

BoardTalk

President's Report

Over the past few years the veterinary profession has been remarkably resilient in the face of challenge after challenge. We have weathered COVID and continued to serve our communities under difficult circumstances only to be faced with floods throughout 2022. Our thoughts go out to those practices and communities directly and severely affected by flooding this year. It is heartening to see our profession rally behind those personally affected.

The Board is very pleased that the overwhelming feedback from our Hospital Inspector has been positive. A positive workplace culture which is easily identified from first impressions is a strong indicator of not just a practice that will easily meet our minimum requirements but one which will also be thriving.

The Board is aware of workforce high workload pressures facing practices. A well-managed practice with good leadership and appropriate policies and procedures in place that support the whole veterinary team leads to a culture that values continuous improvement, encourages CPD, promotes animal welfare and minimises the risk of complaints that end up in front of the Board. In our small profession, such a reputation is also a great recruitment tool.

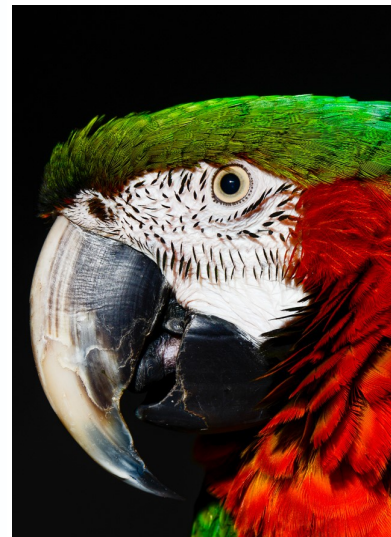
New graduates enter our profession highly educated with a great skill set of day one competencies. They need support, encouragement and mentoring as they enter the workforce. Employing a new graduate is a big responsibility that requires extra resources and time but can also be very rewarding as they bring fresh ideas and enthusiasm into the practice.

A positive supportive workplace also contributes to a healthy, engaged team and all of us have a responsibility to build a sustainable and trusted profession.

I would like to thank all the Board members and staff for their dedication and hard work in another challenging year that has laid the foundations for better engagement, improved systems and continuing to grow a high performing team in a workplace with a great culture of support and encouragement.

On behalf of all Board members and staff I wish you a very merry Christmas and a happy and safe New Year.

Steve Ferguson
President



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Please help with this survey

[Perceptions of veterinary professional conduct](#)

The Board's office will close from
5.00 pm Thursday 22 December
2022 and will re-open 9.00 am
Monday 9 January 2023.



Veterinary nurse registration

The Sustainable Practice Committee (SPC) of the AVBC has released its report on [Options for Registration of Veterinary Nurses](#).

Overall, 88% of the 2,358 respondents supported the registration of veterinary nurses with the majority of respondents agreeing that this would lead to improvements in animal welfare and in the efficiency of delivery of veterinary services.

The report provided the following recommendations:

1. State based veterinary legislation define a veterinary nurse as a person with suitable qualifications who is registered with an independent national body representing veterinary nurses and veterinarians
2. Veterinary technicians should also be recognised although the term veterinary nurse is preferred for those working in veterinary clinical practice
3. The minimum suitable qualification for registration is a certificate IV however there should be an initial period where persons currently performing the duties of a veterinary nurse and with a defined minimum level of experience in this role may be registered
4. The register should consist of divisions in a similar approach to the AHPRA model and the model adopted should provide encouragement to pursue higher AQF level qualifications.

What can veterinary nurses do?

Veterinary practice legislation in NSW does not define the terms veterinary nurse or veterinary technician. There are training programs for veterinary nurses and veterinary technicians in Australia but as yet only Western Australia and Queensland currently either register these persons or define these terms.

The [Veterinary Practice Regulation 2013 \(cl 4\)](#) prescribes the 'restricted acts of veterinary science'. A person is not able to perform a restricted act of veterinary science in NSW unless that person is a registered veterinarian in Australia although there are some exemptions.

Based on these restricted acts, any person can:

1. Administer an anaesthetic agent (including a narcoleptic, analgesic, sedative or tranquilliser) under the immediate and direct supervision of a veterinarian
2. Administer restricted substances but only a veterinarian is able to access these medications to then instruct the non-veterinarian to administer
3. Take vital signs, drawing blood and taking a medical history providing these tasks do not amount to attendance on or examination for the purpose of diagnosing a physiological or pathological condition.

