

## **Regulatory reform – enhancing the VN role meeting**

Thursday 12 November 2020, 10am  
Zoom meeting

### **Attendees**

Liz Mullineaux - Chair  
Carl Bradbrook – Association of Veterinary Anaesthetists  
Emma Callaghan – Ethics and Welfare Advisory Panel  
Deidre Carson – British Equine Veterinary Association  
Emily Craven – Policy Committee  
Dot Creighton – District RVN  
Daniella Dos Santos – BVA Senior Vice President  
Amelia Findon – BVA Head of Policy & Governance  
Vicky Ford-Fennah - Association of Veterinary Anaesthetists (RVN)  
Anna Judson – Society of Practising Veterinary Surgeons  
Alice Moore – Policy Committee  
Jo Oakden – British Veterinary Nursing Association (RVN)  
Gudrun Ravetz - BVA representative on RCVS Legislation Working Party  
Tom Reilly – RVN  
Charlotte Wood – British Veterinary Nursing Association (RVN)

### **Welcome and ways of working**

1. The chair welcomed attendees to the meeting and introductions were made.
2. It was noted that the chairs of all five BVA working groups contributing to the development of the BVA position on the recommendations from the RCVS Legislation Working Party had met 15 October to discuss ways of working. It had been agreed that transparency and open lines of communication with the wider membership would be important throughout the process, particularly given some of the concerns circulating around some of the recommendations. It had been proposed that details of working group activity, including membership, minutes, and emerging themes would be published on the BVA website, and promoted via BVA's weekly roundup and social media channels. There would also be a dedicated email address for members to get in touch with views. The proposed approach was supported and, subject to agreement across all five of the working groups, would be progressed in house.

### **Scope and objectives**

3. The RCVS Legislation Working Party (LWP) had been established in 2017, tasked with examining the Veterinary Surgeons Act 1966 (VSA) and making proposals for reform with a view to enabling RCVS as a modern and efficient regulator. LWP had been asked to establish principles on which any reform would be based, and to ensure that any recommendations were considered in the round to produce a coherent vision.
4. Over the course of three years and twelve meetings the group had explored over 56 reform proposals, from fundamental questions to relatively minor changes, with BVA represented by Gudrun Ravetz. Most of the proposals from LWP were for RCVS to have powers 'in principle' with the details to be agreed by RCVS Council. However, the recommendations relating to veterinary nursing related to specific tasks rather than principles. It was noted that although the LWP discussions had been principle based at the outset it had quickly become clear that there were unresolved questions relating to specific tasks for VNs which predated LWP and could reasonably be progressed as part of the package. The working group were encouraged to view the specific proposals as the first in a longer-term commitment to developing the VN role.

### Schedule 3 reform

5. The RCVS VN Schedule 3 Working Party had been established in early 2016, following the government's decision not to support the College's petition on the protection of the VN title. The Working Party had commissioned a survey of the professions which had found that 92% of VNs and 71% of vets agreed that VNs should be able to undertake additional areas of work that were not currently permitted under Schedule 3. The top three activities which had been identified by the survey were cat castrations, dental extractions, and other minor surgical procedures. LWP had subsequently been invited to consider expanding the role of VNs in anaesthesia and allowing VNs to undertake dental extractions and cat castrations.

### Anaesthesia

6. The working group reviewed the LWP recommendation 2.1 Extending the VN role in anaesthesia (induction and maintenance, under supervision). In discussion the following points were made:

#### Value of VNs

- VNs were central to safe anaesthesia care and vets often relied on their expertise and experience.
- The proposal represented a positive step forward which would offer VNs already working in anaesthesia care greater flexibility to utilise their skills.
- Anaesthesia was an area in which VNs could act as advocates for the patient, uniting theoretical knowledge with practical patient care.

#### Training

- Not all VNs had the skills and knowledge to play a role in anaesthesia care.
- VN training in anaesthesia needed bolstering, pre and post registration.
- There was significant variation in VN training, with differences across Training Practices (TPs) impacting on the way in which VNs viewed involvement in anaesthesia.
- Improved standardisation of practical training was important.
- The BVNA learning pathway in anaesthesia had recently launched and should be part of VN training more widely
- Day One Competences for VNs were the same regardless of route to qualification. However, it was more difficult to achieve post-registration qualifications for those who qualified via the Diploma route. All VNs should be enabled to pursue post-registration qualifications in anaesthesia care.
- Post-registration training and qualification would be especially essential for those wishing to work in equine anaesthesia.

#### Oversight and responsibility

- More autonomy for VNs was a positive. However, ultimate oversight and responsibility of the vet was important, and the vet must be available to assist. If the vet was elsewhere in the building undertaking other work, it was essential they were contactable.
- There were some concerns regarding accountability of the vet for decisions taken by a VN working more autonomously. However, it was recognised that VNs were a regulated profession and if they acted irresponsibly then the vet could not reasonably be held accountable.
- It was essential VNs did not feel pressured to work outside their area of competence. Some VNs would welcome the opportunity, but not all.

