

Responding to Covid-19

The COVID-19 pandemic has touched every part of society. In the UK, with deaths approaching 120,000 and infections now over four million, it is likely that most people will know someone who has been directly affected. The consequences for employment, economic hardship and mental and physical wellbeing are, and will continue to be, enormous.

In our own sector, for students, the experience of university life has been dramatically different from any other year and, quite aside from the impact of becoming infected, the necessary restrictions have precipitated academic and social arrangements that would have been unimaginable twelve months ago. Off-campus provision, quarantine and self-isolation, poor WiFi access, difficult or unsuitable learning environments, no access to gyms, and the absence of a social life and loneliness are major factors that come on top of the adjustment to blended learning, restricted or absent practical work and difficulty obtaining and attending EMS placements.

Similarly, for staff, recreating curricula and courses for emergency online delivery in the spring of 2020 and then remodelling for true blended delivery that Autumn have come at a cost to both professional advancement and personal downtime – the substantial annual leave deficit is one largely borne of workload and not lack of desire for a break. Staff have too experienced many of the challenges faced by the student population, working at a distance, sometimes in isolation, and often with caring obligations and home-schooling responsibilities.

Throughout the pandemic the Heads of the UK Veterinary Schools, together with those of Dublin and Utrecht, who together comprise the Veterinary Schools Council (VSC), have had weekly meetings to exchange best practice in pedagogy, infrastructure management, clinical provision, biosecurity and approaches to testing and isolation protocols. There have been monthly meetings - and additional discussions as required - with the Royal College of Veterinary Surgeons, the UK veterinary regulator, as well as consultations with, and briefings from, bodies such as the Office for Students (OfS) and the Quality Assurance Agency for Higher Education (QAA).

Yet for all the schools have in common, each has its own unique set of circumstances:

multi-faculty or specialist institution, English, Scottish, Irish or Dutch regulations, small or large student populations, single or multi-campus, rural or urban, mixed international or largely home student body, geographical location, local disease prevalence and infection rates, and access to in-house or government testing facilities. Each school also has a unique approach to the delivery of the common standards required by the RCVS and others, and each curriculum is different in structure, timing and mode of delivery.

It is no wonder, then, that there are both similarities and differences amongst the schools in the ways they have met the challenges of COVID-19. Furthermore, each school has had to adapt to the changing landscape of the epidemic as it has played out locally, as well as responding to restrictions required by Government, often without time to fully consult with the wider sector or VSC colleagues.

Above all, the schools have placed safety and wellbeing as their top priority, and have tailored their approaches to the circumstances of their own school at the same time as ensuring, as far as possible, that every student has the opportunity to meet the learning objectives of their programme and can progress and graduate as close to the original schedule as possible. Moreover, their commitment has been to maintain the integrity of the learning and assessment processes and, in doing so, preserve the standards and quality of the degrees awarded and the reputation of the graduating cohorts.

Inevitably, where differences exist, it is only natural that the student bodies at the various schools will compare and contrast the approaches and offerings of each school. Acknowledging that there will be disappointments and frustrations when expectations are not met, it is sometimes difficult to detail the rationale behind individual decisions in a way that makes complete sense, particularly when social media and informal communications suggest that there is potentially a better way to do things. Sometimes the information surfacing in this manner is useful; other times it is incomplete, out of date or simply wrong.

For the sake of clarity, and to demonstrate that there are both similarities and differences, the following points highlight some of the key issues.

1. Why have some years been allowed to return to campus and others not?

All schools have had to prioritise certain year groups to a greater or lesser extent to mitigate the impact of the pandemic. In every case, priority has been given to those in their final year and where access to the clinical environment is essential. Some schools have made similar arrangements in the earlier years where, for example, practical

anatomy is very difficult to deliver wholly online; other schools have managed to bring the majority back onto campus.

Of major significance in this prioritisation has been the maximum population density that is considered COVID-19 secure for each campus and each building. This will vary by school. What is the case at every school, is that the campus experience is dramatically different than pre COVID-19 and access to facilities is tightly controlled and limited even for those having an on-campus experience.

In making these decisions, those responsible have assessed the learning objectives of each cohort and have come to a view, with consultation, on how to deliver the learning objectives. In some instances, depending on the school and curriculum structure, the decision may have been that a cohort may not need to be on campus for one or more terms. These decisions are reported to the RCVS who will hold the schools to account.

2. Why are some universities testing students and why are different tests used?

In December 2020, the authorities required all universities to offer asymptomatic testing. Prior to this some larger research-intensive universities were offering “in house” testing options as an approach to determine local prevalence and control outbreaks.

Without going into the relative merits of the testing approaches, in general, testing is not mandatory. VSC take the view that it is professionally responsible to participate in the programmes, if only out of consideration for those with whom one comes into contact.

Different tests (mostly PCR and Lateral Flow) are being used for a range of reasons; availability of laboratory facilities and staff; volume and cost; whether to confirm symptomatic or asymptomatic infection; whether part of the NHS scheme or Government supported scheme; whether one or other is stipulated by Government (for example early release from quarantine).

3. Why, then, is testing compulsory for some students?

In some circumstances – for example in clinical areas or on rotations where it is not possible to maintain two metres distancing, universities can make testing mandatory. This can apply to both staff and students.

