

ROYAL COLLEGE OF VETERINARY SURGEONS

PROVISION OF 24-HOUR EMERGENCY COVER

DRAFT PROPOSALS

Part 1 – B The Ten Guiding Principles

Your clients are entitled to expect that you will:

11 co-operate with other veterinary surgeons when making arrangements for the provision of 24 hour emergency cover, to ensure insofar as is practicable, adequate emergency cover.

Part 1 – C

1. A veterinary surgeon must:

b. if in practice make adequate arrangements for the provision of 24 hour emergency cover, in cooperation with other veterinary surgeons in practice; for species treated routinely by the practice, or similar species. This applies equally to:

- i veterinary surgeons employed by charities providing veterinary services;*
- ii veterinary surgeons working in neutering and vaccination clinics and other limited service providers (subject to part 2E);*
- iii private referral practices; and*
- iv referral practices that are part of universities*

Emergency cover means immediate first aid and pain relief in all circumstances,

- c. if on duty to provide 24-hour emergency cover (on-call),*
 - i. advise on any animal, of a species treated routinely by the practice or similar species, which may be suffering and provide immediate first aid*

and pain relief, where appropriate, subject to constraints of distance and practice facilities.

- ii. *make reasonable efforts to ensure that all species in need of first aid and pain relief obtain appropriate veterinary attention.*

Part 1 – D

- 1. *The provision of veterinary services creates a contractual relationship under which the veterinary surgeon should:*
 - a: *ensure that clear information is provided about practice arrangements, including the provision of and initial cost of out of hours emergency attention as soon as reasonably practicable.*

Part 1 – G

- 1. *Veterinary Surgeons should be sufficiently familiar with and comply with relevant legislation including:*
 - c *the Health and Safety at Work (including the Working Time Regulations), Radiation Protection, COSHH and other similar legislation as it applies to veterinary practice and business.*

Part 2 – C

Practice Information

Veterinary practices should provide comprehensive factual information about the nature and scope of the services they provide, including for example, the provision of and initial cost of out of hours emergency attention, as soon as reasonably practicable

Part 2 – D

Twenty-four Hour Emergency Cover.

- 1. *All veterinary surgeons in a primary care practice must make proper provision on a twenty-four hour basis for the relief of the pain and suffering of all species treated routinely by the practice.*
- 2. *This applies equally to veterinary surgeons employed by the animal charities and those employed in limited services practices such as neutering and/or vaccination clinics and single species practices (subject to part 2E).*

3. *Referral practitioners must make provision for twenty-four hour availability of advice in their specialities, for referring veterinary surgeons.*

Part 2 – E

1. Neutering Clinics

Animal welfare must always be the first consideration and veterinary surgeons working in such practices must:-

- a. have the standard facilities required for any small animal practice providing a similar service*
- b. ensure that a full pre operative examination is carried out to establish fitness for surgery and freedom from intercurrent disease. If the latter is identified the animal must be re-directed to its regular veterinary surgeon, or to an appropriate animal charity for treatment BEFORE surgery*
- c. make provision for 24-hour emergency cover for the entire post operative period during which complications arising from the surgery may develop*

2. Vaccination Clinics

Vaccination clinics must similarly:

- a. have the standard facilities required for these services in small animal practice*
- b. carry out a full health check, and contact the animal's regular veterinary surgeon if it is already under treatment*
- c. give advice on feeding and worming as part of the vaccination programme and*
- d. make provision for 24-hour emergency cover for the period in which adverse reactions might arise. (NB. failure to protect is regarded as an 'adverse reaction')*

Paragraph 3 is removed.

ADDITIONAL GUIDANCE

What is 24-hour emergency cover?

24-hour emergency cover means the provision of veterinary attention to deal promptly with life-threatening emergencies at all times.

24-hour emergency cover does not mean provision of a 24-hour service.

Veterinary surgeons in practice must make *provision* for 24-hour emergency cover. With prior arrangement, 24-hour emergency cover may be provided by another practice.

What are adequate arrangements for 24-hour emergency cover?

In assessing whether 24-emergency cover arrangements are adequate in a geographical area covered by one or more practices, all the relevant local circumstances should be taken into account, including, but not exclusively:

- (i) The proximity and nature of local veterinary practices and the cooperation between them;
- (ii) How soon the animal in need can be provided with immediate first aid and pain relief;
- (iii) The information on the nature and scope of the arrangements, including the initial cost, provided to clients and the public; and,
- (iv) The welfare of patients and the needs of clients.

Veterinary surgeons will be expected to be able to justify their emergency cover arrangements in light of local circumstances.

SPECIES TREATED ROUTINELY BY THE PRACTICE AND SIMILAR SPECIES

All patients of the practice are considered to be species treated routinely by the practice.

Is emergency attention required?

The on call veterinary surgeon must decide whether the animal requires emergency attention, immediate first aid and pain relief. If the veterinary surgeon decides emergency attention is not required, he or she must be satisfied that the animal's welfare will not be adversely affected and may be called upon to justify their reasons.

Who is responsible for transporting an animal to the practice?

The responsibility for transporting an animal to the practice premises remains with the owner, but the veterinary surgeon may be in a position to advise on the availability of, for example, an animal ambulance or a taxi service willing to transport sick animals.

If, in the veterinary surgeon's judgment, the animal requires emergency treatment and the animal cannot be transported to the practice, attendance away from the practice premises may be necessary.

When is attendance away from the practice premises necessary and appropriate?

While a request to attend away from the practice premises may arise at any time, it is recognised that this issue is frequently viewed in the context of provision of out-of-hours emergency cover.

Out of hours, a veterinary surgeon may need to attend away from the practice premises on the rare occasions when in the veterinary surgeon's professional judgement it is necessary, subject to a health and safety risk assessment for the visit (or such visits), as appropriate.

This advice is equally relevant when attending at the practice premises alone or when asked to provide services in a potentially volatile situation. Each of these circumstances may give rise to concerns about an individual's health and safety.

A veterinary surgeon (male or female) is not expected to risk his or her 'life or limb', or that of anyone else, in the course of carrying out professional duties.

SPECIES NOT TREATED ROUTINELY BY THE PRACTICE, OR SIMILAR SPECIES?

If on duty to provide 24-hour emergency cover, a veterinary surgeon must make reasonable efforts to ensure that all species in need of first aid or pain relief obtain appropriate veterinary attention. If first aid and pain relief are requested for a species that is either not treated routinely by the practice, or not a similar species, the on call veterinary may direct the caller to an appropriate practice. In these circumstances, there may be no prior agreement between the practices. It would be prudent for practices to ensure on call veterinary surgeons have access to a list of such appropriate practices.