- An enhanced role for VNs in anaesthesia should only occur where all parties involved supported it.
- Lack of prescribing powers for VNs could create a delay in action if an anaesthetised patient was unstable, or in an emergency.
- The principle of protocol driven anaesthesia was supported. A pre-op discussion between vet and VN would enable potential deviations from the protocol to be explored and authorised so that the VN was enabled to make changes within predefined parameters. The ideal would be VNs involved in the development of protocols, with a more patient centred and team focussed approach.
- A well-run team where everyone was clear on roles and responsibilities was key to good anaesthesia outcomes.

### Workforce

- Lay persons were currently involved in anaesthesia monitoring, which was not acceptable from an animal health and welfare perspective and would likely be totally unacceptable to clients if they were aware.
- Expanding the role of VNs in anaesthesia would help protect the activity for VNs, would represent an animal health and welfare improvement, and could support retention.
- Transparency with clients was an important consideration and the value of VNs working in anaesthesia must be communicated and championed. Ways of achieving this would be discussed further in the working group's second meeting.
- The City & Guilds Veterinary Care Assistant qualification in anaesthesia could be rendered obsolete. Although there could be unintended consequences for practices struggling to recruit VNs, it was recognised that the qualification had originally been intended as a stop gap when VN numbers were low. Since then the VN workforce had grown and could be further bolstered by protecting the activity for RVNs and driving demand.
- The stated driver of 'freeing up veterinary time' was inappropriate and devalued VNs.
- From a practical perspective it was recognised that an enhanced role for VNs in anaesthesia could 'free up veterinary time' in the context of the surgical or diagnostic procedure taking place. In a hospital setting with multiple anaesthetic procedures taking place at any one time a VN-led procedure supported by a protocol was invaluable in efficient handling of caseload.
- What might be appropriate for VNs working with companion animals might not be appropriate in large animal work.
- In equine anaesthesia work in the field VNs might provide valuable assistance to the vet. However, in hospital situations anaesthesia would normally be vet-led, by individuals with extensive experience. Although in theory there was no reason why VNs could not be trained and gain the necessary experience in equine anaesthesia it would represent a step-change in the sector.

### 7. It was agreed that:

- the proposal should be supported in principle, subject to clarity around accountability.
- further work was needed in relation to VN training.
- the stated driver of freeing up veterinary time should be challenged, and there was a wider communications piece needed around the value of VNs.
- it was not appropriate for lay persons to monitor anaesthesia.

## Cat castrations

8. The working group reviewed the LWP recommendation 2.2 Allowing VNs to undertake cat castrations. In discussion the following points were made:

- The proposal appeared peculiarly specific, although it was recognised that there was a historical context. The prohibition on VNs from carrying out cat castrations had been introduced in 1988 as the last in a series of Statutory Instruments that prohibited untrained lay people, including farmers, from carrying out numerous acts. Prior to this, cat castrations had been carried out legally by laypeople (including the precursor to veterinary nurses, Animal Nursing Auxiliaries) under both the 1948 and 1966 Acts. When the 1988 SI had been introduced the term 'veterinary nurse' had only been in use for four years, and the reforms to Schedule 3 to formally recognise their role was still three years away. This context, combined with the apparent appetite amongst VNs and vets who had responded to the RCVS Working Party survey, and the feasibility for a legal point of view, had led to LWP supporting the proposal.
- The proposal was emblematic of how much the VN profession had progressed. However, it was agreed that the primary driver must not be the historical context, there must be clear animal welfare benefits.
- It was suggested that the survey had been leading by specifically listing cat castrations as an option and that respondents may have supported it for what it symbolised. The survey might yield different results if reissued now as there would be fewer respondents who had worked pre-1988.
- Although there would probably not be a net benefit to the distribution of workload across the team in first opinion practice, there could be a benefit to the animal welfare charities. As previously discussed, cost-saving as a driver was inappropriate and devalued the VN role, although it was recognised that cost-saving was a relevant consideration for charities and was directly linked to animal welfare.
- There were some concerns that support for cat castrations would lead to VNs taking on other surgical procedures, although it was recognised that Schedule 3 specifically excluded the entering of body cavities. The definition of body cavity was not explicit and remained open to some interpretation, with variation across species.
- It could be better to develop a framework for the development of the VN role post-registration and include cat castrations as one example of additional tasks VNs could be permitted to do with additional training.
- Although cat castrations were generally straightforward, complications could necessitate abdominal surgery, which would require a vet to step in.
- Clients might not be comfortable with VNs undertaking castrations and this would need to be carefully communicated.
- It could be more appropriate to ask whether there was a reason not to allow it. There would be no obligation for VNs to do it, or for practices to support it, even if the option was there.
- There were some concerns that the proposal could impact on recently graduated vets, who valued being able to carry out cat castrations from day one.