In addition:

1. A person with a Certificate IV in veterinary nursing is able to [apply for a radiation user licence](#) to take x-rays
2. A person who has completed an approved training course can become an authorised identifier to implant microchips in dogs and cats.

Ultimately, whilst the legislation in NSW does not define the terms veterinary nurse or veterinary technician and allows any person to perform acts which are not restricted, under the Code (cl 13), the veterinarian is responsible for ensuring all persons assisting in the provision of veterinary services to animals in their care have the skills, knowledge and equipment to perform their duties according to the current standards of veterinary practice.

As noted above, only a veterinarian is able to access restricted substances (S4 and S8 medications) and therefore a veterinary nurse is not able to access these drugs unless under the supervision of a veterinarian who is on the premises.

If a veterinarian supervises the pre-packaging of restricted substances for an animal it is considered acceptable for a veterinary nurse to provide these drugs to the client.



A veterinary nurse may also administer an S4 medication to an animal. Again, the veterinarian must have previously examined the animal or have the animal under their direct care. Under direct care means the veterinarian has previously examined the animal and has authorised a repeat of the medication (in accordance with current standards and poisons and therapeutic goods requirements) previously supplied.

In such circumstances it is important to consider other legislative requirements such as informed consent and, as above, the veterinarian is responsible for authorising access. If the above medication is a vaccine, in accordance with the [Veterinary Practitioners Code of Professional Conduct](#) (Code) (cl 17), a veterinarian must only sign a certificate if he or she has personally provided or supervised the provision of the service and only a veterinarian can sign a 'veterinary' certificate under the Act (s 16). Vaccination certificates not signed by a veterinarian may not be accepted as sufficient proof by some organisations.

Activities of the Board

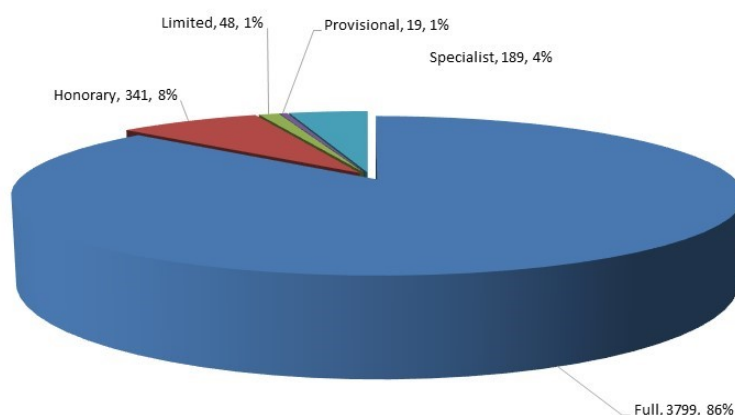
The main activities of the Board are registration of veterinarians, licensing of veterinary hospitals and investigation of complaints against veterinarians. The [Annual Report 2022](#) includes a series of graphs summarising these activities for the year ended 30 June.

Registration of Veterinarians

As at 30 June 2022, there were 4,396 registered veterinarians in NSW (see Figure 1). There were 374 additions and 174 removals from the Register during the year. Additions included 166 new graduate registrations with the majority graduating from the University of Sydney (87) and Charles Sturt University (38).

From 2007, the total number of veterinarians in NSW grew by 56% or 3.0% annually. The growth in population and number of households in NSW from 2006 to 2021 was 1.4% annually.

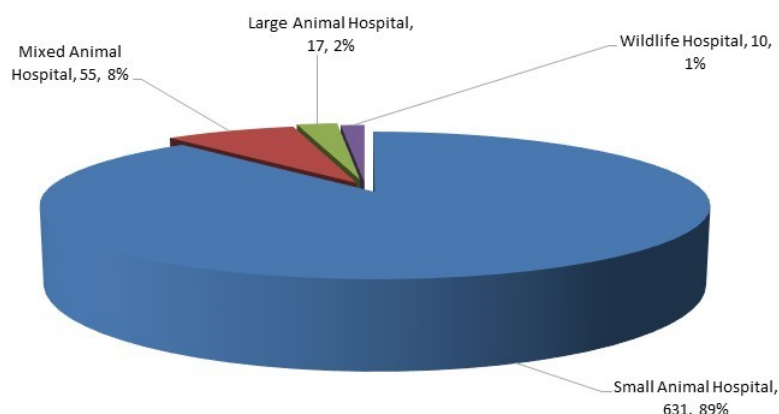
Figure 1 Registered veterinarians by division



Licensing of Hospitals

There were 713 hospitals in NSW as at 30 June 2022 (see Figure 2) and the total number of hospitals in NSW has grown by 16% since 2007 or 1.0% annually.

