

BVA policy position on the vet-led team

Executive Summary

The concept of the vet-led team, the model in which an interdisciplinary group of appropriately trained and regulated professionals work together under the direction of a veterinary surgeon, is growing in prominence and importance as the veterinary profession experiences rapid changes, including:

- An expansion in the range of allied professionals and members of the vet-led team operating within this environment;
- A change in the expectations of pet owners, farmers, industry, Government and other clients;
- Concerns about the capacity of the veterinary workforce which have been brought into sharp focus by the exit of the UK from the EU

Vet-led teams operate across all sectors, industries and settings. The overarching benefits to realising an efficient and effective vet-led team include:

- Better animal health, animal welfare and public health outcomes;
- Improved client care;
- Provision of more integrated animal care;
- Improved clinical provision or assurance on food hygiene controls;
- More effective and efficient use of skills within the veterinary professions;
- A strengthened veterinary workforce, with the potential to ease capacity concerns and difficulties recruiting and retaining both vets and RVNs;
- Improved wellbeing for veterinary surgeons, RVNs, and allied professionals; and
- More sustainable veterinary businesses.

To support the achievement of these benefits, BVA makes the following recommendations:

Recommendation 1: The operation of all vet-led teams should be guided by the following principles:

- As the professionals competent, and appropriately legally permitted, to diagnose the presence or absence of disease and injury, veterinary surgeons oversee the vet-led team and direct the appropriate procedures and treatments.
- The veterinary surgeon's right to diagnose, prescribe and undertake surgical procedures and medical treatments must not be undermined.
- The integrity and authority of the veterinary signature must be protected.
- There must be clear lines of accountability and responsibility.

Recommendation 2: The "Hub and Spoke" model should be utilised to coordinate the provision of services to clients and facilitate the holistic oversight of animal health, animal welfare and public health. Within the model vets act as the hub for treatment, directing to the most appropriate professional with the appropriate skills. Allied professionals operate as spokes surrounding the hub, returning cases back to the vet whenever further direction is necessary.

Recommendation 3: The should be clear and accessible information available to veterinary surgeons in relation to giving consent to treatment by allied professionals.

Recommendation 4: The veterinary profession should engage with allied professional bodies to encourage the principle that veterinary diagnosis, oversight and where appropriate access to veterinary records are pre-requisites before offering treatment.

A strong voice for vets

Recommendation 5: RCVS proposals for the regulation of allied professionals should incorporate a requirement for regulators to mandate veterinary diagnosis, oversight and appropriate access to veterinary records as pre-requisites before treatment by an allied professional.

Recommendation 6: Insurance companies should require a vet referral prior to treatment by an allied professional.

Recommendation 7: Further work clarifying the regulation of allied professional should be undertaken and communicated through an ongoing and concerted awareness campaign aimed at both the veterinary profession and public.

Recommendation 8: The title 'veterinary nurse' should be protected in legislation in the interests of animal health, animal welfare, public health and to underline confidence in the professionalism of veterinary nurses.

Recommendation 9: Further work to clarify the duties that can be delegated to Registered Veterinary Nurses (RVN) under Schedule 3 should be undertaken and communicated through an ongoing and concerted awareness campaign and provision of joint CPD with vets and RVNs.

Recommendation 10: Accessible, flexible and professionally recordable post-registration awards for RVNs from all academic backgrounds should be provided, to help address the current academic variation in the different routes to registering as an RVN and bring clarity to the academic standard achieved at this higher post-registration level.

Recommendation 11: Any regulatory or legal change should only occur where that change fulfils the following criteria:

- Improved level of care to animals and improved animal health and welfare and public health outcomes
- Enhanced service to clients
- Clear lines of accountability between the veterinary surgeon and RVN.
- Positive impact on the division of workload within the veterinary team.

Recommendation 12: Consideration should be given to granting RVNs additional rights to dispense POM-V flea and wormer treatments, working as part of the vet-led team.

Recommendation 13: There should be an expanded role for RVNs in general anaesthesia, where the veterinary surgeon maintains overall responsibility for the anaesthesia process.

Recommendation 14: Consideration should be given to expanding the role of RVNs in the ongoing management of chronic cases, supporting owner compliance and contributing to the maintenance of long-term welfare. This may include repeat dispensing for certain conditions already diagnosed, subject to a standard operating procedure (SOP) and directed CPD, and routine veterinary surgeon checks.

Recommendation 15: Consideration should be given to the potential role for RVNs in repeat dispensing contraceptive medication, anthelmintic monitoring and treatment, and administration of vaccines in a zoo setting, after initial veterinary assessment, under overall veterinary direction, and in line with the collection's Preventive Health Programme and Disease Surveillance Programme.

Recommendation 16: There should be more effective utilisation of Suitably Qualified Persons (SQPs) within the vet-led team with improved integration facilitating more effective collaboration with farm health planning advice from the veterinary surgeon

Recommendation 17: It would be beneficial to incorporate the Suitably Qualified Person (SQP) role within RVN training, assessment and competencies, and to provide a pathway for current RVNs to be recognised with SQP status in a time efficient and cost-effective manner. This should be explored for RVNs working in small animal, farm and equine practice.

Recommendation 18: BVA should work with Royal College of Veterinary Surgeons (RCVS) to encourage the development of accreditation of allied professional where appropriate. RCVS structures should be utilised to regulate where it is considered to be the most appropriate body and the following criteria are met:

- There is evidence that the activities carried out by the group are beneficial to animal health, animal welfare or public health;
- Association with the group will not damage the reputation of the veterinary profession;
- The professionals within the group will only practise under appropriate veterinary oversight
- The regulation of the group will be self-funding.
- The professionals within the group present as cohesive and established.

Recommendation 19: The Royal College of Veterinary Surgeons must consult the veterinary profession on any regulatory changes that may arise as a result of technological or other innovation.

Recommendation 20: The veterinary profession should engage with clients on the most effective use of technology to complement the essential role of the vet.

Recommendation 21: A change in regulation to allow remote prescribing without undertaking a physical examination or assessment is not necessary for vets to embrace the opportunity offered by telemedicine or to address the primary reason behind pet owners not registering with a vet.

Recommendation 22: Opportunities need to be available throughout the veterinary career to develop management and leadership and team building skills. The development of CPD to instil these skills, including joint training with allied professions, should be prioritised.

Recommendation 23: Undergraduate training has a role to play in management and leadership and facilitating the development of leadership, teamworking and management skills.