9. It was agreed that a framework for the development of the VN role post-registration would be preferred, with cat castrations featuring as one example of a range of potential tasks VNs could be permitted to do with additional training.

**Action: working group to develop principles for the suggested framework via Glasscubes.**

## Dentistry

10. The working group reviewed the LWP decision that VNs should not be permitted to carry out dentistry. In discussion the following points were made:

- The British Veterinary Dental Association (BVDA) had been consulted by the College and were strongly opposed, being clear that it was impossible to define minor and major extractions and that seemingly minor dental work always had the potential to become major very quickly.
  - In equine there were already proposals to bring Equine Dental Technicians (EDTs) under the regulatory umbrella of the College using the Associate model, which had been supported by LWP.
  - Client perception was important here too. Those that were aware, often considered that allied professions working under EOs were more qualified than VNs.
  - Dental work could very easily lead to complications and many vets found the prospect of dentals intimidating.
  - Many vets would not feel comfortable or knowledgeable enough to supervise a VN carrying out the work. Training pre and post registration would need to improve.
  - There could be scope for VNs in future, in the context of a post-registration framework as already discussed.
- 11.** It was agreed that the LWP decision that VNs should not be permitted to carry out dentistry was supported.

### **Developing the VN role**

- 12.** The overarching benefits to realising an efficient and effective vet-led team had been set out in the BVA position, published in 2018. The position included a section on the value of RVNs, including more effective use of RVNs under Schedule 3, expanding RVN career pathways, and developing the role through regulatory or legislative change. Working group members supported the prerequisites for regulatory or legal changes to the VN role as outlined in the position:
- 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 VN.
  - Positive impact on the division of workload within the veterinary team.
- 13.** In discussion the following points were made:
- The value of VNs needed to be more effectively communicated to clients and their key role within the vet-led team should be championed by all. This would be discussed further in the second meeting.
  - Job satisfaction and career progression were key considerations and both vets and VNs needed to make more effective use of existing skill sets, working within the existing constraints of Schedule 3.
  - There continued to be a need for clarity around what VNs were permitted to do under Schedule 3.
  - Permitting VNs to carry out specific additional tasks would not address systemic issues.
  - Colleges offering veterinary nursing qualifications lacked on-site hospitals which meant that opportunities for practical application were limited.
  - The RCVS Diploma in Advanced Veterinary Nursing was good, but theoretical rather than clinical.
  - The Veterinary Technician Specialist (VTS) qualification available in the US was a possible model for the UK, with an increased practical component compared to the RCVS Diplomas.
  - The VN post qualification certificates proposal which had emerged from VN Futures attempted to address the perceived gap in the UK market. It was agreed that a progress update would be useful.



- BSAVA Veterinary Nursing Merit Awards provided a useful and less formal option for VNs to develop their role.
- Tasks which appropriately trained VNs could reasonably perform ranged from ultrasonography, physiotherapy, radiography, prescribing some routine medications, and providing behavioural and nutritional advice.
- VNs could also lead on patient safety, quality improvement, and workplace culture.
- VNs also had a role to play in championing One Health and sustainability in veterinary practice.

**Action: D Creighton/V Ford-Fennah to obtain update on VN Futures post qualification certificates proposal.**

14. It was agreed that further discussion was needed on:

- a) general principles for the development of the VN role
- b) areas of the VN role which could or should be developed for the benefit of:
  - animal health and welfare
  - individual VNs
  - the veterinary nursing profession
  - the workforce and the wider vet-led team
  - veterinary business
  - clients
- c) specific tasks which VNs should be permitted to carry out, keeping in mind:
  - direction and supervision required, and ultimate responsibility
  - whether legislative change would be required
  - whether they should be Day One Competences (for Diploma and/or degree routes) or achieved post-graduation

**Action: secretariat to circulate questions for discussion on Glasscubes**

### Next steps

15. At the next meeting the working group would be invited to consider VN prescribers and the principle of District VNs. It was agreed that further discussion on client perception and communication around the value of the VN role would also be useful, as would further debate around responsibility and accountability in the context of existing guidance on direction and supervision.

**Action: Members to notify the secretariat of any evidence or additional information to help inform the discussion, that could usefully be collated ahead of the next meeting.**

16. In the meantime, the BVA secretariat would:

- Circulate the minutes of the meeting
- Circulate an emerging themes document summarising the advice to date from the working group, including any areas of difficulty for further consideration
- Share the advice to date with Policy Committee and Ethics and Welfare Advisory Panel for input

17. It was noted that BVA Council would be invited to review the activity of all five working groups at the meeting on 9 December. A webinar, in partnership with The Webinar Vet, would take place 1 December, providing an opportunity for the wider membership to engage with the discussions.

18. Working group members were thanked for their participation and considered input.

**Date of the next meeting**

**19.** The next meeting would be held **Friday 11 December 10am-1pm (by Zoom)**