Figure 2 Veterinary hospitals by licence type



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Annual General Meeting

The Board held its Annual General Meeting (AGM) of the veterinary profession in Orange on Tuesday 15 November at 7.00 pm.

The agenda and papers for this meeting are available from the [News section](#) of the Board's website.

In addition to reports on activities and fees the Chief Veterinary Officer Dr Sarah Britton provided an update on biosecurity matters.

The Board presented its audited financial statements and recommended an increase in fees and Board remuneration aligned with inflation.

If you have any questions or comments in relation to the AGM or from the papers please contact the [Board's office](#).

Complaints Committee Report



The Board reviewed and determined 34 new complaints made against 32 veterinarians between May 2022 and November 2022. These numbers represent a decrease of 15% compared to the last reporting period.

Of the 34 new complaints considered, 25 were dismissed.

Unsatisfactory professional conduct

The Board found seven veterinarians guilty of unsatisfactory professional conduct in the latest reporting period. One veterinarian is seeking a review of this decision by the NSW Civil and Administrative Tribunal (NCAT).

Current standards

Four findings were made against veterinarians for not managing cases in accordance with current standards ([Veterinary Practitioners Code of Professional Conduct](#) (Code) clause 4).

One finding was in relation to treatment of a cat that had presented for a full mouth extraction procedure. The veterinarian failed to correctly interpret intraoperative dental radiographs, which showed that two tooth root fragments and two teeth were not extracted. The client was not informed that any root fragments or teeth had been left in the oral cavity.

The cat developed post-operative complications which required revision surgery. This was performed at another veterinary hospital, where the remnant root fragments, and remaining teeth were discovered on dental radiography.

Of the 34 new complaints considered, 25 were dismissed. These numbers represent a decrease of 15% compared to the last reporting period.

Consequences of a breach

Where a veterinarian is found guilty of unsatisfactory professional conduct or professional misconduct, the Board may issue a caution or reprimand, fine, or impose conditions.

The Board may also refer serious matters to the NSW Civil and Administrative Tribunal (NCAT) for a determination.

The Board generally looks to determine whether a finding relates to performance, conduct or health.

Performance matters often lead to CPD requirements whilst conduct matters often lead to a fine. Health matters typically lead to referral to the Board's Health Program.

The veterinarian accepted responsibility for their error and the veterinarian's candour during the investigation was appreciated.

The veterinarian was cautioned and required to undertake CPD on interpretation of dental radiography.

A second veterinarian was found to have been in breach of current standards in relation to the management of a dog that had suffered a suspected heat stroke type event in hospital earlier that day.

The Board found that the initial treatment for heat stroke was appropriate but shortly after returning home, the client reported that the dog had developed pigmenturia. The veterinarian's advice to the client over the phone was to ensure the dog was eating and drinking to maintain its hydration and if it was not, then care should be sought at a local emergency centre (as it was a long weekend).

The patient deteriorated at home and developed an acute kidney injury. It was treated by an emergency hospital.

The Board considered that the advice given over the telephone was not in accordance with current standards of the practice of veterinary science as the patient likely required immediate referral for intravenous fluid therapy and supportive care when it developed pigmenturia.

The veterinarian was issued with a caution and required to complete CPD on the management of pigmenturia.

A third finding was in relation to the management of a calf with carbohydrate engorgement/grain overload. The veterinarian correctly diagnosed the calf with this condition but failed to provide treatment for this condition in accordance with current standards.

The veterinarian was issued with a caution and was required to complete CPD on the treatment of grain overload in cattle.

A fourth finding was made against a veterinarian who failed to conduct a clinical review of a case before reissuing a prescription for fluoxetine to a patient who had a history of seizures and was known to have had a recent increase in seizure activity.

