



VETERINARY PRACTITIONERS
REGISTRATION BOARD OF VICTORIA

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Board Update

NOVEMBER 2015

President's Message

Dear Practitioners,

Welcome to the final Board Update for 2015 and a great opportunity for me to remind you of the changes currently impacting veterinary practitioners in Victoria.

Registration Renewal

The registration year is changing from calendar year to financial year. To facilitate the necessary transition, the Board is making two (2) renewal options available this year. You can now renew for 18 months or if that is not possible then you may renew for 6 months followed by a 12 month period to bring you into line with other Victorian registrants.

Revised Guidelines

Thank you to everyone who provided feedback on the revised guidelines. Where appropriate and within the confines of our Act your suggestions have been incorporated into the final draft. The revised guidelines have been formally adopted by the Board, and have been uploaded to the website.

Please click [Guidelines](#) to view more.

Later in this edition you will find a summary of feedback received, and the Board's response to it.

Staff News

The Board's Finance Officer, Ms Vanita Furness, has commenced maternity leave.

Ms Vicki Kahanoff has been appointed to the role of Finance Officer while Vanita is on maternity leave.

Vicki's past employment has included the financial function for organisations across various industries including the Natural Resources sector and Not for Profit enterprises. She is a qualified accountant with CPA status and enjoys making a contribution to ensure the smooth functioning of the financial resources of any organisation.

The Board welcomes Vicki and hopes that she enjoys her time with us.

Board Appointments

The term of the current Board expires on 17 March 2016. Applications are invited from registered veterinary practitioners and other suitably qualified persons who are interested in applying for a position on the new Board. See the advertisement later in this publication requesting applications for appointment to the 7th Board of the Veterinary Practitioners Registration Board of Victoria under the *Veterinary Practice Act 1997*. Applications close at midnight on 18th November 2015.

Board Appointments continues...

Board members are appointed by the Governor in Council upon the recommendation of the Minister for Agriculture following consideration of the applications. Appointment is for a three (3) year period from 18 March 2016.

End of Year Closures

The Board Office will close on Thursday 24 December 2015 at 3pm and reopen on Monday 4 January 2016, with the exception of Wednesday 30 December from 9am – 5pm when the office will be open to address any problems or issues that you may experience.

Please email your queries or concerns to communications@vetboard.vic.gov.au and the Registrar will endeavour to resolve these matters.

On behalf of the Board and office staff, I take this opportunity to wish you, your clinic support team, and your families a happy and safe festive season.

Roslyn Nichol
President

Draft Guideline 20 - Obligation to Report

The Board has recently considered the obligation of registered veterinary practitioners to report potential breaches of other legislation; specifically breaches of the *Prevention of Cruelty to Animals Act 1986* (POCTA) in cases of suspected animal cruelty and the *Domestic Animals Act 1994* (DAA) in cases of suspected dangerous dogs and/or restricted breeds.

In 2012 a coroner's inquest was held into the death of a young child resulting from a dog attack. As a result of the inquest the coroner made several recommendations to the Minister of Agriculture; one of which was that the DAA be amended to subject veterinary practitioners to mandatory reporting requirements in regard to restricted breed dogs.

The Board has concerns with veterinary practitioners being subject to mandatory reporting obligations, for the following reasons:

- a) The Board is concerned that should veterinary practitioners be required to report potential public safety and/or animal welfare issues it may deter animal owners from seeking veterinary care for their animals.

Failure of an owner to seek veterinary care for their animal when required may result in the animal experiencing unmitigated pain and suffering. A veterinary practitioner's first obligation must be to the welfare of the animal. The Board does not want to see a situation where animal owners may feel discouraged from seeking veterinary attention for their animals when required, and is of the opinion that the implementation of mandatory reporting by veterinary practitioners may result in such a situation.

Specialist Endorsement

Congratulations to the following practitioners who recently received specialist endorsement.

