Inspiration and impact at Royal College Day 2018

Welcome to our new-look version of RCVS News, replacing the old, print newsletter (which was sent three times a year) with an online-only product sent directly to your email address 10 times a year with everything you need to know about what’s going on with the College.

We want to start this new publication by telling you about Royal College Day 2018, our Annual General Meeting and Awards Day, which takes place at the Royal Institute of British Architects on Friday 13 July and where we will be bestowing our inaugural Impact and Inspiration Awards to veterinary professionals who are working above-and-beyond the call of duty for animal health and welfare and inspiring their colleagues.

The occasion will also see the inauguration of a new Officer Team with Amanda Boag as President for 2018-19, Niall Connell as Junior Vice-President and Stephen May moving to Senior Vice-President. View a full agenda for the day and details of how to attend.
Over 1,600 EU vet professionals respond to second RCVS Brexit survey

Over 1,600 EU-qualified veterinary surgeons and veterinary nurses have already responded to our second survey on the implications of the UK’s decision to exit the European Union on their lives and careers.

The original survey was sent last year to more than 5,000 UK-registered veterinary surgeons and veterinary nurses who gained their qualification from a non-UK EU institution, with a response rate of around 55%.

This year the Institute for Employment Studies (IES), on behalf of the RCVS, contacted over 6,000 veterinary surgeons and almost 50 veterinary nurses – including those previously surveyed as well as EU registrants who have joined since the last survey – who trained in non-UK EU countries to seek their views on the implications of Brexit for European veterinary professionals. This will help inform us as to how we make our representations to the government. Already more than 1,600 people have responded to the survey.

Chris Tufnell, our Senior Vice-President and Chair of the RCVS Brexit Taskforce, said: “The aim of this survey is to gain a greater understanding of the views and expectations of our EU colleagues now that certain elements of the UK’s withdrawal process from the European Union, as well as the timing, have become clearer. The survey will also be looking for the views of colleagues on how the College has addressed the challenges of Brexit so far.

“It is particularly important that those who responded to last year’s survey do so this year because the aim is to get a sense of how their views and plans are shifting as the Brexit process moves forward.”

As with last year’s survey, the views collated through the consultation will help us understand the immediate and longer-term impact of the UK’s exit from the EU, gather evidence that could be used to make a case for special treatment of veterinary professionals with regard to future immigration policies and allow us to provide informed advice to European veterinary professionals as they make decisions about their future careers.

Dr Tufnell added: “I would strongly encourage EU veterinary professionals to respond to this survey, even if they didn’t do so last year, as their views really do matter to us and really do have an impact on our Brexit policies and the views we put forward to the government in these critical times.”

The deadline for sending responses to the IES is Wednesday 18 July 2018 and all data will be managed and analysed by IES, an independent not-for-profit research institute, on a confidential basis with no individual responses being seen by the RCVS.

We are intending to conduct a third survey when the terms of the UK’s withdrawal from the EU, and the impact of this on non-UK EU nationals, are better defined.

Our Brexit Principles, which set out the views of the College in relation to mitigating the risks and maximising the opportunities of the UK’s withdrawal from the EU, are also available to read.

At the meeting of RCVS Council on Thursday 14 June 2018, members agreed a minor addition to the principles to include the pledge that the College would advocate “that no restrictions are placed on the free movement of EU-qualified veterinary surgeons or veterinary nurses, or on access to evidence, that would jeopardise veterinary research in the UK.”
RCVS to consult on new veterinary nursing qualifications framework

Next month we are asking the veterinary professions for their view on a proposed new framework for post-registration veterinary nursing qualifications which aim to enhance the structure of the veterinary nursing career and, ultimately, introduce an Advanced Veterinary Nurse status.

Veterinary nurse consultation with labrador The proposed framework has grown out of the VN Futures research project, run jointly with the British Veterinary Nursing Association (BVNA), which identified developing a structured and rewarding career path for veterinary nurses as one of the key demands of the profession.

It has been developed by the VN Futures Post-Registration Development Group in conjunction with the RCVS Veterinary Nurses Education Committee and Veterinary Nurses Council.

The proposed framework serves to provide accessible, flexible and professionally relevant post-registration awards for veterinary nurses in order to provide an enhanced level of veterinary nursing practice, while also providing specific modules that veterinary nurses at all career levels can study independently for their continuing professional development (CPD).

Julie Dugmore, our Director of Veterinary Nursing, said: “One of the strongest messages that came out of the research we conducted with the British Veterinary Nursing Association (BVNA) prior to the publication of the VN Futures Report was that there was a need for a more structured and rewarding career path for veterinary nurses.

“Throughout the VN Futures roadshow events nurses felt they were often entering a career cul-de-sac after a certain amount of time in practice and so the need for further post-registration qualifications which promote excellence and recognise advanced knowledge, skills, competency and experience in designated areas were strongly expressed.

“We have taken this feedback and developed it into a comprehensive framework for two defined post-registration qualifications and are very interested in hearing what both veterinary nurses and veterinary surgeons have to say about all aspects of what we are proposing.

“Once we have collated the responses, we will incorporate the feedback into the framework for further consideration by the relevant committees and VN Council.

“The eventual aim is that these qualifications will, once sufficiently bedded in, lead to the development of an Advanced Veterinary Nurse status so that members of the VN profession with the sufficient skills and experience will get the recognition they truly deserve.”

The two new qualifications included in the framework are a Graduate Certificate in Advanced Veterinary Nursing and a Postgraduate Certificate in Advanced Veterinary Nursing. Details of the courses' structure, candidate assessment criteria, accreditation standards, student support, candidate eligibility rules, the RCVS enrolment process and the procedures for certification will be set out in a framework document as part of the consultation process.