Unsatisfactory professional conduct (cont'd)

The patient later died during a period of cluster seizures. The cause of the seizures was not determined as the client had failed to present the dog for work-up when it had been recommended.

There was also a finding against this veterinarian in relation to records as the veterinarian's clinical notes for the behaviour consultation component of this case were not in sufficient detail to allow another veterinarian to continue the treatment of the dog.

This veterinarian was issued with a caution.

Professional conduct

A finding was made against a veterinarian in relation to comments they had made in writing to a third party about another veterinarian's registration status and reputation. The comment made was inaccurate.

Under the Code (clause 6), a veterinarian must not mislead, deceive or behave in such a way as to have an adverse effect on the standing of any veterinarian or the veterinary profession.

The veterinarian apologised for their comments and indicated they had learned from the experience.

This veterinarian was issued with a caution.

Supply of restricted substances

One veterinarian was found to have breached the Code (clause 20) as they supplied a restricted substance (Noroclav) to a client for the treatment of an animal the veterinarian had not physically examined or had under their direct care. The medication was dispensed to the client in circumstances where the clinic was booked out for the day and the veterinarian was unable to provide a home visit to assess the dog, who was reported to be unwell at home.

The veterinarian acknowledged their mistake and undertook CPD in relation to antibiotic stewardship in response to this complaint.

The veterinarian was issued with a caution.

Professional misconduct

Two veterinarians were found guilty of professional misconduct by the Board during this reporting period.

The Board raised a complaint against one veterinarian based on a report from Queensland police after the restricted substance, Fertagyl (gonadorelin), was identified in a search of a Greyhound trainer's home. Fertagyl is a banned substance in Greyhound racing. The trainer reported that he had been supplied with Fertagyl by a veterinarian registered in NSW.

The investigation found that this veterinarian:

1. Failed to label this substance in accordance with poisons and therapeutic goods legislation
2. Failed to ensure a detailed record of any consultation, procedure or treatment was made as soon as is practicable
3. Failed to maintain knowledge of and obey any code or rules of an animal sporting organisation prohibited substance

The above amounted to breaches of clauses 4, 14 and 15 of the Code.

This veterinarian was issued with a reprimand and a fine of \$2000 and conditions were imposed on the veterinarian's registration. The veterinarian subsequently retired and [applied for non-practising conditions](#) and as such the conditions imposed as a result of this investigation were held over.

Non-practising conditions enable a person to continue to refer to themselves as a veterinarian but they must not prescribe or supply restricted substances and must not exercise authority requiring registration as a veterinarian such as certification and committee membership as a veterinarian. Veterinarians with non-practising conditions are not required to meet CPD requirements.

[Continued p. 7](#)

Health Program

An impairment is defined in the *Veterinary Practice Act 2003* (s 4 (3)) as any physical or mental impairment, disability, condition or disorder which detrimentally affects or is likely to detrimentally affect the person's physical or mental capacity to practise veterinary science.

The Board appreciates the difficulties faced by a veterinarian suffering from an impairment and is committed to assisting these veterinarians through the establishment of its [Health Program for Veterinarians](#).

The goal of this program is to enable veterinarians to work their way through their health issues with the support of suitably qualified professionals and the Board.

The Board has adopted the procedures outlined in the Doctors' Health Program provided by the Medical Council of NSW to achieve this goal.

Importantly, it is the Board's preference that issues of impairment or possible impairment are addressed outside of the Board's complaints processes and disciplinary powers where possible.

The Board also appreciates that stressors associated with the performance of the professional duties of a veterinarian may also be increased during a complaint investigation process.

Licence transfers

The Board encourages all veterinary hospital licence holders and superintendents to review the minimum requirements for veterinary hospitals guideline to ensure their premises are maintaining levels of facilities and equipment expected, and reviewing and continuously improving processes.

In addition to the inspection program the Board reviews the current hospital plans when processing hospital licence transfers.

When purchasing or transferring a hospital licence, the Board encourages veterinarians to review the minimum requirements document and self-assessment checklist. Any suspected deficiencies can then be discussed with the current licence holders prior to purchase. Any questions can be posed to the Hospital Inspector or other Board staff.

If a hospital is found to not be meeting minimum standards at the time of inspection or licence transfer, the Board may impose a condition on the licence holder to address deficiencies within a specific period of time.