Dr Sarah Gray
Dr Timothy Hugo

V8173
V6108

Equine Surgery
Small Animal Medicine

Draft Guideline 20 - Obligation to Report continues ...

b) The Board is of the opinion that it is not appropriate for veterinary practitioners to administer this legislation. Veterinary practitioners' foremost obligation is to animal welfare, and this is what the public expects. To task veterinary practitioners with administering legislation in regard to matters relating to restricted breeds and/or dangerous dogs would shift the focus from animal welfare and may result in a loss of public confidence and trust. Under the *Domestic Animals Act 1994* authorised officers have significant powers to investigate and take action on such matters.



After discussions with the then Minister it was decided that rather than make veterinary practitioners subject to legislative mandatory reporting requirements, the Board would produce a Guideline relating to a practitioner's obligation to report potential public safety and/or animal welfare issues to the relevant authority.

As a result, the following guideline has been drafted for publication:

If a registered veterinary practitioner is of the reasonable belief that there exists, or potentially exists, a serious risk to the health and safety of the public and/or the health and welfare of an animal, the practitioner must consider whether it is necessary to report the matter to the relevant authority. This responsibility takes precedence over the obligation to maintain client confidentiality.

The Board encourages all practitioners to provide comment and suggestion on the draft guideline. Comment received from practitioners will be considered and where applicable incorporated into the authorised version of the guideline.

Comments can be provided at – <https://www.surveymonkey.com/r/vprbv20>

This is a great opportunity for all practitioners to have a say in the setting of appropriate standards of veterinary practice and veterinary facilities in Victoria.

2016 Registration Renewal

As announced in the July *Board Update*, the registration renewal period will change from calendar year, to financial year. Veterinary practitioners will need to consider which payment option they would like to commit to. The options are:

Type of Registration	Renewal Option 1	Renewal Option 2	
	18 months renewal (1 Jan 2016 - 30 June 2017)	6 months renewal (1 Jan - 30 June 2016)	12 months renewal (1 July 2016 - 30 June 2017)
General	\$ 480.00	\$ 170.00	\$ 330.00 (To Be Confirmed)
Specialist	\$ 680.00	\$ 270.00	\$ 430.00 (To Be Confirmed)
Late Fee	\$ 160.00	\$ 80.00	\$ 160.00 (To Be Confirmed)
Non-Practising	NA	\$ 40.00	\$ 80.00 (To Be Confirmed)

The Registration renewal period will commence on 9 November 2015 and fees are due prior to midnight on 31 December 2015.

2016 Registration Renewal continues...

Veterinary practitioners are able to renew their registration either online via the *VetConsole* or by downloading the relevant registration renewal application from the website: www.vetboard.vic.gov.au

If, for any reason, you are unable to access the *VetConsole* and complete the online registration renewal, please print out the renewal forms from the website and mail them in.

- A late fee will be imposed on any registration renewals that are submitted from 1 January 2016.
- Registration period expiry 31 December 2015 – Late fee imposed from 1 January 2016.
- Registration period expiry 30 June 2016 – Late fee imposed from 1 July 2016

The late fee will only be removed if there are extenuating circumstances which prevented a timely renewal. All requests to have the late fee removed must be in writing to the Registrar.

The Board Office will close on Thursday 24 December 2015 at 3pm and reopen on Monday 4 January 2016 at 9am with the exception of Wednesday 30 December from 9am – 5pm when the office will be open address any problems or issues that you may experience. Please email your queries or concerns to communications@vetboard.vic.gov.au and the Registrar will endeavour to resolve these matters.

If you have any questions regarding renewing your registration, please outline your concerns in an email and send to: communications@vetboard.vic.gov.au

Guidelines Committee Response to Feedback regarding new draft Guidelines Introduction

The Veterinary Practitioners Registration Board of Victoria (the Board) is established under the *Veterinary Practitioners Act 1997* (the Act), in order to administer that act.

One of the main purposes of the Act is to protect the public by providing for the registration of veterinary practitioners and investigations into the professional conduct and fitness to practice of veterinary practitioners.

The Act defines unprofessional conduct, and this definition includes “*professional conduct which is of a lesser standard than that which the public might reasonably expect of a registered veterinary practitioner*”; and “*professional conduct which is of a lesser standard than that which might reasonably be expected of a veterinary practitioner by his or her peers*”.

The Board consists of a combination of peers and the general public, and when the Board investigates a complaint, it has the authority to determine whether the individual circumstances of a complaint constitute unprofessional conduct.