The document also includes a prospective list of designations for the two courses covering areas of advanced veterinary nursing knowledge such as wellness and preventative health; rehabilitation and physiotherapy; anaesthesia and analgesia; triage, critical care and emergency nursing; pharmacology; animal welfare; education and teaching; management and leadership; research; and, dentistry.

The consultation will be launched in early July with an email sent to all veterinary nurses and veterinary surgeons containing a link to the survey and asking for their views on the proposals. Details of the consultation, once launched, may also be found at www.rcvs.org.uk/consultations
RCVS increases vet fees by 3%

At its June meeting, RCVS Council agreed a 3% increase in the registration and retention fees for 2019/20 (see table below) which will now be submitted to the Privy Council for formal approval.

Lizzie Lockett, RCVS CEO, commented: “This year we asked Council to agree a fee increase to help us prepare for unknowns such as Brexit, as well as fortify our proactive work to help support the professions.

“Over the past few years we have put increased resources into projects such as: Mind Matters, our mental health initiative; Vet Futures, our joint project with the British Veterinary Association; Vivet, our innovation hub; and our recently launched Leadership Programme. Unfortunately there has also been a rise in Disciplinary Committee hearings and we are having to allocate further funds to making our building fit for purpose, and so a small increase has been necessary.

“This still places us at the lower end of fees for regulatory bodies while providing a secure financial foundation.”

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*Plus relevant amount of retention fee
More than 500 people register an interest in leadership course

More than 500 people have pre-registered for an online leadership course pilot being run as part of our new Leadership Initiative.

Some 550 people veterinary surgeons, veterinary nurses, students and practice managers have registered an interest in joining the first cohort of the Edward Jenner Veterinary Leadership Programme, a massive open online course (or MOOC) being run through the FutureLearn digital education platform.

The individuals who have registered an interest will, in due course, be sent an email providing them with details on how they can formally sign-up to the pilot version of the course.

The MOOC was developed in conjunction with the NHS Leadership Academy and aims to emphasise the importance of leadership and deliver information on the art of good leadership and decision-making, build confidence, develop an inclusive leadership culture and encourage active reflection and application of leadership skills.

To do this the course includes a fictional audio drama featuring veterinary professionals living in the county of Glenvern, which provides a vehicle for reflection and learning about the diverse leadership challenges veterinary professionals face on a daily basis.

Amanda Boag Our Vice-President Amanda Boag (pictured right), who is heading up the Leadership Initiative, said: ‘It’s been wonderful to see such high levels of interest and high numbers of sign-ups for the MOOC, and we want to thank all those who have volunteered.

“We are particularly glad that the people who have registered are a diverse group with around a fifth of them being veterinary nurses and also including practice managers, students and non-clinical staff because the course aims to develop everyday leadership within the whole veterinary team, no matter what stage a person is at in their career.

“We very much look forward to receiving their feedback and making the necessary changes and improvements.”

The MOOC is a key part of the RCVS Leadership Initiative, launched on Thursday 5 April at the British Small Animal Veterinary Association (BSAVA) Congress in Birmingham, and inspired by our joint Vet Futures project with the British Veterinary Association (BVA).

The initiative is also part of the RCVS Strategic Plan 2017-2019 which had as one of its ambitions ‘to become a Royal College with leadership and innovation at its heart, and support this creatively and with determination.’ The College is running it in parallel with its innovation project, ViVet, which was launched in September 2017.

The initiative’s goals include integrating leadership into veterinary professionals’ continuing education, in part by creating the MOOC, leading by example in the College by developing Council and staff members’ leadership skills, and highlighting more diverse leadership opportunities.

To listen to the first two episodes of the audio drama and preview content, as well as watch a video with further information about the programme, please visit www.rcvs.org.uk/leadership or contact Oliver Glackin, Leadership Initiatives Manager, for more information at o.glackin@rcvs.org.uk
RCVS introduces two new committees

We have introduced two new committees and will increase the frequency of public RCVS Council meetings from this year’s Royal College Day (13 July 2018) to aid our decision-making processes.

RCVS Council members March 2018

Following the passage through the Houses of Parliament in May of a Legislative Reform Order (LRO) that updated the College’s governance, members of RCVS Council were presented with a paper on further changes to the committee structure at the RCVS Council meeting on Thursday 14 June 2018.

Among the changes accepted by Council members was an increase in the frequency of public RCVS Council meetings to six in the 2018-19 Presidential year and to eight in the following Presidential year.

The LRO also called for a review of the current Operational Board, which oversees the management of College business and comprises the RCVS Officer Team, committee chairs and senior staff. It was decided that, in light of the more frequent Council meetings, the Operational Board would cease to meet from the summer of 2019.

Some of the work of the Operational Board will be transferred to a new Finance and Resources Committee which will be introduced from summer 2019 and will have within its remit budgets, IT, data issues, human resources, the College estate and strategic communication issues.

From this summer we will also introduce a new Advancement of the Professions Committee, which will be responsible for coordinating and feeding into projects and activities that fall under the College’s Royal Charter pledge of advancing veterinary standards. Projects falling under its remit will include the Mind Matters Initiative, the RCVS Fellowship, the ViVet innovation project, RCVS Leadership, VN Futures and Vet Futures.

Lizzie Lockett, our Chief Executive Officer, said: “By approving this new direction of travel Council has paved the way for a more flexible and agile governance structure, better able to react to events and make strategic decisions in a more open and transparent way.

“The Advancement of the Professions Committee is a particularly exciting development, as the last few years have seen an increase in the number of special projects and initiatives, and having one body that oversees them will encourage a joined-up approach and give Council members greater input in how we take them forward.

“In light of the smaller Council, there was also discussion about how to widen the pool of experience and expertise available to our committees by co-opting individuals from the professions at large. Such opportunities will be identified once the skills matrix of our existing Council members has been analysed.”

