Health Sector
Unite the Union
128 Theobald's Road
London
WC1X 8TN
Tel:
Email: Carol.english@unitetheunion.org
www.unitetheunion.com



10th April 2012

The British Veterinary Union in Unite submission to the DEFRA Consultation on proposed Legislative Reform Order to amend the Veterinary Surgeons Act 1966.

This evidence is submitted by Unite the Union - the country's largest trade union. The union's members work in a range of industries including manufacturing, financial services, print, media, construction and not-for-profit sectors, local government, education and health services.

Unite represents approximately 100,000 health sector workers. This includes seven professional associations – the Community Practitioners and Health Visitors' Association (CPHVA), the Guild of Healthcare Pharmacists (GHP), the Medical Practitioners' Union (MPU), the Society of Sexual Health Advisers (SSHA), the Hospital Physicists' Association (HPA), the College of Health Care Chaplains (CHCC) and the Mental Health Nurses' Association (MNHA).

Also, members in occupations such as allied health professions, healthcare science, nursing, applied psychology, counselling and psychotherapy, dental professions, audiology, optometry, building trades, estates, craft and maintenance, administration, ICT, support services, ambulance services, and, most recently, the British Veterinary Union which represents veterinary practitioners.

This diverse membership includes a range of members who are involved in public health functions including the professional body of health visitors, and Unite members who work in the specialist public health workforce where the Unite/MPU has public health doctors in membership and Unite is the main union for non-medical public health consultants.

Introduction

Unite/BVU welcomes the opportunity to contribute to the consultation on regulatory reform for veterinary surgeons and nurses. Subsequent to an internal consultation on the proposals, the BVU submits its comments and recommendations on various individual clauses of the proposals.

Annex B: Response Form

Name: Carol English, Professional Officer, Health Sector, Unite, on behalf of the British Veterinary Union.

Email: carol.english@unitetheunion.org

Q1. Do you support the proposal to change the membership of the RCVS' disciplinary committees from Council members to non-Council (Chapter 4, paragraphs 4.4 (i) and (ii))?

Yes

Comments Unite/BVU considers this to be an essential and long overdue step forward. However, there is a concern about the proposal regarding the appointment of members for the committees. How can the appointments really be "open, transparent and independent" whilst the details are "not to be set out in primary legislation and will instead be put in place by RCVS and referred to on its internal documentation"?

The BVU believes that the essentials of any system of appointments should be published and be part of the primary legislation for it to be truly "open, transparent and independent". Similarly, what constitutes "necessary experience" for the appointment of committee members is not clear. In the case of veterinary surgeons does this relate to veterinary practice or to service on such committees? We believe that the makeup of the committees should reflect the whole spectrum of community of from which they are drawn.

Q2. Do you support the proposal to ensure that the disciplinary committees have a mix of both lay and veterinary membership (Chapter 4, paragraph 4.4 (iii))?

Yes

Comments Regarding "conditions set by Council, supported by appraisal. This should again support the principles of transparency, accountability and consistency". We think that while these are fine words there is nothing to demonstrate that the conditions set by Council are transparent, accountable or consistent if they are decided behind closed doors and not published beforehand.

Q3. Do you support the proposal to restrict the terms of office and set conditions for office for members of the committees (Chapter 4, paragraph 4.4 (iv))?

Yes

Comments Unite/BVU agrees with the principle that those on the PIC and DC committees should not be RCVS council members. But we do have some concerns about how these members will be chosen. The consultation document states that these members will be chosen by the RCVS council and should have the necessary skills and experience. At present, the only people with experience of sitting on the PIC and DC committees are the present and past RCVS council members.

Could we end up with a situation where some of the RCVS council members resign, only to be elected on to the PIC and DC by the remaining council members because they are deemed to have the experience for the job?

It is our belief that two spells of 4 years limit is good but that RCVS councillors should be banned from such membership not just while serving on the Council but for at least a further 4 years after leaving the Council. This would help dispel any perception of a rolling "old boy" network and would follow similar requirements in other areas of public office.

Q4. Do you support the proposal to retain the provision that a person may not serve on the Disciplinary Committee if they were part of the Preliminary Investigation Committee for the same case (Chapter 4, paragraph 4.4 (v))?

Yes

Comments Unite/BVU agrees – if a person has already decided that there is a case to answer they could not approach a disciplinary hearing for the case with impartiality.

Q5. Do you support the proposal to remove the current provision specific to veterinary practitioners registered in the supplementary register (Chapter 4, paragraph 4.4 (vi))?

Yes – provisionally

Comments How long have the current veterinary practitioners been retired? There are still eight individuals, albeit non-practicing.

While there is still a possibility that some of these people could wish to re-enter the practicing fold, or come before the committee for acts prior to retirement, we feel that they have a right to be judged by their peers (i.e. other veterinary practitioners). We believe that it would be better to await the demise of these individuals and avoid subjecting them to this iniquity in their retirement.

Q6. Do you support the proposal to increase the size of the committees (Chapter 4, paragraph 4.5 (i))?

Yes

Comments Unite/BVU believes the newly enlarged committees should be 50:50 lay:vet, and as large as required to cope with the workload without compromising fairness (delays etc).