The Act also provides that one of the powers and functions of the Board is to “*to issue guidelines about appropriate standards of veterinary practice and veterinary facilities*” (S62(1)(e)).

Historically, the Board has issued Guidelines from time to time, often as a result of receiving complaints with a common theme.

The Guidelines reflect the Board’s view regarding what might or might not constitute unprofessional conduct under some circumstances, but they are not intended to be a prescriptive list of what registered veterinary practitioners may and may not do.

Whilst the Guidelines are not the only determinant of what constitutes unprofessional conduct, a recent amendment to the Act allows the Board to rely on the Guidelines as evidence of what constitutes unprofessional conduct in a hearing (S47(c)).

Guidelines Committee Response to Feedback continues ...

Indeed, acting in contravention of a Guideline does not of itself necessarily constitute unprofessional conduct. It is not a function of the Board under the Act to seek out and investigate practitioners who may have acted contrary to the Guidelines, but the Guidelines can be used as evidence of what constitutes unprofessional conduct in the investigation of a complaint made under section 21 of the Act.

Whilst the Guidelines are not the only determinant of what constitutes unprofessional conduct, a recent amendment to the Act allows the Board to rely on the Guidelines as evidence of what constitutes unprofessional conduct in a hearing (S47(c)).

The Board initiated a major review of the Guidelines to ensure that they reflect current views of the profession, and so that they explicitly describe what registered veterinary practitioners must and should do or not do.

Feedback is ongoing, but this document describes the Board's response to the first round of feedback which was collected via an online survey in August 2015. There were a total of 97 responses considered.

In responding to feedback from practitioners, the Board makes the following general points:

- a) There was considerable feedback regarding issues that respondents had with the Act, rather than the Guidelines (for example, the definition of Unprofessional Conduct in the Act). The Board will take these comments on board, but notes that legislative change requires significant thought and planning, and that while a function of the Board is to advise the Minister on matters related to its functions, the Board does not have the power to change the Act directly.
- b) There was feedback regarding functions that respondents thought the Board should undertake that are outside the current powers and functions of the Board under the Act (for example, mandating CPD and inspecting veterinary premises to ensure they comply with Guidelines outside of a complaint investigation). Similarly, these would require legislative change.

The Board values all feedback, and will consider comments that relate to legislative change in due course, but this document will be restricted to considering the wording of the draft guidelines before they are approved by the Board. Stakeholders with views proposing changes to the Act should feel free to make their views known through other channels (for example, the AVA or the Department).

For the purposes of this review, the Board considered each suggestion made and determined whether:

- a) A change to the draft Guideline should be made immediately;
- b) A change may be warranted but this will require more consideration and thought than could be given at the current meeting. In this case, the Board will reconsider the feedback at a future meeting;
- c) No change is required to the Guideline as a result of the feedback.

The Guidelines Committee's response to the feedback provided regarding the new draft Guidelines is available online at [Response to Feedback](#).

Case Study - Dr M

A dog became seriously ill, and was rushed to the nearest veterinary clinic. While in transit, the owners' phoned the clinic to advise of their imminent arrival, and were instructed that they should go directly to an emergency clinic as their clinic was busy and there would be a wait before the dog could be seen. By this stage, the owners had arrived at the clinic and entered with the dog, which was in a collapsed state.

The owners were met by the clinic's receptionist who again advised that as they were due to close soon and still had other patients waiting, it would be best to go elsewhere. The owners left the clinic and travelled a further twenty minutes to an emergency clinic. Upon arrival at the emergency clinic, the dog was found to be comatose, cyanotic, and with agonal gasping. Resuscitation was successfully undertaken; however the dog's condition did not improve and euthanasia was performed the following day.

Case Study - Dr M continues...

The owners alleged that the first veterinary clinic was negligent in that they refused to provide veterinary care in an emergency situation. The complaint was raised against the practice principal (PP) of the clinic.

After a preliminary investigation, the Board did not find the requisite degree of evidence to support the allegation of unprofessional conduct; based upon the following reasons.