The full details about the new Council and Committee structure can be found in the papers for the June meeting of Council.
308 vets removed from the Register for non-payment of fees

We have removed 308 veterinary surgeons from the Register for non-payment of their annual renewal fee.

The final deadline for paying the fee was 31 May 2018, with the 308 who did not pay being removed on 1 June 2018, compared to 339 last year. We sent emails, text messages, and letters to members of the profession reminding them that the fee was due. Additional letters were sent to those for whom we do not hold an email address or mobile telephone number.

A list of those who have not paid their fee has now been published and practices are encouraged to check the list to ensure that no employees are named. Those who have been removed from the Register but have subsequently paid to be restored are not named on the list.

Anyone removed from the Register can no longer call themselves a veterinary surgeon, use the postnominals MRCVS or carry out acts of veterinary surgery – to do so would be in breach of the Veterinary Surgeons Act and therefore illegal.

We would also like to remind veterinary surgeons that, although paying the fee is required to remain on the Register, to complete their registration in full they need to confirm they are compliant with the continuing professional development (CPD) requirement and complete the criminal disclosures form. Both of these are required by the Code of Professional Conduct and can be completed on the ‘My Account’ area.

Anyone with queries about completing the registration process should contact our Registration Department on 020 7202 0707 or registration@rcvs.org.uk.
GDPR – RCVS information and Q&As

The General Data Protection Regulations (GDPR), will be implemented in the UK on 25 May 2018 and will replace existing data protection legislation, the Data Protection Act 1998 (DPA).

The need for compliance
The GDPR is important because it increases the regulatory burden and obligations on organisations and strengthens the rights of individuals.

The potential fines for a data protection breach have also been increased substantially. Non-compliance with the GDPR could lead to sizeable financial penalties.

The Information Commissioner’s Office (ICO) is not trying to put organisations out of business, but highlighting how important compliance with the GDPR is. The ICO will usually work with organisations to achieve compliance; it issues fines only in the most serious cases.

RCVS information
We have provided this information and Q&As for general information only. They are a brief summary of the law as we understand it at the date of publication. You should obtain legal advice or consult the ICO if you are uncertain about any aspect, or if you need more detail.

More guidance will be issued by the ICO in the coming months, and more legislation will be implemented, so you should check the ICO website for updates.

Amendments to RCVS supporting guidance
Following the Standards Committee’s consideration of the GDPR and its relation to the supporting guidance to the Codes of Professional Conduct, we wish to publish updated guidance, which will come into effect from 25 May 2018.

A summary of the guidance that will change is set out, along with a preview of the updated guidance with tracked changes, in order that the profession can see the changes clearly and in advance of them coming into effect.
Complying with HSE ionising radiation policy

At the end of 2017 Inspectors from the Health & Safety Executive (HSE) carried out inspections at a number of veterinary practices to assess their compliance with the requirements of the Ionising Radiations Regulations 1999.

Two veterinary surgeons consulting a cat x-ray Unfortunately a number of breaches of the regulations were identified resulting in 24 Improvement Notices being served and 39 Notification of Contravention letters being sent to veterinary practices. The main failings identified by the inspectors were:

- Risk assessment: Many practices either had no radiation risk assessment or the risk assessment was, in the opinion of the Inspectors, inadequate. The Approved Code of Practice in the regulations give a clear indication of the matters that should be considered in a risk assessment.
- X-ray warning lights: There is an expectation that any warning lights are ‘automatic’ and fail to safety where this is practicable to achieve. If it is not practicable to achieve these standards then other options should be explored such as the use of a dual bulb system.
- Managing x-ray servicing engineers: There should be arrangements in place to manage how service engineers comply with the regulations when they are working at a veterinary practice. There should be an exchange of information prior to the visit to set out how this will be achieved in practice.
- Training: Many of the practices didn’t have a required training policy in place for the Radiation Protection Supervisors, others involved in taking the x-rays and other people on the premises who need to be aware of the radiation hazard. Such policies should include regular refresher training for relevant staff. Records of any training carried out should be made available.
- You should consult with your Radiation Protection Adviser for further information on the above issues.

Since the inspection work was carried out new ionising radiation regulations have come into force. A copy of the new regulations can be downloaded from the HSE website.

One of the main changes in the regulations is the introduction of the ‘graded approach’ for those at work with ionising radiation. In the case of vets this means those working with x-ray sets need to seek ‘registration’ from the HSE, whilst those injecting animals with radioactive liquids will need a consent from HSE. The requirement to have these in place came into force on the 5 February 2018 and any vets found after that date who have not applied will be subject to enforcement action from HSE. The application can be made on the HSE website.

You should consult with your Radiation Protection Adviser about this process and any relevant changes to the Regulations that may affect your work with ionising radiations.
Navigating Schedule 3 delegation in practice: some case studies

Veterinary nurses and student veterinary nurses play a vital role within the veterinary team and veterinary nursing can and should be a very rewarding career path.

VN with dogIt came to light, however, in the course of a consultation exercise conducted by the RCVS in 2017, that there is some confusion amongst veterinary surgeons and veterinary nurses about the legal framework contained in Schedule 3 of the Veterinary Surgeons Act, within which veterinary surgeons can delegate certain tasks and procedures to veterinary nurses and student veterinary nurses.

The legal framework for the role of the veterinary nurse and student veterinary nurse is unfortunately not without its ambiguities and could benefit from updating.

We therefore want to help veterinary surgeons, veterinary nurses and student veterinary nurses feel confident that they are working legally and safely, and ensure that veterinary nurses and student veterinary nurses are fully utilised in satisfying roles.

This case study-led feature is intended to provide clarification about the requirements of the current Schedule 3 exemption for veterinary nurses and student veterinary nurses and should be read in conjunction with Chapter 18 of the supporting guidance to our Code of Professional Conduct – ‘Delegation to veterinary nurses’.

