of those learning interactions constitute “Distance Education” under the definition used by the US Department of Education.

How RVC plans to use distance education at both the course level and the program level.

The use of distance education in the BVetMed program.

The RVC’s approach to the use of distance education techniques is outlined in its institutional Blended Learning Strategy. This applies to all the programs delivered by the RVC and is adapted for the BVetMed in its specific context as a vocational professional degree program in which learners must achieve practical competencies.

The six main principles of the Blended Learning Strategy are as follows

1. Active and engaging learning
2. Flexible learning resources – onsite or digitally.
3. Inclusive and accessible approaches to learning to support diverse learning styles and preferences.
4. Evidence-based approach that uses data to improve student outcomes and to maintain teaching quality.
5. Building learning communities to support the social aspects of learning in all modes of interaction.
6. Learning that uses technology to enhance interaction and to build confidence in digital skills.

In the context of the BVetMed program, it is clearly articulated that the default mode of delivery for teaching is in-person, but this will be complemented where appropriate by the use of “digital learning interactions” (DLIs). DLIs represent one part of an integrated sequence of teaching and will be employed when a digital means of delivering teaching is, for pedagogical reasons, considered the optimal means of delivery.

The majority of DLIs will be asynchronous, i.e., they can be undertaken by the learner at a time of their choosing and do not have to be done at the same time as they are undertaken by other members of the same cohort. However, their intended position in the sequence of teaching will be recorded in the timetable to indicate to the learner where it is most likely to be of value to access the learning. DLIs are always “scaffolded” by either prior in-person teaching or subsequent in-person teaching. Students will always have the opportunity to raise questions related to the teaching either by digital means through a message board such as a “Padlet”, and there may be an in-person scheduled question and answer (Q&A) session following the DLI where students can discuss their queries in-person. Other opportunities for students to raise queries also occur regularly in the schedule (for more detail see below).

Each individual teaching session – including DLIs – will have stated learning outcomes. Those learning outcomes will map to strand level, year level and course level learning outcomes. Year and course level outcomes are mapped to the competencies of the accrediting bodies, including the CoE of the AVMA. Learning outcomes are used to blueprint assessments. It will be made clear to students that learning outcomes from any type of learning interaction may be assessed as part of the examinations that occur at the end of an integrated period of teaching, usually the end of the academic year.

Distance education will be interspersed among in-person learning activities such as lectures, directed learning exercises and practical activities, such that in any given week of teaching there will be periods where in-person attendance is expected and the learning can only

effectively be accessed by those attending the campus. This will mean that the learning outcomes cannot be achieved by learners remote from the campus for extended periods of time.
Distance education will ***only*** be used in the didactic part of the program in the preclinical period, prior to the lengthy period of clinical experiential learning undertaken by all students in the final two years (five terms) where distance education is not appropriate.

How the RVC will continue to ensure the quality of the curriculum and student learning.

The continued quality of the curriculum and student learning will be ensured in several ways.

Each year the curriculum is subject to an Annual Quality Improvement Review (AQIR) process. During the AQIR process, various sources of information are integrated at the level of each strand, academic year and for the course as a whole. Information reviewed as part of the AQIR process includes student feedback on teaching, student achievement in assessments and reports from external examiners on the level of student achievement. Other information is reviewed at the level of the program as a whole, including feedback from graduates and employers of graduates.

Acquisition of feedback on individual distance education teaching sessions is sometimes built into a DLI. Students are invited to leave feedback on their experience of the DLI and pose questions for the member of faculty responsible for facilitating the DLI. Those questions will be addressed in subsequent interactions such as Q&A sessions.

Reviewing data from assessments will allow the effectiveness of different types of teaching to be evaluated. The RVC assessments are blueprinted to learning outcomes and those outcomes are mapped to individual teaching sessions – hence student achievement of those learning outcomes can be determined. Student achievement of competencies by the time of graduation is also monitored and reviewed.

In summary, those aspects of the curriculum that are delivered by distance education will be subject to the same quality assurance processes as all other aspects of the curriculum. Student achievement of the intended outcomes of distance education will be monitored through blueprinted assessment.

The RVC are confident that the use of distance education will not negatively impact the quality of the curriculum. With its strategic approach to the use of distance education – where it is applied in circumstances where it is most likely to be effective at helping the students achieve the intended learning outcomes – the quality of the program will be enhanced through its use.

Individual standards

Standard 1 – Organization

The parent institution is approved to deliver distance education by the institutional accreditor.

The parent institution of the RVC is the federal University of London. The RVC is approved, by the University of London and other external accrediting bodies, to deliver degree programs that are either predominantly or exclusively delivered by distance education. The national regulator for higher education in England is the Office for Students (OfS) and this body accredits the degree awarding powers of the RVC, independent of the method of delivery, i.e., it recognizes the RVC's ability to deliver in-person and distance education degree programs.