If you are building or purchasing a hospital please also remember that a licence holder cannot be a trust. Only an individual veterinarian, partnership or company where one or more veterinarians have a controlling interest, or an exempt body under the [Act \(s 14\(5\)\)](#) can be a licence holder.

Hospital Inspections Report

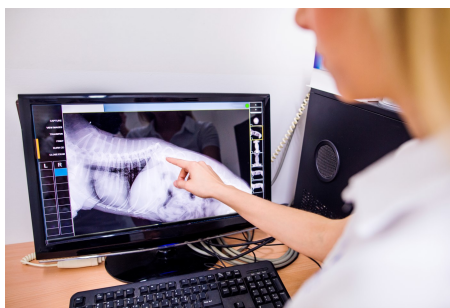
After long delays due to COVID-19 and floods, hospital inspections have now resumed and 148 inspections in both regional and metropolitan areas have been completed. With over 700 hospitals in NSW to be inspected there remains plenty of work to do to return to the plan of inspecting each hospital at least once every four years.

I would like to thank all the veterinarians and associated staff for welcoming me and assisting with these inspections.

One issue that has been evident across a number of practices has been the embedding of patient and hospital information on radiographs. Some of the images are saved as files and the information is available as a file heading and not on the image itself.

The Board has noted that data needs to be included before the images are taken to ensure that it is embedded on the actual images. Moreover, it must be possible to trace the image to the client, animal, area, date and any left and right or other appropriate markers.

In some practices it is a software limitation. In others it is simply a matter of saving in the appropriate format. I'm endeavouring to familiarise myself with the correct procedures so that I can share this information with the practices that I visit.



As noted in previous editions of BoardTalk, the inspection process is largely based on working through the [self-assessment checklist for hospital superintendents](#) which should be completed prior to the inspection. It would be helpful for all superintendents to complete this before notification of an inspection to ensure any potential issues are being pro-actively addressed.

I will continue inspections up until the week before Christmas and commence again in the New Year and look forward to working with you throughout 2023.

Business names and veterinary hospitals

The *Veterinary Practice Regulation 2013* (cl 14) requires that the business name (within the meaning of the *Business Names Registration Act 2011*) under which a veterinary hospital is to be conducted is recorded.

When a new hospital is added to the register or when a hospital licence is transferred the business name needs to be added or updated on our hospital register.

You need to [register a business name](#) with the Australian Securities and Investments Commission (ASIC) if you conduct business in a name other than your own. If you already have an ABN you can register a business name using your ASIC Connect login.

The Board requires proof of your registered business name when assessing applications for new hospital licences, transfers of hospital licences, and changes to the name of a veterinary hospital. The business name must be registered to the licence holder.

You need to renew your business name every one or three years.

Registering a business name does not stop other people from using it. To protect your name and brand visit [IP Australia](#).

One important part of the [self-assessment checklist for veterinary hospital superintendents](#) is the review of ownership details. Current ownership details must be up to date and the licence holder ABN and name of the licence holder must be identified on receipts. The hospital must also only be using a registered business name as above unless you are conducting this business in your own name.

Complaints Committee Report (cont'd)

A second veterinarian was found guilty of professional misconduct in relation to their management of a dog presenting with clinical signs of weakness, inappetence, vomiting, pyrexia, trembling, hypersalivation and icteric mucous membranes.

The veterinarian was concerned about access to a toxin and the patient later developed seizures and died.

The investigation found that this veterinarian:

1. Failed to appropriately investigate this case in that:
 - They did not recommend or perform a CBC, PCV or coagulation testing for the duration of his hospitalisation (several days) to assess other causes of jaundice
 - They failed to further investigate unreadable ALP result obtained in house by performing a dilution or sending a sample to an external laboratory
 - They based their diagnosis on a pre-anaesthetic biochemistry panel which was considered inadequate to support a definitive diagnosis of liver disease over other possible differential diagnoses noting that other liver parameters available to the practitioner (ALT and GGT) were within normal limits and other liver function markers such as cholesterol, glucose derangements and protein loss were not assessed
 - They considered plain radiographs to be adequate support for a diagnosis of liver disease despite these generally not providing sufficient detail to interpret changes to the liver and biliary system. Abdominal imaging using ultrasound was indicated as the dog likely had a marked elevation of ALP
 - They failed to recommend or perform any follow up blood testing during the patient's period of hospitalisation to assess response to treatment
2. Failed to provide adequate intravenous fluid therapy to address dehydration and ongoing losses
3. Failed to utilise the skills of colleagues by offering referral when the patient did not improve and then deteriorated.