For clarity, the position regarding Schedule 3 has not changed and we are not seeking to pronounce new rules or requirements.

We are committed to developing the role of the veterinary nurse to fit the demands and possibilities of modern veterinary medicine, but this will take time and, more critically, new legislation. In the meantime, we hope to provide more help to assist everyone to work within the current legal framework.

The following five case studies demonstrate how veterinary nurses and student veterinary nurses can work within Schedule 3 and what they can do when working independently. They are intended to assist both veterinary surgeons and veterinary nurses in understanding how Schedule 3 applies in everyday clinical practice.

• Supervising student veterinary nurses
• Student veterinary nurses out-of-hours
• First and second vaccinations
• Microchipping dogs
• Competence and confidence

The following four case studies demonstrate what falls outside the Schedule 3 exemption.

• Veterinary nurses acting independently
• Veterinary nurses and dentistry
• Body cavities
• Prescribing decisions

Supervising student veterinary nurses
Cassie the cross-breed needs a blood sample taken. Adrian the vet knows that Cassie is a very mild-mannered dog and is always well-behaved at the vets.

Adrian has a student veterinary nurse, Ben, who has taken IV blood samples before and so he asks Ben to take the blood sample. Adrian asks his registered veterinary nurse, Carrie, to supervise Ben. Carrie says to Ben she will be in the next room should he need her.
Learning points
This satisfies the requirement for Ben to be supervised. Supervision can be performed by a veterinary surgeon or registered veterinary nurse, and requires the person supervising to be present on the premises and able to respond to a request for assistance if needed. Please note: supervision for minor surgery must be direct, continuous and personal, which means that the person supervising is present and giving the student veterinary nurse their undivided personal attention.

Student veterinary nurses out-of-hours
Daisy is a student veterinary nurse who is working hard and impressing her colleagues with her skills and ability to pick things up quickly. She is scheduled to work her first solo night shift tonight.

Cat in cageShe has a handover with the vet, Elaine, as there will be an inpatient to look after – Horace the cat who has had orthopaedic surgery today. Elaine explains that Horace will need 0.9mg of Methadone at midnight.

Daisy reminds Elaine that as a student veterinary nurse she needs to be supervised when giving medical treatment, such as intramuscular (IM) injections, and so, being alone in the practice tonight means that she will not be able to do this.

Elaine therefore decides that she will need to pop back to the practice at midnight in order to administer the Methadone to Horace herself, or supervise Daisy as she does it.

Learning points
IM injections are considered a Schedule 3 activity and so a student veterinary nurse must be supervised.

First and second vaccinations
Finn, the vet, popped out to buy some lunch about 20 minutes ago leaving Gill, the veterinary nurse, alone in the practice with the receptionist, Helen. A man walks into the practice and explains that he would like his new puppy vaccinated today.

PuppyHelen is new to the practice and says that Gill could see him right now. Helen knows that Gill does many vaccinations every week. Gill politely explains to the puppy owner that she is not actually able to give the vaccination right now as the puppy needs to be seen by Finn first.

Thankfully, Finn returns five minutes later and, sensing the embarrassing situation with the new client, says that he will perform a clinical assessment of the puppy – his sandwich can wait!

Finn is happy that the puppy is fit to be vaccinated and so he asks Gill to administer the vaccine while he resumes his lunch break. He adds that Gill may give the second vaccination in due course.

Gill administers the vaccine and completes the vaccination record card in her name, adding ‘under the direction of Finn MRCVS’. She asks Helen to make an appointment with her for two weeks’ time when the puppy will return for its second vaccination.

Learning points
There must be a clinical assessment by a veterinary surgeon before a first vaccination is administered. Once this has been done, a registered veterinary nurse or student veterinary nurse can be directed to administer the vaccination and they can be authorised to administer the subsequent vaccination/s in the course. Booster vaccinations are different, and require a fresh clinical assessment by a veterinary surgeon.

Microchipping dogs
Laura has been a veterinary nurse in London for 10 years. She has recently left practice and started a dog-walking and dog-sitting business.

At the start of her career, within a veterinary practice setting, she learnt how to implant microchips in dogs and did this regularly. Laura decides to extend her new business to include microchipping, relying on her previous training and experience.
She is thinking about asking her cousin, Melanie (a layperson who has never implanted a microchip) to help out in the business from time to time, but understands that Melanie would not be able to implant microchips in dogs without attending an approved training course.

**Learning points**

*Section 9(1) of The Microchipping of Dogs (England) Regulations 2015 states that the following persons may implant microchips: (a) veterinary surgeons or veterinary nurses acting under the direction of a veterinary surgeon; (b) student veterinary surgeons or student veterinary nurses acting under the direction of a veterinary surgeon; (c) anyone who has been satisfactorily assessed on a training course approved by the Secretary of State for that purpose; or (d) anyone who before the day on which these Regulations came into force (24 February 2015) received training on implantation which included practical experience of implanting a microchip.*

*In the context of her own business, Laura is not a veterinary nurse working under the direction of a veterinary surgeon so cannot rely on section 9(1)(a) but she can rely on section 9(1)(d) due to her prior training and experience.*

*The Microchipping of Dogs (Scotland) Regulations 2016 and The Microchipping of Dogs (Wales) Regulations 2015 contain similar provisions.*

**Competence and confidence**

Nicola is a veterinary nurse working in mixed practice in England. She has only recently joined the practice having spent the first five years of her career in small animal practice. One of the large animal vets, Olivia, has asked Nicola to join her on a farm today to help with the disbudding of some three-month old calves.

Nicola has not done this before and says she does not feel confident doing this procedure without at least observing first. Olivia is very understanding and suggests that she takes a veterinary nurse more experienced with farm animals, Phoebe, along as well so that Nicola can observe.