The following are three examples of RVC's involvement in the delivery of accredited distance education programs.

Through the "University of London Worldwide" the RVC delivers a distance learning program, up to the level of a master's degree, in Veterinary Epidemiology and Public Health. Over the last few years there have typically been between 70 and 100 students registered on this course. https://www.london.ac.uk/study/courses/postgraduate/msc-veterinary-epidemiology-public-health

The RVC delivers an internationally recognized suite of postgraduate courses in Veterinary Education up to the level of a master's degree. These are predominantly delivered by distance education. The Postgraduate Certificate (PGCert) in Veterinary Education is externally accredited by AdvanceHE (https://www.advance-he.ac.uk/) and completion of this award results in Fellowship status (Fellow of the Higher Education Academy). As a stand-alone credit bearing module, the first module of the PGCert is accredited for Associate Fellowship. Typically, between 40 and 60 students each year complete the PGCert, which includes around 15-20 students from international

universities, predominantly in North America but also including Asia, Africa, South America and Australasia.

The RVC delivers qualifications in advanced veterinary nursing at the level of Graduate Certificates and Postgraduate Certificates which are recognized and accredited by the Royal College of Veterinary Surgeons. These are predominantly delivered through distance education.

Therefore, in summary, the parent body of the RVC, the UoL, is accredited to deliver distance education programs and does so through the "University of London Worldwide". The RVC itself is accredited by its parent body, the UoL, by the OfS, by AdvanceHE and by the Royal College of Veterinary Surgeons (RCVS), the UK's veterinary professional regulator, to deliver degree programs that are either in part or entirely delivered by distance education. Consequently, faculty of the RVC have a wealth of experience in the effective use of quality-assured distance education.

When used, distance education is appropriately integrated into courses as well as the academic, administrative systems of the college.

Within the veterinary program at the RVC, the BVetMed, distance education is integrated alongside in-person teaching delivery (see above). As such, the administrative structures which support the delivery of the program as a whole are similarly employed to support the provision of distance education. The institutional approach is described as "Blended Learning" where a blend of in-person and distance education methods are employed for optimal delivery of the curriculum.

Administrators, faculty, technical staff, and student support staff commit to success of students who study by distance education.

Students experiencing distance education do so for only a limited and carefully planned part of their overall program. As such, the institution's commitment to their success when studying by this method is indistinguishable from the commitment to success when studying by other means. In a truly integrated curriculum, it is impossible to isolate a commitment to success by a single means of teaching delivery – there is a commitment to success across the whole program.

Courses using distance education reflect a culture of academic rigor and integrity that is supported by policies and procedures for authenticating student identity and the use of Artificial Intelligence (AI) by students.

All timetabled DLIs are accessed via the institutions virtual learning environment (VLE). As such, students can only access them after logging in to the VLE. If this log-in takes place from an IP address that is not recognized as an RVC campus, the student must use multi-factor authentication in order to gain access. If the log-in takes place on an RVC campus, then a single step log-in is sufficient.

The use of Artificial Intelligence by students is regulated by the academic misconduct policy (see below) and high-stakes progression or final assessments are delivered in such a way as to make the use of Artificial Intelligence impossible.

Standard 2 – **Finances**

Distance education is supported through investments in technology and funding for professional development for faculty, administrators, and staff.

Resources for distance education are managed as part of the budget for the Directorate of Learning and Wellbeing. These resources include the personnel who provide advice and support for academics preparing distance education (see below) and the purchase of specific digital tools for the preparation and delivery of digital learning interactions including Panopto, Moodle, iSpring and H5P.

The VLE at the RVC (RVC LEARN) is resourced through the Directorate of Learning and Wellbeing. DLIs are typically accessed via LEARN and adequate resourcing of LEARN ensures that all DLIs are appropriately integrated among all of the other learning materials available to RVC students.

Professional development for faculty, administrators and other staff is either required or actively encouraged, dependent upon role. Development specifically in the field of distance education is ensured by participation in the Postgraduate Certificate in Veterinary Education (see below) which is required of all teaching staff, and staff development INSET days.

The college regularly evaluates and demonstrates its capacity to offer quality distance education courses including available financial resources.

The evaluation of the RVC's capacity to offer high quality distance education is integrated into the Annual Quality Improvement Review (AQIR) processes. The adequacy of resources is reviewed as part of this process. The budget for those resources required specifically for distance education is reviewed as part of the annual budgeting process.

