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Ref. Draft Code of Conduct Consultation

**Dear Mr Murdoch**

This is in continuation of my telephonic conversation with you on Friday 24 June 2011.

Attached please find our recommendations on the draft Code of Conduct for Veterinary Surgeons.

The recommendations are based on an internal consultation conducted by Vets4BVU.

Best regard,

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# Recommendations of the upcoming British Veterinary Union on the draft Code of Conduct for Veterinary Surgeons

## Veterinary surgeons' responsibilities:

### Veterinary surgeons and animals

1. Veterinary surgeons must make animal welfare their first consideration when attending to animals.

This may well be quite contentious but it is perhaps time to distinctly delineate the responsibility of an animal's welfare between the owner and the attending veterinary surgeon. This consultation observed that the term 'attending' is vague and recommends that a veterinary surgeon's responsibility towards the welfare of an animal should only be in relation to the actual medical or surgical treatment being administered and the care being provided whilst the animal is hospitalised both of which should meet high ethical standards. The onus of the overall welfare of an animal should be on the owner.

It is well known to the RCVS that this public notion of the vet being responsible for an animal's welfare is practically not sustainable. To cite a familiar example, a young female vet on call at night is asked to make a house visit by an unknown client from an unfamiliar area for a reportedly genuine problem. Concerned about her personal safety, she decides not to visit but as expected offers to attend to the animal if brought to the surgery. The owner lodges a complaint with RCVS and the vet has to go through absolutely undeserved stresses and strains of preliminary investigations and the RCVS resources in processing the complaint are wasted to nobody's advantage.

Therefore, we recommend that the wording of this responsibility should be changed to following: -

- **Veterinary surgeons must make animal welfare their first consideration whilst treating an animal.**
2. Veterinary surgeons must ensure that animals committed to their care receive appropriate and adequate veterinary care.

One of the respondents to our consultation reported that he wishes to use more modern medicines to treat epileptic patients but is forced to use Potassium bromide because the veterinary surgeon owning the practice is not prepared to buy anything else as he says he has always been successful with treating such patients with Potassium bromide. This vet believes that the treatment he is providing is neither appropriate nor adequate as his epileptic patient is likely to continue to fit until Pot bromide takes effect.

Under such circumstances, an employed vet has no chances of meeting the posed responsibility, making it an unpractical and imperfect responsibility. In order to avoid such a situation, we recommend that the wording of the responsibility should be changed to following: -

- Veterinary surgeons must ensure that animals committed to their care receive appropriate and adequate veterinary care at their disposal.
3. Veterinary surgeons must take steps to provide emergency first aid and pain relief to animals according to their skills and the specific situation.

Again, this is a responsibility which every veterinary surgeon would like to meet but do not find it easy every time. The most important difficulties lie in the cost of such treatment and being asked to attend to such cases away from the surgery. It is recommended that the remit of such a responsibility should be restricted to animals presented to a veterinary surgeon and any treatment besides essential pain relief and first aid should be given in accordance with the consignor's ability to fund the treatment. Where no funding is available to meet the expenses, euthanasia should be considered as a means of relieving a patient from pain and suffering. Therefore the wording of the responsibility should be changed to following:

- Veterinary Surgeons must take steps to provide pain relief and first aid to animals presented to them on emergency basis and if further treatment cannot be given for lack of funding from the consignor, euthanasia may be considered as means to alleviate pain and suffering.
4. Veterinary surgeons must be competent in their performance, or be under the close supervision of veterinary surgeons who are competent.

Questions have been raised regarding the qualification of words 'competent' and 'close supervision'. It appears that it is not uncommon that new graduates are thrown at the deep end without support and sometimes they have no options to perform procedures about which they are not quite confident. We have received examples of cases where supervision was promised but not made available when needed. In view of this, it is recommended that this clause should include a clear responsibility for employers to ensure that they provide right support and supervision to those performing new procedures. Therefore, it is suggested that the wording of this responsibility to be changed as follows: -

- Veterinary surgeons must be competent in their performance, or be under close supervision of veterinary surgeons who are competent and where a new graduate or a junior veterinary surgeon is asked or allowed to perform a procedure, reasonable supervision must be ensured.
5. Veterinary surgeons must ensure appropriate post-operative or inpatient care for animals after the provision of veterinary procedures, treatment or tests.

A greater part of the post-operative or in-patient care is a matter of organisational arrangements and the employed veterinary surgeons have no control on such arrangements. This needs to be taken into account in setting out this responsibility. It is therefore recommended that the wording of this responsibility be changed as follows: -

- Veterinary surgeons must ensure appropriate post-operative or inpatient care for animals after the provision of veterinary procedures, treatment or tests and where more than one veterinary surgeon is involved, the organisational responsibility lies with the administrators of such arrangements.