Phoebe has worked with Olivia for several years and has helped with disbudding on many occasions. Olivia is satisfied that Phoebe can use the hot iron safely and administer the local anaesthetic effectively.

**Learning points**

*Both the delegating veterinary surgeon and the veterinary nurse must feel comfortable with the delegation. Nicola was right to say that she did not feel confident doing the procedure.*

The following case studies demonstrate what falls outside the Schedule 3 exemption.

**Veterinary nurses acting independently**

Rachel is a veterinary nurse employed in a small animal practice. Her hairdresser, Sharon, has a bulldog, Betsy, that she would like to breed from.

VN on phoneSharon asks Rachel if she would pop round at the weekend to take a blood sample from Betsy so that she can send it off to another friend of hers who performs progesterone testing. Rachel agrees.

On Friday, while at work, Rachel asks her boss, Tom, if she can take a blood-sampling kit home to help out a friend at the weekend. Tom asks Rachel what exactly she needs it for. Tom explains to her that she cannot have the blood-sampling kit because she should not be performing an IV blood sample independently.

Rachel argues that she does this all the time in practice and is competent to do it. Tom understands that but explains that Betsy is not under his care and he has not directed Rachel to take the blood sample, in other words, she would not be working within the requirements of Schedule 3.

Rachel calls Sharon to explain that she will not be able to help her this weekend and advises her to take Betsy to a veterinary practice.

**Learning points**

*Taking an IV blood sample is a Schedule 3 activity. Veterinary nurses working independently of a practice and without a veterinary surgeon’s direction cannot perform Schedule 3 activities, regardless of their training and experience.*
Veterinary nurses and dentistry
Una, a student veterinary nurse, is performing a dental scale and polish on an elderly dog under the supervision of Vicky, a veterinary nurse. Una notices that one of the dog’s teeth is loose and so she asks Vicky to pass her the extraction forceps so that she may pull it out.

Vicky explains to Una that neither of them can use the extraction forceps. Vicky explains that they should be asking a vet to come and look at the tooth in question and then, if the vet decides that it should be removed, it should be the vet who uses the extraction forceps to remove the tooth.

Vicky reminds Una that veterinary nurses and student veterinary nurses are only permitted to perform minor surgery, and to use instruments to remove a tooth goes beyond minor surgery and is contrary to RCVS supporting guidance.

**Learning points**

- **RCVS supporting guidance point 18.14 specifically excludes the extraction of teeth using instruments. However, veterinary nurses and student veterinary nurses are permitted to extract teeth that are loose enough to be removed using fingers.**

Body cavities
Tigger the cat has had blood in his urine and his owner thinks he is in pain when he urinates. His owner has brought him to the vets to be checked out.

Tigger is seen by Wendy, the vet, who decides that a urine sample should be taken using cystocentesis. Wendy goes in search of her veterinary nurse, Tim, as she thinks this would be a great new skill to teach him.

She finds Tim assisting another vet, Amy. “Tim, would you like to come and learn how to perform cystocentesis?” asks Wendy. “Yes please!” says Tim. Amy says, “Sorry to be a party pooper but Tim can’t perform cystocentesis – veterinary nurses cannot enter body cavities.”

Wendy collects the urine sample herself but Tim assists.

**Learning points**

- **To perform cystocentesis would amount to entering a body cavity as this involves passing a needle into the bladder through the bladder wall, traversing the abdominal cavity. Schedule 3 specifically excludes the entering of body cavities.**

Prescribing decisions
Sleeping dogIsla and Jess are veterinary nurses working with Kath, the vet. Kath has asked Isla to administer 0.2mg of Buprenorphine to a dog that has a wound.

Isla thinks Kath has miscalculated how much Buprenorphine the dog needs, but rather than go back to Kath to check, she sets about drawing up 0.1mg instead. Jess saw what Isla did and, having heard Kath’s instructions to Isla, tells Isla that she shouldn’t be the person to do this.

Jess explains that Isla should discuss this with Kath and that she should be very careful not to make independent prescribing decisions like this.

**Learning points**

- **Veterinary nurses have no legal dispensation to prescribe medicines. This would be beyond the scope of the Schedule 3 exemption.**
More than regulation

Lizzie Lockett - RCVS CEO

Welcome to our new blog section on the RCVS website. These days, when everything has to be tweetable, or headline-worthy, it’s nice to have space to reflect on some of the broader activities of the College.

There will be the odd blog from me as CEO, but we hope the majority will be from individuals in different parts of the organisation – staff and Council – such as those working in lifelong learning, within our professional conduct process, our advice team and our Practice Standards team.

I am writing this from the departures lounge at Washington Dulles Airport, having just attended a global seminar on wellbeing and stress, organised by the Global Forum on Health Professional Education at the National Academies of Sciences, Engineering and Medicine. I have been here to speak about the RCVS Mind Matters Initiative, and in particular our joint mental health anti-stigma campaign with the Doctors’ Support Network, &Me.

Snowflake, anyone?
The conference was attended by Deans of medical faculties from around the world, and presidents of bodies involved in the medical professions. The veterinary profession was a small voice there but I was credited in the chair’s summation with being the most provoking contributor. I guess I’ve always been small and annoying!

Why the provocation? Apparently I caused this in response to a question about why the ‘younger generation’ couldn’t just deal with the stresses and strains of practice – medical, veterinary – as previous generations had. To which my answer was – suicide statistics will tell you ‘keeping calm and carrying on’ has not been a universally positive strategy thus far; if the new generation are demanding better working conditions we should applaud their courage; if they need more support because they have been parented by society to require it, then it is our duty to provide it. OK it took me a little longer than that and I may have used some more evocative language… but you get the point.