Q7. Do you support the proposal regarding the quorum size of the committees (Chapter 4, paragraph 4.5 (ii))?

Yes - provisionally

Comments Unite/BVU considers these to be important matters, particularly for the respondent, and these committees should not sit unless fully constituted.

Q8. Do you support the proposal to provide flexibility for the future as regards the size of the committees (Chapter 4, paragraph 4.9)?

Yes – provisionally

Comments Unite/BVU believes this could be subject to abuse and that the committee should have an agreed, fixed constitution. If that cannot be achieved the hearing should be rescheduled. However, we also note that hearings need to occur in a timely manner and that

other regulators have suffered from a back-log of cases to hear to their detriment.

Q9. Do you have views regarding the expected benefits of the proposal as identified in Chapter 4 of this consultation document?

Yes/ No/ Don't know

Comments Unite/BVU thinks the proposals go about half way to providing the benefit of an open, transparent and independent Regulator. Going further and separating the Regulator/Jury function would offer total transparency and be a better benefit. Proposals need to be more explicit.

Q10. Do you think that the proposal will secure that regulatory functions will be exercised so that they are transparent, accountable, proportionate, consistent and targeted only at cases in which action is needed?

Yes/ No/ Don't know

Comments Unite/BVU thinks that the proposals are an improvement and might speed up the processing of cases. The separation of investigating complaints from council will go towards greater transparency. However, we see no evidence that the regulatory functions will be more proportionate, consistent or targeted only at cases in which action is needed.

Q11. Do you think the proposal will remove or reduce burdens?

Yes/ No/ Don't know

Comments The cost burden will be increased meaning higher registration fees for practitioners.

Q12. Do you think that there are any non-legislative means that would satisfactorily remedy the difficulties which the proposals are intended to address?

No

Comments But possibly a new Veterinary Surgeons Act would be a better solution. The present proposals are not sufficiently explicit and need to be developed.

Q13. Are the proposals put forward in this consultation document proportionate to the policy objective?

No

Comments The proposals go some way to addressing current problems but need to be more robust and more "**in line with the procedures of other professional regulators**" – your stated objective!

Q14. Do the proposals put forward in this consultation document taken as a whole strike a fair balance between the public interest and any person adversely affected by it?

Yes/ No/ Don't know

Comments As above for question 13.

Q15. Can you identify any necessary protections which would be reduced or lost as a result of the proposals? If so, are they needed and how could they still be provided?

Yes/ No/ Don't know

Comments If the new committees are fairly constituted and mandated, there should be no protections reduced or lost. However, we are not told how these committees will be constituted, selected or mandated.

Q16. Do the proposals put forward in this consultation prevent any person from continuing to exercise any right or freedom, which they might reasonably expect to continue to exercise?

Yes/ No/ Don't know

Comments Requires a legal opinion.

Q17. Do you agree that the proposed changes do not have a significant financial impact as set out in the impact assessment?

No

Comments There is likely to be a significant financial impact that will fall upon registrants, through the registration fee, to meet.

Q18. Do you broadly agree with the cost estimates, assumptions and conclusions of the Impact Assessment?

No

Comments It is likely that costs will exceed estimates.

Q19. Can you provide evidence to help quantify the cost estimates in the accompanying Impact Assessment?

No

Comments

Q20. Do you agree that the proposed Parliamentary procedure as outlined in Chapter 5, paragraph 5.3 should apply to the scrutiny of these proposals?

Yes

Comments

Q21. Do you have any other comments in relation to the proposals?

Yes

Comments It is encouraging that RCVS's stated intention is to work "in line with the procedures of other professional regulators". In order to achieve this RCVS should consider –

a. Calling registered practitioners "Registrants" rather than "Members". Practitioners can be members of a professional body but are registrants in relation to a regulator. "Members"

- indicates that practitioners can choose to join whereas the fact is that they are "Registrants" and may not practice without registering. The use of the word "Registrant" would bring RCVS in line with other statutory regulators.
- b. While RCVS is using the right language it needs to engage more fully with the health regulatory agenda. There are good and less good models to be considered in other health regulators.
- c. In particular there are many lessons to be learnt from the CHRE's annual report on the other 9 statutory health regulators and the recommendations that are made for improvement.
- d. Voluntary regulation for veterinary nurses (para 1.11) would cause confusion unless "Veterinary nurse" became a protected title, so that service users could be confident of the level of competency of practitioners. This would follow the NMC use of the term "registered nurse", as otherwise anyone can call themselves a nurse.
- e. The use of the term "disgraceful conduct" is not appropriate. It could be misleading and is out of line with the RCVS stated intention of being in line with other regulators. The term "Disgraceful conduct" should be replaced with "unfit to practice".

10TH April 2012

This evidence was prepared by Carol English, Professional Officer in the Health Sector of Unite on behalf of and in consultation with veterinary practitioners in Unite.

This evidence was submitted on behalf of Unite the Union by Rachael Maskell, Head of Health, Unite House, 128 Theobald's Road, Holborn, London, WC1X 8TN

For further information, please contact:

Dr. Shams Mir, Chair of the BVU in Unite the Union – Shams Mir [vets4bvu@hotmail.co.uk] or

Carol English, Professional Officer, Health Sector/BVU, Unite the Union Carol.english@unitetheunion.org