4. Why are some schools proctoring assessments and others not?

Proctoring is another word for invigilation and is commonly applied to the online assessment environment to ensure academic integrity. All schools and universities have either implemented, or are considering implementing, means of ensuring the integrity of online assessment. Some are using proctoring software, some are using online invigilation, and some are using physically distanced, invigilated examination halls. Several have yet to make a final decision and the situation is complicated for some multi-faculty universities where different subject areas may be required to adopt different approaches.

Proctoring is a widespread approach and can range from the confirmation of identity and surroundings at the beginning of an online assessment, to the automated monitoring of activity during the assessment. There are several software options (e.g., ExamSoft, Proctorio etc) but most operate in a similar fashion.

Both the professional and educational regulators are requiring schools to demonstrate how assessment integrity is being ensured. Without this assurance, the quality of the degree and the reputation of the graduate will be fundamentally undermined.

5. Last year many summer exams were formative; why are they going to be summative this year?

The approach used last year in some universities was an emergency measure applied in extremis following the late March 2020 lockdown. None of the regulators will allow formative-only assessed progression to be used widely this academic year. This will also likely be the case with the “no detriment” policies around assessments conducted last year; this is a live issue across the sector and plays into the agenda of quality assurance and graduate reputation.

6. Why are some years allowed to have open book exams and while others are not?

Fundamental to this answer is an understanding of when “open book” exams are a valid means of assessment. Generally, they can be used when problem-solving or reasoning is being assessed and where it is not possible simply to look up an answer. In the case of MCQs, EMQs and SAQs, which test factual knowledge and where it is possible to look up an answer, the “open book” approach is not appropriate.

It is noteworthy that even for timed “open book” exams, the identity of the candidate is usually confirmed by proctoring software or similar. Furthermore, there are pressures for full proctoring to be brought to bear on “open book” exams as, without proctoring, it is not possible to evidence with certainty the person responsible for completing the assessment.

Whether “open book” or not, the assessments used by each of the schools are tailored to the course delivery and vice versa. It is generally not possible or appropriate to switch assessment modalities after the design and delivery of the programme. For this reason, there may well be differences between schools, between cohorts within a school, and even between subjects.

7. Why are all the decisions being made at the last minute?

Sometimes, the path of the pandemic has changed abruptly and, at other times, announcements from Government have been unexpected or required immediate implementation of restrictions. All schools and universities work to give both staff and students direction with as much notice as is possible. For example, VSC is currently considering the scenarios that might play out in September and October 2021 and will be planning for a range of possible outcomes.

8. Are there different considerations for a distributed clinical education and extra-mural studies (EMS)?

Often conflated, the delivery of clinical training through external providers falls into two broad areas.

- Intramural rotations (IMR) with partner organisations remain quality assured by the university. Learning objectives and assessment must meet the same standard and rigour of teaching that is conducted on campus. These placements are timetabled and are wholly the responsibility of the university to arrange, deliver and maintain. Most schools now have some distributed delivery of this sort and this delivery is supported by legal contracts.
- Extra-mural studies (EMS), whether preclinical or clinical, are required for a number of weeks by the RCVS for students at UK schools. Extra-mural placements are arranged by the student and approved by the university. No contracts are in place and the learning objectives are generic. Assessment is also less formal and conducted by the third party. The style and mode of delivery is owned by the

third party.

In the face of the pandemic, the schools have been required to maintain the IMR off-campus delivery or find alternatives. The situation with regard to EMS has been much more difficult as there is no obligation on any third-party provider (farm, practice etc), to accept students or honour pre-existing commitments. Understandably private businesses have been affected by the pandemic and have sought to reduce capacity and minimise risk, perceived or otherwise; this has led to shortages in EMS provision. Many students have found it difficult to obtain and attend EMS placements.

9. Why does the RCVS not change the rules to reduce the stress on students?

The primary role of the RCVS is to protect the public. It does this by maintaining a register of qualified veterinary surgeons; by ensuring students, graduating from university and who wish to join the register, meet day one competencies; and by administering processes that address concerns of a disciplinary nature. Central to the role of RCVS is the “accreditation” of the training each school provides; this is achieved by assessing how each school meets the standards laid down by the RCVS. The process of setting these standards is designed to ensure the public can have confidence that newly qualified veterinary surgeons are competent. For this reason, it is important that the RCVS maintain the agreed standards and do not undermine the public’s trust in the profession. Any concession on any aspect of the standards will be measured against this criterion.

The RCVS, through their COVID-19 Task Group and a more responsive mode of RCVS Council approval, have been flexible in considering concerns raised by VSC at the regularly convened joint meetings. This has seen a number of modifications around assessment, EMS provision and registration.

10. When will things return to normal?

It is simply not possible to say, but all schools are expecting the vaccine coverage to make a difference. As the schools work towards term three and start planning for the 2021/22 academic year, there will not be a full return to pre COVID-19 arrangements. A hybrid delivery is going to be likely in place for the next academic year and, again, this will vary according to curriculum and local factors.

Concluding remarks

Although it is clear that there is a lot of misinformation circulating in academic and student circles, it is equally obvious that there are both similarities and differences in the way schools are addressing the issues listed above. These similarities and differences relate to the specific circumstances of each school, but staff, students and regulators should be assured that wherever possible best practice is shared and safety and wellbeing remains the highest priority.

What is perhaps less obvious from the current situation is that the patience and understanding demonstrated by students and staff in all schools has been pivotal in ensuring the community's resilience throughout the pandemic. The Veterinary Schools Council takes this opportunity to record its collective thanks to everyone involved in veterinary education, whatever their role, for all their efforts in ensuring the integrity, quality and reputation of our programmes, degrees and graduates.