During the investigation, the Board requested an audit trail of the veterinarian's clinical records. The audit trail identified that changes had been made to the clinical record after the veterinarian had been notified of this complaint by the Board and these changes had not been identified in the record, as is required by clause 15(3) of the Code.

This veterinarian was issued with a reprimand and fine of \$3000 and conditions were placed on the registration of the veterinarian to:

1. Complete CPD on the diagnosis and management of jaundice
2. Complete CPD in the area of intravenous fluid therapy
3. Submit copies of 10 clinical records to the Board for review every 3 months.



NCAT review of Board decisions

The *Veterinary Practice Act 2003* (Act) (s 47) provides that if the Board is satisfied a veterinarian is guilty of unsatisfactory professional conduct or professional misconduct, the Board may apply to the NSW Civil and Administrative Tribunal (Tribunal) for a disciplinary finding against the veterinarian. Alternatively, the Board may take a variety of actions such as reprimanding or cautioning the veterinarian, imposing a fine up to \$5,000, imposing conditions, or requiring the veterinarian to complete specified educational courses.

A veterinarian may also request the Tribunal review a disciplinary decision by the Board.

NCAT decisions involving veterinarians are published on the [NSW Caselaw website](#) (Occupational Division).

The general rule for costs involving the Tribunal is that each party shall pay their own costs unless there are special circumstances.

However, the Tribunal must order costs against a veterinarian unless exceptional circumstances exist if the Tribunal affirms the disciplinary findings of the Board or if the complaint against the veterinarian is proved or not proved but the conduct of the veterinarian was sufficiently unacceptable to warrant the complaint.

A recent example of a finding reviewed by the Tribunal is [Kallman v Veterinary Practitioners Board](#).

After-hours care

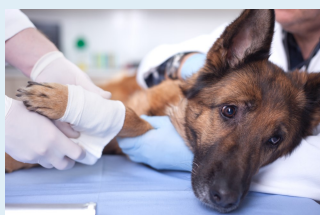
The Board appreciates that providing a 24 hour service is demanding and this is a situation which has been exacerbated by the recent shortage of veterinarians in NSW.

The shortage of veterinarians has also led to the closure of a number of hospitals in NSW leading to additional demands on staff.

In order to meet requirements under the [Code \(cl 8\)](#) there are three options available to veterinarians:

1. Make arrangements with veterinarians providing an after-hours service and provide the details of this service to your clients.
2. Make arrangements with your colleagues to share after-hours duties
3. Provide contact details for after-hours emergencies to your existing clients only. You are not required to accept an animal for after-hours care if you have not previously accepted the animal for diagnosis or treatment.

The Board appreciates that after - hours services may require the client to travel a significant distance. It would be appropriate for approximate travel time to an after hours service to be shared with the client.



Holding animals for payment

The Board will occasionally receive an enquiry from a member of the public as to whether a veterinarian is able to hold an animal until payment of an account is received.

A veterinarian may exercise a "lien" over an animal held in the veterinarian's care when fees for treatment, medication or ancillary costs (for example, boarding fees) have not been met. This lien is referred to as a "particular lien" and only relates to the specific animal and fees relating to that animal. As soon as the animal is released the lien is lost.

The veterinarian is entitled to hold the animal until receipt of payment of money due and payable in respect of services provided in relation to that animal.



The rights relating to 'particular liens' are based in common law rather than legislation but before a veterinarian considers whether to exercise this right it is important to reflect on the following elements of the [Veterinary Practitioners Code of Professional Conduct](#) (Code).

- Fees for veterinary services
Under the Code (cl 16) a veterinarian must, where it is practicable to do so and before providing veterinary services in relation to an animal, inform the person responsible for the care of the animal of the likely extent and outcome of the veterinary services and the estimated cost of those services.
- Consent
Under the Code (cl 7) a veterinarian must, where it is practicable to do so, obtain the informed consent of the person responsible for the care of an animal before providing veterinary services to the animal. Whilst the Code does not require this consent to be in writing, written consent may be helpful in the event of a dispute over payment or a complaint to the Board.

