

Review of the Balance of Competences

Department of Health Call for Evidence: Health

1. The following response is made on behalf of the Royal College of Veterinary Surgeons (RCVS). The RCVS is the regulatory body for veterinary surgeons in the UK. The role of the RCVS is to safeguard the health and welfare of animals committed to veterinary care through the regulation of the educational, ethical and clinical standards of veterinary surgeons and nurses, thereby protecting the interests of those dependent on animals, and assuring public health. It also acts as an impartial source of informed opinion on relevant veterinary matters.
2. The RCVS strongly supports the notion of 'One Health' and that human wellbeing and animal health are very closely linked. This is evidenced by the fact that over 70% of human pathogens originate from animals.
3. This consultation exercise focuses upon competences relating to human health and the regulation of the human healthcare profession. As the regulatory body of the veterinary profession, however, the RCVS considers that human health should not be considered in isolation from animal health or the regulation of the veterinary profession, and that by taking an integrated approach to veterinary and human medicine the prevention and control of diseases would be improved.
4. The RCVS has therefore taken the opportunity to respond to this consultation by highlighting those areas where European legislation impacts upon the way the RCVS regulates veterinary surgeons in the UK. The RCVS has also submitted a version of this response to the Defra Call for Evidence: Animal Health, Welfare and Food Safety Review.

Mutual Recognition of Professional Qualifications and Language Testing

5. Every year, around half of all new registrants with the RCVS come from overseas and the majority of these are from EU or EEA countries. Due, however, to the way the Mutual Recognition of Professional Qualifications (MRPQ) Directive has been implemented in the UK, the College has no power to test the English language competency of graduates from the EU.
6. On 19 December 2011, the European Commission released its proposals for the revision of the Directive. These proposals appeared to provide healthcare professions with a greater ability to test applicants' language skills in the native language of the receiving Member State, but veterinary regulators appeared not to have a right to check the language skills of all registrants.
7. The RCVS and the Federation of Veterinarians of Europe (FVE) maintain that veterinary surgeons should be considered in the same group as the other healthcare professions and should be afforded the same powers to test language ability. Following discussions between the Department for Business, Innovation and Skills (BIS), Defra and the RCVS, however, BIS has indicated that the provisions which are outlined in the proposed Directive clarify that the Commission would allow case-by-case language testing after recognition of qualification. As the Directive is still subject to a number of amendments, which have not yet been agreed, it is unclear what position will finally be adopted on language testing.

8. Commission officials have also confirmed that, under the current regime, testing could take place on a selective basis where there are concerns about an applicant's language ability. Consequently, BIS has agreed that the guidance originally provided by Defra and other departments may have been too restrictive. BIS has therefore given Defra clearance to work with the College to revise this guidance, so as to provide the RCVS with the ability selectively to test the English language skills of EU registrants where there are serious and concrete doubts about their language ability.
9. During 2012 RCVS representatives met with Defra officials to begin to consider how the guidance could be amended, what sort of protocol the RCVS could apply to identify when an applicant's English skills were not adequate, and the sort of tests that might be implemented.
10. Over the coming months the RCVS will be liaising with Defra and developing proposals for the introduction of a fair and transparent system for the selective testing of the English language competence of EU registrants.

Mutual Recognition of Professional Qualifications and Accreditation of Training

11. Veterinary surgeons, together with other healthcare professionals, are part of the automatic recognition system of professional qualifications throughout the EEA, this means that minimum training requirements have, in theory, been harmonised and veterinary surgeons that trained in one member state are eligible to register as veterinary surgeons in another.
12. The RCVS applies a rigorous methodology to ensure that uniform standards are applied at the seven UK veterinary schools. Elsewhere in Europe, a scheme adopting similar parameters operates under the auspices of the European Association of Establishments for Veterinary Education (EAEVE), but this is essentially a voluntary scheme with no legal basis, and not all EU veterinary schools have been approved by EAEVE. However, the RCVS and other EU regulators are required to register EU graduates even if the school they attended has failed its inspection. Failing such an inspection means that the veterinary degree course concerned does not comply with the Directive's minimum training standards.
13. The proposed new Directive may go some way to improving the situation if it is to require Member States to report at five-yearly intervals on arrangements for initial training. However, it is not clear whether this provision will be included in the new Directive, and, even if it is, there is no explicit provision in the proposals to permit Member States to refuse registration to someone holding a degree which has been found not to comply with the Directive's minimum training standards. The College considers that Member States should be required to report on the ongoing accreditation status of their veterinary qualifications and that the Commission should take action against those found no longer to be complying with the training requirements in the Directive. Recent proposals appear to support the involvement of accreditation bodies in the recognition of new qualifications, but it is not clear what the consequences would be if there was evidence of an existing qualification ceasing to comply.
14. RCVS has commented on proposals for the new Directive, including supporting proposals to strengthen the coverage of public health and food safety in the specification for minimum training requirements. However, there needs to be an equal strengthening of requirements for clinical skills and competence to assure the quality of animal health and welfare training within veterinary

schools across the EU. We await the outcome of ongoing deliberations on the Directive on this point.

15. RCVS also welcomes suggestions in the proposed new Directive that ongoing continuing professional development should become mandatory for professionals, although it is not clear yet whether the current proposals include the veterinary profession. RCVS has commented to this effect.

Working Time Directive and 24-hour emergency veterinary cover

16. The RCVS Code of Professional Conduct requires veterinary surgeons in practice to take steps to provide 24-hour emergency first aid and pain relief to animals according to their skills and the specific situation.
17. Providing such 24-hour emergency veterinary care and complying with the Working Time Regulations presents unique difficulties for the profession. If the current understanding of on-call time changes, and a veterinary surgeon on call from home is considered to be working, even when not answering calls, there could be a serious impact on the provision of emergency veterinary care in the UK, with a consequential effect on animal health and welfare. A further issue for the profession is that veterinary surgeons must count time spent sleeping on veterinary premises during on-call periods as 'working time', even on occasions when they may not have been interrupted during these periods or required to undertake any work.
18. The RCVS has concerns that any reduction of the maximum working week could seriously affect the delivery of veterinary services. RCVS survey data suggests that veterinary surgeons only just work within the 48-hour maximum. Furthermore, any changes to the current on-call rules, or reduction in the working week, would seriously affect the cost and practicality of the delivery of veterinary services, particularly as veterinary services are largely provided by a number of small businesses with limited staff resources.

Rare diseases

19. The consultation notes that the 2009 EC Recommendation on Rare Diseases encourages Member States to develop plans to tackle Rare Diseases. The RCVS commends the UK for seeking to develop such a Plan, but notes that it is important to involve the veterinary profession in such planning. This will ensure that potentially zoonotic rare or emerging animal diseases are identified at an early stage and tackled appropriately.
20. If clarification on the above comments is required, please do not hesitate to contact the College. Representatives from the RCVS would be happy to meet with officials to discuss and expand upon this evidence.