Standard 3 – Physical Facilities and Equipment

The college assures that technology infrastructure, accessibility and data security protections, including those provided through third-party systems, provide an appropriate learning and assessment environment for students and faculty.

The RVC continually invests in its technology infrastructure and security and in its associated systems and applications with the aim of maximizing security, resilience, speed and accessibility across the whole information technology (IT) and digital education estates. Committed to Cyber Essentials (Cyber Essentials scheme: overview – GOV.UK), the RVC uses a variety of "best practice" digital solutions to ensure assessments, such as coursework submission and online-examinations, are conducted in an accessible and secure manner.

Any IT procurement process includes detailed data security consideration of third-party suppliers. This approach is articulated in the Data and Digital Technology Strategy. There is strong governance oversight with a data security dashboard used to provide regular updates.

Significant investment is made in IT equipment and support. IT facilities are available on RVC campuses 24/7, providing students with access to computers as well as various types of furnished study space, printing, scanning and copying facilities. Although most students now use their own devices to access their digital learning resources, there are currently 244 open access PCs available, plus 76 loan laptops, which can be borrowed either on a self-service basis from laptop lockers, or from the Learning Resource Centre (LRC) Helpdesks. All student and faculty network accounts are subject to multi-factor authentication (MFA) as are appropriate systems.

The RVC has invested in its network architecture to provide appropriate capacity, speed and resilience, with data centers on both campuses. The RVC maintains a high-speed resilient connection to the outside world via the Joint Academic Network (Janet) which provides a 10gb network backbone. The wireless network covers both campuses; indoors and outdoors. At the Hawkshead Campus, including Boltons Park Farm, 500+ wireless access points provide 100% internal coverage and coverage of the majority of the outdoor campus. There are 192 access points at the Camden Campus where coverage is virtually 100% internally and externally. Lecture theatres, bookable group rooms, study booths and social learning spaces all provide ready access to electrical sockets. All off-site teaching locations have appropriate digital resources allowing students, faculty and other staff access to all the RVC's digital services.

There are approximately 50 FTE IT staff with a range of professional qualifications and certifications across a broad range of IT areas. The IT team, which includes four IT Security roles, is highly skilled and qualified, and manages IT infrastructure which is fit for both use and purpose. Support for IT users during core hours is available via a dedicated service portal as well as in person at either of the two LRC helpdesks. Online IT assistance can be accessed by webchat, service desk, email or telephone via a helpdesk that is operated from both LRCs. There is also a dedicated helpdesk for the VLE. A third party provides specialist OOH IT support between 17:00 and 08:00 and during any days that the LRCs are closed.

The Blended Learning program of work regularly reviews the suitability of the digital infrastructure for teaching and learning to ensure it meets the needs of the pedagogical approach articulated by the Blended Learning Strategy. Students and Faculty are able to access learning and other resources via the VLE (LEARN) and/or the mobile app while off campus as long as they have an internet connection. There is a service desk presence via which various teams can help if students experience any technical issues.

Standard 5 – Information Resources

The college demonstrates that students studying by distance education are competent in retrieving, evaluating and applying information through the use of electronic and other appropriate information technologies.

The RVC recognizes that it is vital for veterinarians to be competent in retrieving, evaluating and applying information obtained through electronic means. The development of this competence

is a specific aim of the “Scholarship and Evidence Based Medicine” (SEBM) strand within the curricular structure of the BVetMed (see Standards 9 and 10 above).

Through a sequence of teaching and assessment that develops progressively through the BVetMed curriculum, students are taught, and then expected to demonstrate competence in, various academic skills including conducting literature searches and selecting, evaluating and appraising scientific literature. Students on the 5-year BVetMed pathway are assessed on the preparation of a “critically appraised topic report”. All students on the BVetMed undertake a research project in their final two years in which they must demonstrate the ability to retrieve, evaluate and summarize scientific information. This project is a stand-alone assessment that must be passed as part of their Final assessment (“Finals Part 3”).

Adequate qualified instructional design and technical support professionals are available and actively engaged to support students and faculty in developing, delivering, and assessing the efficacy of distance education in the college’s courses.

To prepare and deliver those aspects of the curriculum that are principally provided through distance education, academics are supported by the educational development team, a part of the Directorate of Learning and Wellbeing. Within the educational development team there are specific “Educational Developers” and a “Learning Resources Developer” who assist members of faculty with the development of distance education resources and DLIs. For details of members of staff in the Directorate of Learning and Wellbeing and their level of qualification please see Appendix 5.1 above.