We talk about a recruitment crisis in the veterinary profession and the need for more graduates, but quicker than building a new veterinary school or changing legislation will be to address what it is about veterinary practice, and/or ever-increasing client expectations, that continues to place undue stress on many within it and cause them to leave so rapidly. We also need to analyse and understand the gap that Vet Futures found between the expectations of young veterinary professionals and the reality of clinical practice life.

Taking up the challenge
And these are challenges the College is well placed to address. We are known for tackling fitness to practise issues and ensuring vets and nurses meet the standards set by their peers. But working in the public interest is about more than this. It’s about ensuring the profession as a whole is sustainable, fit for purpose and full of individuals who are able to work to the very best of their abilities.

Over the last few years, largely catalysed by Vet Futures, we have really taken up this challenge. I attended the British Small Animal Veterinary Association (BSAVA) Congress earlier in the month. It was my 25th year – before joining the RCVS in 2005, my career focused on PR in the animal health and agricultural industries. It was my 14th year there with the RCVS and a good opportunity to reflect on how our role has changed over the last decade or so. It used to be that the team on the RCVS stand would steel itself to be challenged over changes to the (then) Guide to Professional Conduct – I remember the year the new medicines legislation came in as being particularly challenging.

Now, visitors to our stand are asking about mental health, leadership and innovation. We are still asked the tricky questions about ethical and professional issues – and that’s only right – but the conversation has most definitely moved on to how we can work positively and proactively, for the good of animal health and welfare, the profession and the public.

Watching our exuberant stand team delighting in telling vets and veterinary nurses about the positive activities of the College, makes me proud that we are truly living up to our strapline of setting, maintaining and advancing standards. There are some, no doubt, who argue that we should stick to our regulatory knitting – the setting and maintaining part – but we are unique in that we are a Royal College that has a regulatory function, which means we can do more than this. When I talk to other regulators at home and overseas, I feel they are often envious of this potential.
So, when a room full of eminent medical professionals from around the globe tells me that what the UK veterinary profession is doing around mental health and stress reduction is making them uncomfortable, and challenging their perceptions of what a regulator can do, my first reaction may be a terribly British shrinking under the table, but my second is to be proud of what the RCVS, its members and associates, has already achieved and will strive to achieve in the future.

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Opportunities in the changing European Veterinary Sector

Will Artificial Intelligence be a source of opportunities for veterinary medicine?

Everyone knows the difference between a dog and a cat. We’ve all seen hundreds of cats and hundreds of dogs. In fact when you see a pet, it is very easy to tell if it is a cat or a dog. But when it comes to explaining how we structure our reasoning to arrive at this classification, it is more difficult.

For Machine Learning programs it is the same thing. They learn from data sets and then develop their own predictors (keys generated to predict categorisation) that can then be used to categorise new data.

Thus the classification assistance on diseases begins to appear in human medicine. We already have PhD courses in Computational Medicine as in Finland. It is reasonable to think that the contribution of metabolomics, with hundreds of biomarkers that can be analysed in a single drop of blood, will accelerate the knowledge of animals and the way to approach their health.

The veterinarian, employee or entrepreneur?

It is not new to say that we are seeing a feminisation of the veterinary profession. We are also seeing the emergence of increasingly large veterinary structures and even chains of tens or even hundreds of clinics, as in the United States. These models meet certain expectations of both customers and veterinarians.

Customers have access to a standardised care offer and improved availability. They can spread the payment with monthly health plans.

Veterinarians can concentrate on care without worrying about stock management, team management, accounting, with even the possibility of flexible working hours, allowing the work-life balance they want.

In parallel we see veterinarian entrepreneurs who create new business models. It can be in technology to facilitate the daily work of veterinarians (ie VetSpire, FuturePet, Pronozia) or connected objects to monitor animal behaviour (Felcana, Petinsight project).

Most often they complete their veterinary courses with training on entrepreneurship in business schools or with massive open online courses (MOOCs) such as those on effectuation (the art of entrepreneurship in the unknown). They can create startups or simply invent new approaches. I think especially of a Parisian veterinarian who specialises in treating ‘new pet animals’. She proposes providing roaming services in clinics that do not have this expertise. As an example, you have a cat and a parrot that both need veterinary care. You make an appointment at the usual clinic that already takes care of your cat and she will come to deliver the care to your parrot at the same time.

To be consistent with the first topic, this text has been written in French and translated almost instantly in English using www.DeepL.com/Translator which is a translation engine using Artificial Intelligence (Machine Learning).

Claude Ecochard is a disruptive innovation senior leader at Royal Canin. His job is to support the company in terms of ‘Dream, Dare, Do’. A Master of Biochemistry and Food Engineering, he leverages his 30 years of R&D experience in the food industry to rethink the futures of the Petcare ecosystem. Passionately curious, he advocates the importance of empathy in the organisation, practices Design Thinking and effectuation principles to shape new opportunities.

He is fond of emerging Business Models in food, the cooperative economy and pet technology, looking at how to provide a positive impact on pet and pet owners’ lives. His buddy Frisko, a eight-year-old Border-line dog, is involved in most of his challenges.
Disciplinary Committee directs College to remove Portsmouth-based veterinary surgeon from Register

The RCVS Disciplinary Committee has directed that a Portsmouth-based veterinary surgeon be removed from the Register of Veterinary Surgeons following his conviction for possessing indecent images of children.

The hearing regarding Simon Wood took place from Thursday 31 May to Friday 1 June 2018 and concerned his conviction in Portsmouth Magistrates’ Court on 19 December 2017 for three offences of possessing indecent images of children, by downloading 38 videos and 13 images between 25 September 2016 and 12 May 2017.

He was subsequently sentenced at Portsmouth Crown Court on 22 January 2018 to a three-year Community Sentence for each offence, to run concurrently, and was made subject to a five-year Sexual Harm Prevention Order.