6. Veterinary surgeons must prescribe, supply and administer medicines responsibly and in the best interests of the animal or herd, in accordance with the principles of pharmacovigilance and respecting the continued efficacy of the medicine, and for POM-V medicines the animals must be under the prescriber's care.

Obviously this does not mean that every time an antibiotic is prescribed, a bacterial culture and sensitivity test should be performed. Similarly, an employed veterinary surgeon has no choice but to choose from whatever is provided of the antibiotics and other medications. Concerns have been raised by some respondents, especially those working in farm animal practice regarding the limitations they would face to exactly meet the requirements of the responsibility as laid out.

Therefore, in order to provide a reasonable balance between what is expected and what is possible, it is recommended that the following wording be used.

- Veterinary surgeons must prescribe, supply and administer medicines responsibly and in the best interests of the animal or herd, give reasonable consideration to the principles of pharmacovigilance, respecting the continued efficacy of the medicine, and for POM-V medicines the animals must be under the prescriber's care. Where more veterinary surgeons are involved, it is the responsibility of the administrators to facilitate their vets to adhere to this responsibility.
7. Veterinary surgeons must ensure that clinical governance (consideration of animal safety, client experience and effective care) forms part of their professional activities, including monitoring and reviewing clinical outcomes with the aim of improving the care they provide.

This responsibility is only valid for practice owners or partners but not employed vets who have no say in matters of clinical governance, which is primarily an administrative matter. Therefore, we recommend the wording of this responsibility be changed as follows: -

- Veterinary surgeons must ensure that clinical governance (consideration of animal safety, client experience and effective care) forms part of their professional activities, including monitoring and reviewing clinical outcomes with the aim of improving the care they provide and where a practice has multiple vets, the onus of this responsibility lies with the veterinary administrators of the practice.
8. Veterinary surgeons must consider reporting to an appropriate authority when there is reasonable concern that animal welfare has been, or is likely to be, compromised.

This is perhaps the most ambiguous of all the given responsibilities. Who is the 'appropriate authority'? What would be the 'reasonable concern'? Would reporting a client not imply breaking client confidentiality? Given the well established link between animal abuse and human abuse / violence, should the concerns also be reported to agencies like NSPCC? What protection would RCVS provide to the whistle blowers? One vet responding to this consultation wrote this: "I reported a case of neglect to RSPCA with the backing of ...., and I ended up with an RCVS complaint for breaking client confidentiality, and nearly a year of letters and stress later it was eventually thrown out".

Therefore, it is recommended that unless clear and definite guidelines are provided and protection to whistle blowers ensured, this responsibility should be altogether deleted.

9. Veterinary surgeons must consider the euthanasia of an animal to prevent unnecessary suffering, even when the owner or keeper of an animal cannot be contacted, but prior to this, treatment options must be considered, as appropriate.

In order to implement this responsibility RCVS should provide clear guidance on what is meant by 'treatment options' especially when no funding is available from the consignor, local council or NGOs to help with the costs and where to draw the line.

### **Veterinary surgeons and clients**

1. Veterinary surgeons must respect the needs and requirements of their clients, provided that they do not conflict with the principles of this Code or relevant legislation.

What if an owner is unwilling to consider euthanasia in an animal that is obviously suffering? If vets are to uphold animal welfare as our their first consideration, would RCVS support a veterinary surgeons decision to euthanize the animal without owner's consent?

2. Veterinary surgeons must provide impartial, independent and objective advice and inform the client of any conflict of interest.

It is easy said than done for an employed vet, who has little option but to follow the guidelines provided by the practice, which may not necessarily allow room for impartial, independent and objective advice. So many practices pay their vets on the basis of their individual turnover, which clearly implies conflict of interest. Would such vets be expected to declare to each client they see at every appointment that beware 'my pay is related what I get out of you'?

We recommend that as long as RCVS cannot address such broader issues first and ensure that such anomalies do not exist; this responsibility should not be included in the code.

3. Veterinary surgeons must be able to communicate effectively, using the English language in the UK, as appropriate to the audience and context.

If RCVS has concerns about its members not being able to communicate effectively using English language in the UK, then it should be the responsibility of RCVS to ensure that vets who cannot do so are not given the membership.

We recommend that this clause should be deleted.

4. Veterinary surgeons must provide initial and ongoing professional advice, reasonable treatment options, estimates of associated fees and prescriptions, as appropriate.