Library staff, who are part of the Infrastructure Services Directorate alongside Learning and Wellbeing in the Professional Services Department, deliver information resources and are guided in this by the Collection Development and Management Policy. Library collections include large numbers of electronic resources (books, journals and bibliographic databases) which are available to students on and off campus. These can be accessed remotely by any student with an internet connection through the VLE or direct via the library catalogue. Library staff also provide instruction and guidance in information retrieval and handling both in person and via short videos, including the use of the library catalogue and bibliographic databases and the Endnote referencing tool.

The technology platforms used to provide distance education offer appropriate accessibility features and/or alternatives to students with identified learning disabilities.

The process of the purchase of new digital platforms routinely includes an equality impact assessment to ensure that the needs of students with identified learning disabilities are met. Staff and faculty development resources are provided to help faculty follow best practice in the use of accessibility features and INSET days have focused on the use of Universal Design for learning as an approach to the development of teaching materials. This further enhances the RVC’s flexible, inclusive and innovative learning environment.

Many of the modalities employed for distance education include features that enhance the learning experience for those with learning differences, by comparison to in-person learning activities. For instance, lecture capture routinely employs captioning and interpretation of on-screen text in DLIs can be enhanced with the use of assistive “Text to Speech” software, such as ClaroRead.

The RVC’s student support mechanisms include providing advice on accessing various specialist study tools. Financial assistance in accessing these tools can be provided through the “Disabled Students’ Allowance”.

Distance education technologies are capable of collecting learner data and can be used to provide early alerts, grade status, progress reports, and identify need for interventions while students are enrolled in courses using distance education.

Distance education technologies used by the RVC produce learner data that assist in monitoring student engagement and progression. DLIs are accessed through the RVC VLE. Access to the VLE requires individual student log-in and then activity of individual students on the VLE can be monitored.

Instructors are able to access information relating to those students who have engaged with a particular DLI, including individual student scores in formative quizzes.

Some of the RVC’s summative examinations are delivered via the VLE and individual learner performance is tracked as part of the overall assessment process.

Standard 6 – Students

Disclosures:

1. Courses incorporating distance education are included in and easily identifiable in the course catalog and course schedules.

All teaching sessions that constitute a DLI are identified as such in the timetable and on VLE. These two sources represent the equivalent of the “course schedule" and the “course catalog”.

2. Information is provided to current and prospective students on requirements for courses that utilize distance education and available resources and support including:
   i. pre-requisites,
   ii. required technology, including hardware, software and internet connectivity;
   iii. expected amount of synchronous and asynchronous engagement with faculty and other students per week or per term
   iv. expectations for student engagement with learning resources;
   v. support services available to students

The distance education is integrated into curricular delivery to such an extent that there are no pre-requisites specific for teaching delivered by distance education.

The required technology for engagement with the distance education resources is not different to the technology that is required to access the learning resources that are provided related to in-person teaching through the RVC’s VLE. As such no additional specific information about resources is required. Asynchronous DLIs can be accessed from any internet-enabled device and students wishing to do so can use desktop or laptop computers provided by the institution to access these materials. Networked desktop computers can be accessed at multiple locations on both campuses and laptops are available for loan from the student learning centres (see above).

There are several ways in which the expected amount of time to be spent in different activities are communicated to students. This information is available to current and prospective students through the BVetMed program specification – which outlines the approximate amount of time spent in different activities in different years of the program. The information is available to current students through the online timetable. Finally, the credit rating of the preclinical course at 120 credits per academic year (or 40 credits per term) implies that approximately 1200 hours of study – including private study – will be required to succeed in each year of the preclinical program.

Expectations for student engagement with learning resources are made clear through the VLE, the timetable and further encouraged with students completing a “Student Record of Achievement" (SRA) in which students are required to demonstrate their engagement with specific learning activities, which will include DLIs. Satisfactory completion of the SRA has been introduced as a condition of progression between different years of the BVetMed.

Support services available for students, including accessing support for digital study skills are made clear to current and prospective students through the RVC website.

3. All advertisements regarding the educational program accurately describe the college’s use of distance education in the curriculum.

It is made clear through the RVC prospectus and the BVetMed program specification that “Blended Learning” is employed in the BVetMed program.

The RVC prospectus states:

“Blended Learning at the RVC aims to combine the best of onsite teaching with learning that takes place in a digital environment, while always valuing the social aspects of learning. It includes a mix of teaching approaches, delivery modes and learner styles. The ‘blend’ can mean different places for learning (onsite and digital), different scheduling (synchronous and asynchronous), different pace (class and self-paced) and different types of instruction (expert-led, social/group, peer and individual).”

The program specification states that teaching on the BVetMed is “***Full-time, face-to-face*** complemented by some digital learning methods.”

4. All costs, including tuition, and fees (including any additional charges associated with distance education delivery, authentication of student identity, online access to learning resources, and proctoring, if used) are included in the Cost of Attendance estimated and made available for prospective and current students.