The Panel acknowledged that the dog was not offered veterinary care at the first veterinary clinic despite being presented in a collapsed state. In response to the Board the PP advised that they were not working on the day in question but had since investigated the matter and established the following:

- 1) There were three staff members working that day: a veterinary practitioner, a veterinary nurse, and a receptionist.
- 2) The only person to liaise directly with the dog's owners was the receptionist.
- 3) The receptionist answered a phone call from the owners at approximately 3.30pm. The owners asked the receptionist if the clinic was open and advised that their dog needed to see a veterinary practitioner as it was unwell.
- 4) The owners advised that they were in the car on their way to the clinic.
- 5) The receptionist spoke with the veterinary practitioner on duty (who was in consultation at the time) and asked if the dog could be seen.
- 6) The veterinary practitioner advised that they should go straight to an emergency clinic as there were other ill animals to be seen and as a result there would be a wait until the dog could be examined.
- 7) At this stage the owners entered the clinic with the dog.
- 8) The receptionist established with the owners that she had just been speaking with them on the phone.
- 9) Once the receptionist established that it was the same animal she again discussed the situation with the veterinary practitioner.
- 10) The veterinary practitioner was unaware that the owners and dog were in the clinic and reiterated the advice that the owners should go to an emergency clinic that provide after-hours care.
- 11) The receptionist relayed the veterinary practitioner's recommendation and the owners left the clinic with their dog.

The Panel considered that there was miscommunication between the receptionist, and the veterinary practitioner. There is no evidence that when speaking with the dog's owners on the phone that the receptionist enquired as to the dog's condition, and as such this important information was not available to the veterinary practitioner. The veterinary practitioner was also not advised that the owners and dog had arrived at the clinic. The Panel were concerned that the arrival at the clinic of a patient in a collapsed state was not recognised by the receptionist, nor communicated to the veterinary practitioner on duty.

Veterinary practitioners have an obligation under the *Prevention of Cruelty to Animals Act 1986* (POCTA) to provide veterinary care to an animal in an emergency situation. Failure to provide veterinary care with the result that unreasonable pain or suffering is caused, or is likely to be caused, to an animal may be defined as an act of cruelty under POCTA. Further, refusal to treat an animal in such circumstances may be in contravention of the requirements of POCTA.

Case Study - Dr M continues...

The Panel acknowledged the seriousness of this incident. As well as having a legal obligation and a duty of care to provide veterinary care to animals in emergency situations, it is a reasonable expectation of the public that a veterinary practitioner will render care and assistance in situations where animals may be suffering and/or in pain.

In response to the Board the PP acknowledged that there was a breakdown in communication between staff members, and that the receptionist was not adequately trained in dealing with emergency cases. In response to the incident, the PP implemented the following changes in practice protocol:

- 1) All emergency phone calls must be triaged by a veterinary practitioner or a veterinary nurse.
- 2) If the animal is at the clinic it must be seen by a veterinary practitioner or a veterinary nurse.
- 3) A recommendation that a client goes to an emergency centre can only be made by a veterinary practitioner, following an assessment of the patient.
- 4) All staff are empowered to interrupt a consultation in the event of an emergency.

In reviewing this matter, the Preliminary Investigation Panel considered both the incident, and the PP's response to it. While the Panel cannot know if the failure to provide veterinary treatment at the clinic in any way influenced the eventual outcome, it acknowledged the gravity of the error made, and the potentially serious consequences which may have resulted from it. The Panel further acknowledged the distress caused to the dog's owners.

It is the practice principal's responsibility to ensure that practice protocols and staff training are adequate and appropriate. In response to the Board, the PP acknowledged that both practice protocols and staff training were lacking in this instance, and the Panel concurred. As a result of this incident the PP took immediate steps to address the practice protocols, and offered the dog's owners an unconditional apology. The Panel were of the opinion that the emergency and triage protocols initiated by the PP were reasonable, and the response to the matter was considered and genuine.

In weighing up the PP's conduct in this matter, the Panel, while acknowledging the gravity of the receptionist's misjudgement, considered that the PP appropriately addressed the situation with the timely implementation of emergency triage protocols, an acceptance of responsibility, and with sensitivity and sympathy. The Panel considered that the actions of the PP, in responding to the situation were reasonable and did not constitute unprofessional conduct.