No veterinary surgeon will withhold advice from a client as long as they continue to seek advice. Therefore the statement 'must provide initial and ongoing professional advice' appears to be like preaching the converted. However, it is reasonable that vets must provide reasonable treatment options, estimate of associated fees and prescriptions. It is therefore recommended that the wording to this responsibility should be changed to following:-

- **Veterinary surgeons must provide reasonable treatment options, estimates of associated fees and prescriptions as appropriate.**
5. Veterinary surgeons must give appropriate information to clients about the:
    - a) provision of care to any patient kept on practice premises, including care outside normal working hours;
    - b) provision and likely cost of out-of-hours emergency veterinary care and domiciliary visits; and,
    - c) cost of medicines and prescriptions in response to reasonable requests and by displaying a large and prominent notice that complies with the responsibilities agreed between the RCVS and the Office of Fair Trading.

Most of the above should be the responsibility of business owners rather than individual veterinary surgeons especially the employed vets.

6. Veterinary surgeons must, as far as is reasonably practical, ensure informed consent is obtained from a client before treatments or procedures are carried out.
7. Veterinary surgeons must not breach client confidentiality unless there are overriding reasons in the public interest, including animal health or welfare.
8. Veterinary surgeons must keep clear, accurate and detailed clinical and client records.
9. Veterinary surgeons must respond promptly, fully and courteously to clients' complaints and criticism.

A minority of clients use abusive and threatening language to make their complaints heard. Most of the other professions use a zero tolerance policy towards abuse, threat and violence. Why a veterinary surgeon should not have the right of respect to their dignity and right to safety against abusive clients. In order to ensure this, we recommend the wording of this responsibility to should be changed to following:

- **Veterinary surgeon must respond promptly, fully and courteously to clients' complaints and criticism. However, if a client uses abusive or threatening language or violence, the veterinary surgeon has the right to cease communicating with such client and seek any legal protection as necessary.**
10. Veterinary surgeons must ensure that all their professional activities are covered by professional indemnity insurance or equivalent arrangements.

### **Veterinary surgeons and the profession**

1. Veterinary surgeons must take, and, at the request of the RCVS, demonstrate that they have taken, reasonable steps to address adverse physical or mental health (i) that could impair fitness to practise; or (ii) that results in harm, or a risk of harm, to animal health or welfare, public health or the public interest.

Does this not contradict to the right to not to implicate self, or laws related to privacy, discrimination, disability etc. One respondent to this consultation comments: "it has a huge potential to be a bullies' charter, and accords too much power to employers". As requirements like this forms part of the RCVS Health Protocol, it appears to be a superfluous responsibility with questionable legality.

2. *Veterinary surgeons must take, and, at the request of the RCVS, demonstrate that they have taken, reasonable steps to address performance (i) that could impair fitness to practise; or (ii) that results in harm, or a risk of harm, to animal health or welfare, public health or the public interest [Subject to legal advice on RCVS jurisdiction].*

As admitted, the legality of this requirement is questionable.

3. Veterinary surgeons in clinical practice, including those qualified elsewhere in Europe, or overseas, must undertake and complete the RCVS Professional Development Phase (PDP) as their initial CPD after qualification and registration; PDP may be used by those returning to clinical practice after a career break.

New graduates need a lot of support to fulfil their responsibilities and to make professional progress including that with the mandatory PDP. However, often they are employed as cheap labour and don't get the support they deserve. It is recommended that this requirement should be re-written to shift some onus on the employers to facilitate new graduates to complete their PDP.

4. Veterinary surgeons on the RCVS practising Register must maintain and develop the knowledge and skills relevant to their professional practice and competence and must undertake a minimum of 105 hours of continuing professional development (CPD) over any consecutive three-year period and keep an appropriate record of CPD undertaken; a significant proportion of which must be relevant to their area of practice.

The CPD requirement in many developed countries like most states of USA, Australia, New Zealand and Ireland are 20 hours per year. If so many countries find a 20 hour CPD per year sufficient to maintain the continued professional development of their veterinarians, it is not clear why RCVS puts such a high requirement. So many employed vets find it hard to meet such requirements as they are not supported by their employers – they are neither helped with the CPD funding, nor given time off for the CPD of their choice. Such vets have to spend their own money and use their statutory leave to do the CPD. Since employers' businesses are the first beneficiaries of the new knowledge and skills acquired through CPD, we urge RCVS to make it obligatory for employers to facilitate their vets' CPD by providing necessary funding and allowing time off for CPD without compromising their statutory holidays. In view of these problems we urge RCVS to seriously consider: (a) reducing the number of mandatory CPD hours from 35 to 20 per year; and (b) make it obligatory for employers to facilitate CPD in a well defined purposeful manner.