All costs of learning are included in the cost of attendance. There are no additional charges that students will incur solely as a consequence of participation in distance education. Any necessary software is provided by the institution.

Orientation:

1. Students are oriented to the learning environment; technology; student assessments; academic resources; and available support including advising, tutoring, mentoring, coaching, and accessibility.

Students joining the RVC undergo a comprehensive orientation. This includes an online induction called “KickStart” which is available to students once they have completed an online pre-enrolment. This induction includes sections on digital skills in addition to sections on wellbeing and the academic and personal skills that will be necessary to succeed in higher education.

On joining the RVC, part of induction process involves students being allocated a tutor, with whom they will meet regularly and frequently. Tutors can signpost students to all the different support services that are available – as well as students being able to access these services directly online or through the Advice Centre.

Orientation includes opportunities for students to engage with and demonstrate their competence with the technology and learning format used in courses.

The RVC provides support to students to demonstrate and develop their digital literacy. There are specific aspects of KickStart (see above) that encourage students to develop appropriate digital skills. There is a student “Digital Skills Hub” that is accessible through the VLE. Simple guides to the different digital tools used at the RVC are available through the digital literacy page on the RVC website including sections on the VLE, Lecture capture, Online assessment, Digital learning interactions, the RVC app and interactive voting technology. Availability of this information through the website (as opposed to the VLE) ensures that prospective as well as current students can easily access the information.

Support: College faculty advisors and staff guide students to support services for distance education offered by the college and third-party providers. These services are readily available remotely on a schedule that is established in advance and made known to students.

All students are allocated a personal tutor. The personal tutor acts in a faculty advisory role as well as in a pastoral role. A student’s tutor is often the first point of contact for a student seeking student support services. Those student support services are accessed via a single portal independent of the type of support that is being sought. Advice on study skills and advice on effective digital learning is available in this way.

Students may also access advice on digital learning through student “digital learning champions” (DLCs). Each year of the BVetMed has at least one DLC and there are often several. It is recognized that part of their role is to help teach digital skills to other students and to faculty and staff members who may require assistance.

Standard 8 – Faculty

A. Faculty, including adjunct or contracted instructors, teaching by distance education have training and experience in instructional design, pedagogy, and assessment of student learning in distance education modalities.

It is a requirement of all new faculty who join the RVC to undertake the Postgraduate Certificate in Veterinary Education (PGCert Vet Ed). This is a teaching qualification which on completion allows the successful faculty member to apply for Fellowship of the Higher Education Academy. It is an international postgraduate program delivered in an online community through distance learning. Graduates of the program will therefore have experienced distance education as a learner, as well as having been instructed in the pedagogy of distance education. The PGCert Vet Ed is also available for employees of partner organizations who have a significant role in the delivery of the BVetMed program, for instance employees of veterinary practices that take RVC students on core clinical rotations.

The Postgraduate Certificate includes a specific unit on distance learning (Unit 9, "Learning in the Virtual World") which includes topics such as the design of effective learning materials, collaborative groupwork experienced at a distance both synchronously and asynchronously, and the use of real-time and recorded webinars.

Through completion of the certificate the RVC can ensure that all new faculty have appropriate training.

B. There is continuing professional development available for faculty as well as other academic, technical, and student support staff. Professional development is ongoing and includes attention to emerging technology, instruction design, pedagogy, assessment, and methods of using data for improvement.

Continued development of experienced faculty and other technical and support staff is required with periodic staff development events including INSET days (In Service Education and Training). A recent RVC wide INSET day focused on “Blended Learning and Teaching”. All staff development events since 2020 have been recorded and remain accessible to faculty and other staff through the VLE on the “Staff Hub”.

As outlined above, individual members of faculty can approach the Educational Development team, including those with expertise in instructional design, for advice on delivering effective instruction by distance education. Short accessible instructions to all the modalities for distance education currently used at the RVC are available through the Staff Hub (on the VLE).

If a new technology emerges and is likely to be widely adopted as a teaching tool at the RVC a specific staff development event will be run – the recording of which would be made available afterwards, thus ensuring that existing staff can be supported in their use of a new modality.

C. Evidence must clearly show that enough faculty are available to deliver content either synchronously or asynchronously and to support regular and substantive interaction that occurs by distance education for the number of students that are enrolled.

Faculty numbers have remained stable at the RVC in recent years. Only a small proportion of its BVetMed program is delivered by distance education. There are sufficient faculty and support staff available to support the delivery of the program and there is no intention for staff numbers to change.

Standard 9 – Curriculum

A. Direct instruction delivered by distance education must be supported by regular and substantive interaction between faculty and students in accordance with the policy definitions and uses accepted models and review rubrics for distance education course design and approval.

