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British Veterinary Union (BVU)/Unite Response to RCVS call for evidence concerning 24 hour emergency cover

This response is submitted by Unite. Unite is the UK's largest trade union with 1.5 million members across the private and public sectors. The union's members work in a range of industries including manufacturing, financial services, print, media, construction, transport, local government, education, health and not for profit sectors.

Unite represents in excess of 100,000 health sector workers. This includes eight professional associations - British Veterinary Union (BVU), College of Health Care Chaplains (CHCC), Community Practitioners and Health Visitors' Association (CPHVA), Guild of Healthcare Pharmacists (GHP), Hospital Physicians Association (HPA), Medical Practitioners Union (MPU), Mental Health Nurses Association (MHNA), Society of Sexual Health Advisors (SSHA).

Unite also represents members in occupations such as allied health professions, healthcare science, applied psychology, counselling and psychotherapy, dental professions, audiology, optometry, building trades, estates, craft and maintenance, administration, ICT, support services and ambulance services.

The British Veterinary Union in Unite (BVU) welcomes the opportunity to respond to the RCVS call for evidence on *24 hour emergency cover*.

In order to formulate this response, the BVU has used its ongoing routes throughout the organisation to hear back the views of our members who are registered with the RCVS and these have informed our response. The BVU would like to make the following observations / recommendations

Our members are concerned that in the past attempts have been made to review the 24 hour emergency cover provision, for example the revised Code of Conduct for veterinary surgeons, without taking into consideration the realities of working on the ground. This has led to the profession being in the position of not being able to meet the new requirements.

Indeed, the “lay members” of the RCVS Council have had to point out and repeatedly raise concerns regarding the “disconnect” between the requirements of the 24 hour emergency cover and the professions actual ability to deliver the service.

The RCVS Disciplinary Committees decision on Mr Chikosi’s case and the professions overwhelming reaction has highlighted four major areas of concern that our members consider the RCVS needs to resolve, in order to rationally address the 24 hour emergency cover issue and potentially similar issues arising in the future. These are;

- Who bears the legal responsibility for animal welfare?
- Where do the responsibilities of the veterinary professional lie?
- Should home visits be part of 24 hour emergency cover?
- Where do the responsibilities of veterinary business owners lie?

1. Who bears the legal responsibility for animal welfare?

The Animal Welfare Act of 2006 states that *“a person who owns an animal shall always be regarded as being a person who is responsible for it”* and one of the duties of such a person is to *“ensure welfare”* of the animal which includes *“its need to be protected from pain, suffering, injury and disease”*.

Although the existing guidelines to the Code of Conduct for veterinary Surgeons indicate that *“the responsibility for the welfare of an animal rests primarily with the owner, keeper or carer of the animal”*, the very next sentence appears to implicitly shift this responsibility on to veterinary professionals by stating that *“when the owner, keeper or carer is concerned that the animal is suffering or requires attention and contacts a veterinary surgeon, they then place the onus of decision-making onto the veterinary surgeon”*. That the “decision-making” by implication relates to welfare of the patient became clear from the Chikosi case.

The current guidelines regarding the 24 hour emergency cover go against the long established laws relating to animal ownership and welfare.

The BVU recommends that the revised guidelines should clearly set out that as required by the Animal Welfare Act of 2006, legal responsibility for welfare of an animal lies with its owner. When an owner has concerns about their animal, particularly where they consider they require urgent attention then decisions concerning the welfare of the animal needs to be a shared responsibility between the owner and the veterinary surgeon.

2. Where do the responsibilities of a veterinary professional lie?

The existing RCVS regulations are unduly skewed in favour of animal owners. If a person is injured by a car and suffers or dies whilst an ambulance is trying to reach them, regardless of the

circumstances leading to the accident, would it be acceptable to completely exonerate the driver of the car and hold the driver of the ambulance responsible for the suffering and death? If the current RCVS regulations were to be applied to this case, it would be acceptable, as illustrated in the Chikosi case.

Shifting the responsibility of the welfare of an animal from the owner to the veterinary professional, as elucidated under the preceding subtitle, is unworkable and our members consider, serves no purpose to either party.

If an animal needs to be protected from pain, suffering, injury and disease, it implies from the legal responsibilities of the owner that they should in principle arrange to present the animal to a veterinary professional for necessary treatment without undue delay, and to do so they should be expected to have arrangements to deal with such situations if they arise.

The role and responsibility of the veterinary professionals in upholding the welfare of an animal should only start from the moment the animal concerned is physically under the care of the veterinary professional and the veterinary professional should be accountable for the type and nature of the treatment they administer and the care they provide to the animal.

The BVU recommends that revised guidelines should clearly set out that the responsibilities of a veterinary professional relate only to the treatment they administer or advise to be administered subsequent to clinical examination of the animal.

3. Should home visits be part of the 24 hour emergency cover?

The existing requirement that “*in some circumstances*”, it may be “*desirable*” or “*necessary on clinical or welfare grounds*” to “attend on a sick or injured animal away from the practice premises,

makes home visits implicitly mandatory, as proved by the Chikosi case. On the other hand RCVS recognises the potential safety risks involved in attending to animals away from practice especially out of hours, by stating that *“a veterinary surgeon is not expected to risk ‘life or limb, or that of anyone else to provide the service’”*.

The implicit requirement of home visits on welfare grounds directly contradicts the accredited safety concerns of an attending veterinary surgeon and leads to an unworkable proposition. This may explain why many practices across the country have an unofficial ‘no home visits’ policy.

If the RCVS insist on maintaining a requirement for home visits as it reviews the 24 hour emergency cover, practices will have to redouble their personnel and financial resources to provide such a service. This may become too expensive for animal owners to afford and may as a result prove to be counterproductive for animal welfare.

The BVU believes that: (1) Animal Welfare Act of 2006 holds the owner of an animal responsible for its welfare, the RCVS has no jurisdiction to implicitly or explicitly shift this responsibility to veterinary professionals; (2) the RCVS does not and should not expect veterinary professionals to conduct home visits at the cost of their own person safety or that of anyone else to provide the service; and (3) insistence on the provision of home visits will make such service difficult to organise and unaffordable and hence counterproductive for wider animal welfare.

On the basis of above listed grounds the BVU urges that RCVS repeal the requirement of home visits in any shape or form from the new guidelines.

4. Where do the responsibilities of veterinary business owners lie?

Most veterinary professionals in the country are employees. The employers bear the ultimate legal responsibility towards their welfare in relation to their working life and the employees have

contractual obligations towards the employer. Therefore, the veterinary surgeons find themselves in precarious situations, when it comes to delivery of emergency cover especially out of hours, as has become obvious in the Chikosi case.

It is important therefore that the RCVS gives a good consideration to the role of veterinary business owners and clearly identifies their responsibility in the system of 24 hour emergency cover.

This response is submitted on behalf of The British Veterinary Union (BVU) by:

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