5. *Veterinary surgeons who are concerned that the health, performance or competence [Subject to legal advice on RCVS jurisdiction] of another veterinary surgeon is impairing his or her fitness to practise must take steps to ensure that animals are not put at risk and that the interests of the public, including those of the other veterinary surgeon, are protected.*

Again as admitted, the legality of this requirement is questionable. In any event, this should be the responsibility of the employers rather than individual vets to monitor health or fitness to practice problems of other veterinary surgeons. Similarly safeguarding animals and interests of the public under the given circumstances should be the responsibility of the employers not the individual employed vets. What protection would RCV offer to any whistle blowers?

6. Veterinary surgeons must communicate with each other, as appropriate, to ensure that the interests of the animal or group of animals are protected when one veterinary surgeon takes over the care of an animal or group of animals from another, or when veterinary surgeons care for the same animal or group of animals.
7. Veterinary surgeons must conduct themselves in a manner that respects professional colleagues and must not maliciously, or unfairly, criticise or attempt to discredit a professional colleague.
8. *Veterinary surgeons must not hold themselves out as having expertise they cannot substantiate, or call themselves a 'specialist' where to do so would be misleading or misrepresentative [subject to discussions by the RCVS Specialisation Working Party].*

### **Veterinary surgeons and the veterinary team or business**

1. Veterinary surgeons with ownership or control of the veterinary business, or with management or other responsibilities associated with the veterinary team or business, have a greater responsibility to ensure professional colleagues, or staff within the organisation or practice, comply with responsibilities in the RCVS Code of Professional Conduct.

The role of the veterinary surgeons with ownership or control of the veterinary business should not only be to ensure that their professional colleagues comply with responsibilities of the code, but it should be obligatory for them to facilitate vets to meet their professional responsibilities. Therefore, it is recommended that the wording of the responsibility should be changed as follows:

- **Veterinary surgeons with ownership or control of the veterinary business, or with management or other responsibilities associated with the veterinary team or business, have an absolute responsibility to enable professional colleagues, or staff within the organisation or practice, to comply with responsibilities in the RCVS Code of Professional Conduct.**
2. Veterinary surgeons must ensure that there is appropriate veterinary management or supervision of the veterinary team, and appropriate support and assistance for newly registered veterinary surgeons, including those who qualified elsewhere in Europe, or overseas.
  3. Veterinary surgeons must communicate with professional colleagues and staff within the organisation or practice, to co-ordinate the care of animals and the delivery of veterinary services.
  4. Veterinary surgeons must ensure that any member of support staff to whom a task is delegated has the knowledge and skills and any relevant qualification necessary to undertake that task competently.

5. Veterinary surgeons must not direct a listed veterinary nurse to undertake veterinary surgery in accordance with Schedule 3 of the Veterinary Surgeons Act 1966, if the nurse's name has been removed from the RCVS Register at the direction of the Veterinary Nurses Disciplinary Committee.
6. Veterinary surgeons must account, individually or collectively, for medicines (including drugs controlled under the Misuse of Drugs Act) obtained for use within the organisation or practice.
7. Veterinary surgeons advertising their services must do so in a legal, decent, honest, truthful and professional manner.
8. Veterinary surgeons must ensure that all of their professional activities and those of relevant staff are covered by professional indemnity insurance or equivalent arrangements.
9. Veterinary surgeons must maintain adequate practice standards to a minimum of the Core Standards of the RCVS Practice Standards Scheme.

The responsibilities 2-9 are purely a matter of management and only the management should be held responsible for them and not the individual veterinary surgeons who may have no control on such matters.

### **Veterinary surgeons and the RCVS**

1. Veterinary surgeons must be appropriately registered with the RCVS and comply with the RCVS Code of Conduct.
2. Veterinary surgeons must provide the RCVS with their CPD record when requested to do so.
3. Veterinary surgeons must comply with reasonable requests from the RCVS as part of the regulation of veterinary surgeons and the profession, and comply with any undertakings given to the RCVS.
4. Veterinary surgeons must respond promptly and constructively to any request from the RCVS for comments in relation to any allegation or complaint.
5. Veterinary surgeons must provide the RCVS with clinical or client records or any other relevant information when requested to do so in writing, or during a visit to practice premises.
6. Veterinary surgeons (and those applying to be registered as veterinary surgeons) must disclose to the RCVS any caution or conviction (including absolute and conditional discharges and spent convictions), or adverse finding by another regulator, whether in the UK, Europe or overseas.

### **AN IMPORTANT BROADER RECOMMENDATION**

**As a significant number of the responsibilities outlined in the draft Code cannot be met by individual employed vets as they have no jurisdiction on organisational matters of the private, corporate, charitable or other practices they work for. Therefore, we urge RCVS to seriously consider producing two separate codes of conduct: one applicable to veterinary surgeons individually ; and, the other applicable**

**to administrators of veterinary practices. Without this bifurcation, the implementation of this Code in true spirit is practically not possible.**