Instruction by distance education is integrated into the delivery of the curriculum in such a way that the full learning outcomes of the program can only be achieved with regular in-person engagement in teaching activities, in addition to the distance education that is provided. Substantive interaction between students and faculty is ensured in a number of ways, including the following:

- Each discrete period of teaching - for instance the period of delivery of a strand - will have an accompanying “Padlet”. This is a digital message board on which students can post questions relating to any of their learning interactions, whether in-person or through distance education. These Padlets are regularly checked by faculty and students’ questions are responded to. The use of Padlets ensures all questions and answers are available to all students.
- Some DLIs are followed by a specific Q&A session. Students can raise questions relating to the DLI by leaving feedback at the end of the DLI and these questions can be addressed at the Q&A session. The Q&A sessions will usually be held in-person and further clarification can be achieved by discussion with the member of faculty at the end of the session.
- Faculty will respond to e-mails from students who raise questions relating to their teaching, irrespective of the way in which that teaching was delivered.
- All DLIs are the responsibility of individual faculty (or teams of faculty) who are identified associated with the DLI in the VLE. Faculty responsible for DLIs will also be delivering in-person teaching during the same period. Faculty are therefore available after in-person lectures and directed learning exercises to answer questions that relate to DLIs.

These multiple routes of interaction ensure a student’s queries related to teaching can always be addressed in a timely manner.

B. Curriculum delivered by distance education is regularly evaluated and updated based on course-level data and technological advancements.

Delivery of teaching by distance education is integrated into curricular delivery in such a way that it is routinely included in the RVC’s reviews of teaching. As outlined in more detail below,

there is a rigorous system of quality assurance with annual and periodic reviews that are undertaken under the guidance of the RVC's Teaching Quality Committee.

C. *Regarding the use of distance education, at least 85% of the overall preclinical curriculum and at least 50% of the direct instruction (based on available credit hours or credit hour equivalents) in any individual course must be delivered in-person. The Council may consider extending the individual course limit on a case-by-case basis if the college demonstrates that the delivery format aligns with course and program learning objectives; regardless, the 85% overall preclinical curriculum-level minimum must be met, and the requirements of this Policy and the Standards of Accreditation must continue to be met.*

The RVC's review and audit of the learning hours experienced by students through distance education confirmed that the proportion of the preclinical curriculum delivered through distance education will be less than 15% in the academic year 2025/26. In recent academic years there have been higher proportions delivered by distance education, specifically necessitated by the greater shift to online learning in the preclinical course during the COVID-19 pandemic. The academic years affected to the greatest extent by this were 2019/20 and 2020/21. Following the return to "business as usual" after the pandemic, the RVC reduced the proportion of teaching delivered by distance education to the current level. In future the proportion will remain below 15%. The RVC's curriculum is not structured in such a way as to include distinct "courses" of instruction – however, all discrete units of teaching, such as a period of strand teaching in its integrated curriculum, have greater than 50% of the teaching delivered by direct instruction.

D. Distance education cannot be used to deliver any part of the clinical instruction in a veterinary medical education program. Distance education may be used to supplement but not replace in-person pre-clinical skills training or laboratory instruction.

No clinical instruction is delivered by distance education. However, as in many busy clinical settings where teams may be separated by task or shift scheduling, MS Teams is used for communication.

E. Course content: Students receive course syllabi that appropriately integrates distance education learning within courses; these are provided on the learning management platform and include: prerequisites, course delivery structure, class schedule, modes of communication.

Information regarding the syllabus is available through the VLE and the timetabling system. This makes clear to students which components of the teaching are delivered by distance education, and which will be delivered in-person. This will include information on delivery structure, schedule (including whether the teaching is synchronous or asynchronous) and modes of communication.

F. The College implements clear and transparent guidelines for student assessment, utilizes methodologies to authenticate the identity of the student, minimize academic dishonesty, and offer equitable opportunities for all students to demonstrate knowledge. There must be a clear policy and process for reviewing student concerns regarding equality in the assessment process.

All summative assessments that BVetMed students undergo at the RVC follow strict institutional guidance on Examinations and Assessment that are part of the General Regulations of Study and Award. Assessment and award regulations for individual progression and Finals assessments are published well in advance of an assessment taking place and are available through the institution's website. High-stakes examinations are conducted in-person, although they may be administered online in an invigilated setting. This allows access to other resources to be restricted as appropriate for the duration of an examination. To access examination materials students must first log-in and to confirm their identity.

There is clear guidance on what constitutes academic misconduct and procedures for dealing with instances of suspected academic misconduct are clearly stated and fairly applied.