Simon Wood was also fined £1,000, ordered to pay costs of £340 and a victim surcharge of £85, and placed on the barring list by the Disclosure and Barring Service and required to register with the police pursuant to the Sexual Offences Act 2003 for a period of five years.

"The Committee has not taken this decision lightly, and, lest it be misinterpreted, it has not taken it in order to satisfy any notional public demand for blame and punishment," Ian Green, DC Chair

Simon Wood appeared before the Committee and admitted his conviction, and that the conviction rendered him unfit to practise veterinary surgery. The Committee in its determination of sanction took into account the following mitigating factors: his conviction involved no actual harm or risk of harm to an animal; there was no financial gain; he had engaged in open and frank admissions at an early stage; he was experiencing mental ill-health at the time of the offence; he had taken subsequent steps to avoid a repetition of such behaviour; there had been a significant lapse of time since the incident; and he showed insight into the harm caused by his offence.

The Committee also considered that the purpose of a sanction is not to punish, but to protect the welfare of animals, as well as maintain public confidence in the profession and declare and uphold proper standards of conduct. On consideration of the appropriate sanction, the Committee decided that postponement of judgement was not appropriate, and that taking no action was not an option.

The Committee then considered whether a reprimand or warning was appropriate, but they considered that would not match the gravity of the offence – a period of suspension would also mean Mr Wood would automatically return to the Register after the period of time without the College being able to review his fitness to practise, rendering it an inappropriate sanction. The Committee therefore determined that the removal of Mr Wood from the RCVS Register was the only way to protect the wider public interest and maintain confidence in the profession.

Ian Green, chairing the Committee and speaking on its behalf, said: "The Committee has not taken this decision lightly, and, lest it be misinterpreted, it has not taken it in order to satisfy any notional public demand for blame and punishment. It has taken the decision because in its perception, the reputation of the profession had to be at the forefront of its thinking and ultimately it was more important than the interests of the Respondent. The decision is not simply based on the fact that these offences were of a sexual nature but because they were repeated frequently over a significant period of time, and at the time, the Respondent knew on his own admission that what he was doing was wrong.

"Accordingly, the Committee had decided that removal from the Register is appropriate and proportionate in this case. The Committee will direct the Registrar to remove the Respondent’s name from the Register forthwith."

Mr Wood has 28 days to appeal the Committee’s decision after which, if no appeal is received, the Committee’s judgement takes effect.

Please note: this news story is to assist with understanding the circumstances of the case and the Committee’s decision, it does not form part of the findings or decision. The Committee’s full findings and decision is the only authoritative document.
Disciplinary Committee suspends Ireland-based vet from Register

The RCVS Disciplinary Committee has directed the Registrar to suspend a Republic of Ireland-based veterinary surgeon from the Register for a period of two years after he was convicted of 34 charges related to prescribing veterinary medicines.

Gary Adams was convicted at Gorey District Court, County Wexford, Republic of Ireland in March 2015 for:

- Nine offences of prescribing animal remedies to animals not under his care;
- Five offences of forging entries in official animal remedies records owned by farmers to suggest he had made visits to farms when he had not;
- Seven offences of dispensing a prescription-only animal remedy but not preparing a veterinary prescription containing the details of the animals;
- Two offences of failing to affix labels in the required form to prescription-only items when selling or supplying animal remedies;
- Six offences of failing to annotate the dispensed prescriptions with the word ‘dispensed’ and failing to sign and date them;
- Three offences of failing to keep a record or purchases and sales (including quantities administered) in respect of each incoming and outgoing transaction; and
- Two offences of selling animal remedies on a wholesale basis without an animal wholesaler’s licence.

The charges related to treatment of animals not under his care throughout 2012 and 2013 which were investigated by the Department of Agriculture, Food and Marine in the Republic of Ireland.

In relation to these convictions Mr Adams received a 12-month prison sentence, suspended for two years, was fined a total of €40,000 and ordered to pay costs of €16,400.

Following his conviction his conduct was considered by the Veterinary Council of Ireland’s (VCI) Fitness to Practice Committee and, in September 2017, the VCI a sanction of 12 months’ suspension from its Register. This sanction was upheld by the High Court in the Republic of Ireland in November 2017.

As well as being a registered veterinary surgeon in the Republic of Ireland, Mr Adams was also on the UK-practising Register with the RCVS, so his convictions were considered under the College’s own complaints and disciplinary process.

At the outset of the hearing, which took place on Monday 4 and Tuesday 5 June, Mr Adams admitted the charges and accepted his convictions rendered him unfit to practise. Further, the College asserted that Mr Adams’ convictions rendered him unfit to practise, noting a number of aggravating factors including the risk of injury to animals, dishonesty, premeditation, financial gain and misconduct sustained and repeated over time.

In considering the College’s case and Mr Adams’ own admissions, the Disciplinary Committee agreed that his conduct rendered him unfit to practise veterinary surgery.

Professor Alistair Barr, chairing the Committee and speaking on its behalf, said: “The Committee found the conduct to be at the serious end of the spectrum for such misconduct, it being systematic, prolonged and illegal conduct relating to the supply of animal remedies which posed a significant risk to human and animal health.

“Accordingly, the Committee found that the convictions which led to these charges cumulatively render Mr Adams unfit to practise.”

“The Committee therefore decided that only a suspension of two years would maintain public confidence in the profession and declare and uphold proper standards of conduct for the serious nature of these charges,” Professor Alistair Barr.

In considering the sanction, the Disciplinary Committee took into account a number of mitigating factors including that he had been practising since 1993 and had no previous disciplinary findings, had made open and frank admissions at all stages to the College and had practised between April 2013, when the matters first came to light, and February 2018, when he was suspended by the Veterinary Council of Ireland, without incident.

