

**RCVS REVIEW ON PROVISION OF
24-HOUR EMERGENCY COVER**

CONSULTATION PAPER

- 1) In December 2003, the RCVS set up a working party to review the current advice provided in the *RCVS Guide to Professional Conduct* and annex to the Guide on the provision of 24-hour emergency cover.
- 2) The working party (whose members are listed at the end of this document) has recommended revised guidance, which Council approved for consultation with the profession and the public.
- 3) Currently, veterinary surgeons in general practice are obliged to make provision for 24-hour emergency cover for all species.
- 4) Some members of the profession believe it is unreasonable:
 - a) to expect practices to comply with the Working Time Regulations and make provision for 24-hour emergency cover; and,
 - b) for clients to subsidise the cost of making provision for adequate care.
- 5) Therefore, the working party has recommended that:
 - a) veterinary surgeons should continue to be obliged to make provision for adequate 24-hour emergency cover; and
 - b) veterinary surgeons (practices) should be obliged to co-operate in the provision of adequate 24-hour emergency cover.

Q1. Should veterinary surgeons in practice continue to be obliged to make provision for adequate 24-hour emergency cover?

Q2. Should veterinary surgeons (practices) be obliged to co-operate in the provision of adequate 24-hour emergency cover?

- 6) Currently, veterinary surgeons must make adequate provision for 'all species' and the public has an expectation that veterinary surgeons can and should treat all species in an emergency situation in order to provide immediate first aid and pain relief.

- 7) Some members of the profession are concerned that it is unreasonable:-
 - a) to expect veterinary surgeons to be able to provide immediate first aid and pain relief to all species;
 - b) for practices to hold veterinary medicines appropriate for the emergency treatment of all species; and,
 - c) to expect staff to manage all species and the relevant medicines in an emergency situation (the risks being unacceptably high).
- 8) Therefore the working party has recommended that the obligation to make provision for 24-hour emergency cover is restricted to 'species treated routinely by the practice, or similar species'.
- 9) In an emergency a veterinary surgeon would be expected to make reasonable efforts to ensure that all species in need of first aid and pain relief obtain appropriate veterinary attention, for example, by providing the animal owner with details of an appropriate practice.

Q3. Should veterinary surgeons make provision for 24-hour emergency cover only for species treated routinely by the practice or similar species?

- 10) Veterinary surgeons must provide clients with clear and comprehensive information about the nature and scope of the services offered by the practice, as well as practice arrangements, including the provision of and initial cost of out of hours emergency attention as soon as reasonably practicable.

FULL DRAFT PROPOSALS FOR REVISIONS TO THE GUIDE TO PROFESSIONAL CONDUCT AND ANNEX

- 11) The draft proposals to the *RCVS Guide to Professional Conduct* and Annex of Additional Information can be found on the RCVS website (via [Latest News, 10 June 2004](#)).
- 12) The current *RCVS Guide to Professional Conduct* and Annex on 24-hour emergency cover can also be found on the RCVS website at www.rcvs.org.uk/vet_surgeons/professionalconduct/view.html
- 13) Please respond with your comments on the draft proposals by email to: 24cover@rcvs.org.uk or post them to Royal College Veterinary Surgeons, Belgravia House, 62-64 Horseferry Road, London SW1P 2AF marked '24-hour cover'.

Deadline for comments: Tuesday 31 August 2004

WORKING PARTY MEMBERS

Mr R Moore, Chairman and RCVS Council Member,

Mrs A Bruce, RCVS Lay Council Member;

Mrs L Hill, Chairman Advisory Committee and RCVS Council Member;

Mr T Greet, President, British Veterinary Association;

Mr G Hibbert, President British Cattle Veterinary Association;

Ms C Ding, NW Region British Small Animal Veterinary Association Chair;

Mr N Blayney, Hon Sec, Society of Practising Veterinary Surgeons;

Mr P Hyde, British Association of Veterinary Emergency Care;

Mr B Pound, CVS (UK) Ltd;

Mr R Hooker, CVO, PDSA;

Mr S Cheetham, CVO, RSPCA;

Mr D Pepper, Veterinary Defence Society