Equality of opportunity is ensured through the implementation of reasonable adjustments that may be made for students with any learning differences.

Students can raise concerns regarding their assessments. There is a clearly stated "Student Complaints and Resolution Procedure" through which formal complaints can be made and methods for resolution of those complaints are outlined.

Standard 11 – Outcomes Assessment

A. Outcomes from courses incorporating distance education are reviewed on a regular cycle. Reviews are informed by empirical evidence including data on student performance during the course, feedback from students, graduates and third parties about their courses and information about student and graduate success (e.g., employment and further education). Overall assessment of courses offered in-person and online ensure learning outcomes and levels of student achievement are comparable across in-person classroom and distance education modalities.

The RVC Quality Assurance and Enhancement processes ensure that all programs and discrete components of programs undergo annual review as part of the AQIR process. Each Strand in the BVetMed curriculum is reviewed, strand reviews feed into reviews of each year of the BVetMed program and the process culminates in an annual review of the program as a whole. The AQIR process is overseen by the RVC Teaching Quality Committee and reports from the AQIR process are tabled at the "Course Management Committee" (CMC - equivalent to the Curriculum Committee).

Periodically, every six years, a more substantial review of the entire program is undertaken. This is referred to as a "Periodic Review". As part of the periodic review, experts including faculty from other veterinary schools are included in a review panel that reviews the program as a whole. Various sources of information are used to inform the AQIR and periodic review processes. This will include feedback from students, achievements of students in assessments, feedback from graduates and feedback from employers of graduates. Additional information is available from external examiners. National information regarding graduate outcomes, including data on employment and further study, is available to the RVC and also informs the review process.

Within this process all aspects of the program will be reviewed, including those components delivered by distance education.

B. Formative and summative assessments of student learning in distance education serve as a basis for course and program improvement.

Data regarding student achievement in assessments is regularly made available as part of the AQIR and periodic review processes. Formative and summative assessments are blueprinted against learning outcomes. Those learning outcomes are linked to specific periods of learning and will include the evaluation of learning outcomes delivered through distance education. Should assessment data indicate that learning outcomes have not been achieved for a large number in a given cohort of students then the method of teaching would be reviewed in an effort to understand why outcomes had not been achieved.

C. A system is in place in each course in which distance education is used to promptly identify and provide remedial support to students as required.

Within the BVetMed program assessments are typically synoptic and cover several discrete periods of teaching. Progression assessments typically occur annually. Were a need to remediate teaching identified, such remediation could be put in place promptly. Typically, remediation is made available to students who are not successful at a progression assessment at the first attempt. A second attempt at assessment is allowed to ensure a student can continue to progress with the remainder of their cohort.

Shortcomings in any identified aspects of a student's learning may be remediated with targeted teaching in the period prior to a retake assessment irrespective of the method of delivery of the initial teaching.

D. The college documents improvements made as a result of course reviews.

Various processes are in place to document improvements made as a consequence of reviews of periods of teaching. If a change is recommended as part of the AQIR or periodic review process (see above) that change will need to be actioned by the CMC and a note of the change will be made in the action log of the CMC.

Recommendations for more substantial change may lead to the need for the RVC's curriculum change process to be followed. With the implementation of curriculum mapping software (https://www.sofiacurriculum.com/) the annual roll-over of the new version of the curriculum will result in the production of a curriculum change report that documents the changes made in the previous academic year. This will include changes in learning outcomes as well as changes in methods of delivery.

More substantial curriculum change, for instance the curriculum revision that has taken place in the period 2021 to 2026, requires the establishment of a curriculum review steering group with working groups that report to the steering group. All significant changes to the curriculum must be implemented through the CMC and will therefore be documented in the CMC minutes and associated papers.

Improvements to the curriculum made directly in response to feedback received from students are specifically noted and promoted through the RVC's "You said.. We did.." process. This was established in order to more visibly demonstrate to students the institution's responsiveness to their feedback.

Narrative and table explaining the proportion of distance education in each term and pathway of the preclinical BVetMed program.

The BVetMed program has an integrated curriculum and is not delivered in discrete "courses". As such, the data presented relates to the proportions of distance education experienced by students at the level of each academic term. The hours of teaching in each term and the proportion delivered by distance education for the academic year 2025/26 are outlined in the table below.