It also considered the conditions that were imposed upon Mr Adams by the VCI in terms of notification that he was intending to return to practice, auditing of his practice, his continuing professional development (CPD) and having to
undertake personal and professional support programmes and arrangements for professional mentorship for one year after his return to practice.

In view of the sanctions already imposed by the court in Ireland, and his suspension by the VCI, the Disciplinary Committee decided that a period of two years’ suspension from the UK Register of Veterinary Surgeons was the appropriate sanction.

Professor Barr said: "Whilst Mr Adams would be able to practise in the Republic of Ireland before he was able to practise in the United Kingdom again, the Committee considered that the conditions attached to his supervision in Ireland meant that he would be subject to close supervision before he was allowed to practise again in the United Kingdom and that only a longer period of suspension would allow this to happen.

"The Committee therefore decided that only a suspension of two years would maintain public confidence in the profession and declare and uphold proper standards of conduct for the serious nature of these charges."

Mr Adams has 28 days from being informed about the Disciplinary Committee’s decision to make an appeal to the Privy Council.

Please note: this news story is to assist with understanding the circumstances of the case and the Committee’s decision, it does not form part of the findings or decision. The Committee’s full findings and decision is the only authoritative document.
Disciplinary Committee removes Great Yarmouth-based vet from Register

The RCVS Disciplinary Committee has directed the Registrar to remove a Great-Yarmouth-based veterinary surgeon from the Register for a number of alcohol-related issues and clinical failings.

The hearing into Ms Judith Lesley Kay took place between Monday 18 June and Thursday 21 June 2018, and proceeded in Ms Kay’s absence as she failed to attend the hearing in person, despite having sufficient notice of it.

The hearing concerned a number of charges relating to her practising while under the influence of alcohol, breaching undertakings to the College to abstain completely from alcohol, alleged serious clinical failings in relation to the treatment of two dogs, Izzy and Alfie, and making disparaging remarks to a client about other veterinary surgeons (a complete list of charges is available).

In relation to the first charge, namely that on 14 September 2016, while a locum veterinary surgeon at Haven Veterinary Surgeons Group, Great Yarmouth, she was under the influence of alcohol, the Committee heard from Kelly Lawson, a veterinary nurse at the practice. Ms Lawson told how on different occasions Miss Kay had appeared to need more assistance than expected, was overly friendly in speaking to clients, was unable to prepare a syringe correctly, and finally, on 14 September 2016, was found asleep in the car with an open can of alcohol by her feet.

“The Committee considered that the only appropriate sanction is that of removal from the Register. Such a sanction is required to protect animals and to send a clear message to the Respondent, and to all veterinary surgeons, of the unacceptability of the conduct identified in this case. Such conduct undermines public confidence in the profession and fails to uphold proper standards of conduct and behaviour,” Alistair Barr, Disciplinary Committee Vice-Chair. The Committee also heard from a number of other witnesses from the Haven Veterinary Surgeons Group who also provided evidence of Ms Kay’s behaviour on the day in question. Following deliberations, the Committee found the first charge to be proved.

The second charge related to the breaching of undertakings which Ms Kay had given to the College to the effect that she would abstain completely from alcohol. When samples were taken on 3 August 2017, however, it was found that she had been consuming alcohol in the recent past. The Committee was therefore satisfied that the second charge was proved.

The Committee then turned to the third charge, namely that on 17 March 2017 Ms Kay had displayed a number of clinical failings when performing surgery on a cocker spaniel, Izzy, belonging to Mrs Debbie Coe. The Committee found the majority of the charges proved, amongst others that she failed to obtain informed consent for surgery, performed surgery in her own home when it was not registered as a veterinary practice and it was not possible to ensure sterility, and that she failed to provide suitable post-operative analgesia to Izzy.

The College then turned to the fourth charge, which concerned her treatment of Mrs Coe’s other dog, Alfie, a Miniature Schnauzer. The charge was that on 17 March 2017, Ms Kay euthanased Alfie in an inappropriate manner, and used a controlled drug without having a registered veterinary premise from which to dispense it. After hearing from an expert witness the Committee found the charges proved.

Finally, the Committee heard evidence relating to the fifth charge, namely that in or around July 2016, Ms Kay made disparaging remarks to Mrs Coe about other veterinary surgeons who had treated Alfie, and that between 17 March and 31 March 2017 she had sent inappropriate texts and voicemail messages to Mrs Coe about the treatment of her dogs and payments owed in relation to this. The Committee thought there was not enough evidence in relation to the voicemails, but found the remainder of the charge proved.

Taking all into account, the Committee found that Ms Kay’s conduct had fallen far short of the standard expected of a member of the veterinary profession and concluded that her conduct clearly amounts to disgraceful conduct in a professional respect.

Alistair Barr, chairing the Committee and speaking on its behalf, said: “The Committee considered that the only appropriate sanction is that of removal from the Register. Such a sanction is required to protect animals and to send a clear message to the Respondent, and to all veterinary surgeons, of the unacceptability of the conduct identified in this case. Such conduct undermines public confidence in the profession and fails to uphold proper standards of conduct and behaviour.”
“Accordingly, the Committee has decided that removal from the Register is the only appropriate and proportionate sanction in this case.”

Ms Kay has 28 days from being informed about the Disciplinary Committee’s decision to make an appeal to the Privy Council.

Please note: this news story is to assist with understanding the circumstances of the case and the Committee’s decision, it does not form part of the findings or decision. The Committee’s full findings and decision is the only authoritative document.
EVENTS LISTINGS

Royal College Day
13 July - Royal Institute of British Architects, London

Royal Welsh Show
23 - 26 July - Royal Welsh Showground, Powys, Wales

Countryfile Live
2 - 5 August - Blenheim Palace, Oxfordshire