Term	Teaching year	Distance education (DE) (hours)	In person (hours)	Total (hours)	Percentage DE
Autumn	Bachelor of Veterinary Medicine Yr 1	12:30:00	168:15:00	180:45:00	6.9
Autumn	Bachelor of Veterinary Medicine Yr 2	19:30:00	117:45:00	137:15:00	14.2
Autumn	BVetMed Graduate Accelerated	30:00:00	215:15:00	245:15:00	12.2
Autumn	Bachelor of Veterinary Medicine Yr 3	53:15:00	172:15:00	225:30:00	23.6
Autumn	Bachelor of Veterinary Medicine Yr 4	15:30:00	75:00:00	90:30:00	17.1
Spring	Bachelor of Veterinary Medicine Yr 1	23:45:00	188:15:00	212:00:00	11.2
Spring	Bachelor of Veterinary Medicine Yr 2	09:45:00	103:30:00	113:15:00	8.6
Spring	BVetMed Graduate Accelerated	20:30:00	180:45:00	201:15:00	10.2
Spring	Bachelor of Veterinary Medicine Yr 3	41:45:00	184:30:00	226:15:00	18.5
Summer	Bachelor of Veterinary Medicine Yr 1	05:15:00	53:15:00	58:30:00	9.0
Summer	Bachelor of Veterinary Medicine Yr 2	01:30:00	35:45:00	37:15:00	4.0
Summer	BVetMed Graduate Accelerated	08:45:00	59:30:00	68:15:00	12.8
Summer	Bachelor of Veterinary Medicine Yr 3	13:30:00	157:00:00	170:30:00	7.9

As explained in the narrative, there are two routes by which students can complete the BVetMed degree at the RVC. Students can enter a "5-year" pathway which is typically entered

directly on completion of secondary education in the UK (school leavers). These students study for three academic years and one term (i.e., 10 terms in total) during their pre-clinical course.

The second route of entry is via the “Graduate Accelerated” pathway. Students entering via this pathway already have a degree in a relevant area of science and study a four-year program. The four years of study consist of a single “BVetMed Graduate Accelerated” year after which the graduate entry students converge with the 5-year pathway and complete the 3rd and 4th year of the Bachelor of Veterinary Medicine program. These students therefore have two academic years and one term (i.e., 7 terms in total) during their preclinical course.

The total study hours and the proportion of those study hours delivered by distance education are different for the two pathways. This is detailed in the table below which compiles data that are presented in the table above as experienced by students longitudinally passing through the two different programs of study.

Pre-clinical course as experienced by students on the **BVetMed 5 – year pathway**

Term	Year and term of Study in the order in which they are experienced.	Hours delivered by Distance Education	Hours delivered in person	Total hours
1	Autumn Bachelor of Veterinary Medicine Yr 1	12:30:00	168:15:00	180:45:00
2	Spring Bachelor of Veterinary Medicine Yr 1	23:45:00	188:15:00	212:00:00
3	Summer Bachelor of Veterinary Medicine Yr 1	05:15:00	53:15:00	58:30:00
4	Autumn Bachelor of Veterinary Medicine Yr 2	19:30:00	117:45:00	137:15:00
5	Spring Bachelor of Veterinary Medicine Yr 2	09:45:00	103:30:00	113:15:00
6	Summer Bachelor of Veterinary Medicine Yr 2	01:30:00	35:45:00	37:15:00
7	Autumn Bachelor of Veterinary Medicine Yr 3	53:15:00	172:15:00	225:30:00
8	Spring Bachelor of Veterinary Medicine Yr 3	41:45:00	184:30:00	226:15:00
9	Summer Bachelor of Veterinary Medicine Yr 3	13:30:00	157:00:00	170:30:00
10	Autumn Bachelor of Veterinary Medicine Yr 4	15:30:00	75:00:00	90:30:00
	Totals	196:15:00	1255:30:00	1451:45:00
	Proportion of total delivered by distance education			**13.50%**

Pre-clinical course as experienced by students on the **Graduate Accelerated pathway**

Term	Year and term of Study in the order in which they are experienced.	Hours delivered by Distance Education	Hours delivered in person	Total hours
1	Autumn BVetMed Graduate Accelerated	30:00:00	215:15:00	245:15:00
2	Spring BVetMed Graduate Accelerated	20:30:00	180:45:00	201:15:00
3	Summer BVetMed Graduate Accelerated	08:45:00	59:30:00	68:15:00
4	Autumn Bachelor of Veterinary Medicine Yr 3	53:15:00	172:15:00	225:30:00
5	Spring Bachelor of Veterinary Medicine Yr 3	41:45:00	184:30:00	226:15:00
6	Summer Bachelor of Veterinary Medicine Yr 3	13:30:00	157:00:00	170:30:00
7	Autumn Bachelor of Veterinary Medicine Yr 4	15:30:00	75:00:00	90:30:00
	Totals	183:15:00	1044:15:00	1227:30:00
	Proportion of total delivered by distance education			**14.90%**

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Established in 1791, the RVC is the UK's longest-standing veterinary college - with a proud heritage of innovation in science, clinical practice and education.