Moreover, the possibility of exercising a lien over an animal stems from the fact that, under our legal system, an animal is classed as property. Many people would not consider animals simply as property, particularly companion animals, and accordingly such an approach may be out of step with current societal attitudes towards animals.



If a veterinarian does hold an animal for payment:

- The veterinarian must feed, water and care for the animal at their own cost
- This action may be perceived as holding the animal for blackmail
- This action may lead to the animal being abandoned.

As noted above and previously by the Board in its discussion of [Abandoned Animals](#) (p.10), prevention through actions aligned with the Code will hopefully minimise the circumstances when the above rights will need to be considered.

Doctors' Health Advisory Service

The [Doctors' Health Advisory Service in NSW](#) (DHAS) offers support and advice to doctors and medical students. In New South Wales, this service is also offered to veterinarians and veterinary students via a phone helpline.

At DHAS, we offer confidential and independent advice and we operate independently of all medical and veterinary professional organisations, including registration boards.

If you are a vet or veterinary student, we would encourage you to call the DHAS Helpline at any time if you think we can help you or a colleague.

Some calls to DHAS relate to mental health conditions, workplace stress, substance misuse and career concerns. Our on-call doctors are nonjudgmental, empathetic and experienced.

When you phone the DHAS helpline, your call initially goes to an answering service and your phone number is relayed to the DHAS. The DHAS doctor on call will phone you as soon as possible, usually within a couple of hours. You do not need to leave your name, just a phone number to enable the return call.

We encourage all veterinarians and veterinary students to have a GP, and can assist you to find one in your local area.

Depending on the nature of your concern, the DHAS doctor may help you to access other relevant services and/or resources.

The DHAS helpline is not a crisis or emergency service – in case of emergency callers are advised to phone 000.



Who's looking after you?

DHAS offers an **independent & confidential** advice service for doctors and medical students

Work related stress • Clinical competence • Concern for a colleague • Relationship issues
Psychological disorders • Alcohol or substance misuse • Financial difficulties
Legal or ethical issues • Physical impairment

NSW Helpline 02 9437 6552 (7days)
www.dhas.org.au

Access to medications

Veterinarians are defined as authorised persons under poisons and therapeutic goods legislation. As an authorised person, a registered veterinarian is granted the authority under this legislation to access restricted substances (S4 and S8 medications) for the treatment of animals.

This authority allows veterinarians to purchase, supply or prescribe and access these substances within a veterinary practice.

Non-veterinarians, including veterinary nurses, are only able to access restricted substances in two situations:

1. Under the [direct supervision](#) of a veterinarian
2. To treat animals with medications within the practice supplied by a veterinarian who has previously examined the animal.

Under the direct supervision of a veterinarian requires the veterinarian to be on premises. Hence, a non-veterinarian is not able to supply a restricted substance to a client if a veterinarian is not present to provide that direct supervision and access.

Just as clients are supplied with medications to treat their animals, non-veterinarians can similarly be supplied with medications by a veterinarian within a veterinary practice setting to treat animals in hospital when the veterinarian is not present.

Access to medications to treat animals is a privilege and a very significant factor which distinguishes a veterinarian from other professions.

The Board has created a guideline [Restricted Substances Protocol Checklist](#) to enable veterinary practices to ensure they are complying with poisons and therapeutic goods and veterinary practice legislation when accessing medications.

Free laboratory testing for cloven-hooved animal disease investigations

The NSW Government is subsidising veterinary laboratory testing for new livestock disease investigations until 30 June 2023. This free testing is available in response to the increased risk of foot-and-mouth disease due to the ongoing outbreak in Indonesia.

Increased reporting and investigation of diseased livestock will improve surveillance for foot-and-mouth disease and other emergency animal diseases in NSW.

Testing is available for disease investigations conducted by private veterinarians on livestock that are susceptible to foot-and-mouth disease.

Samples must be processed at the NSW Animal and Plant Health Laboratory at the Elizabeth Macarthur Agricultural Institute to be eligible.

Private vets will be required to request the fee waiver via a [short form on the LLS website](#). No payment is required upfront and tests can be sent to the laboratory prior to approval. The laboratory will process tests once approved by your local District Veterinarian.

As usual, notifiable disease testing and emergency animal disease investigations will continue to be prioritised and tested free of charge.

To learn more, visit the [Local Land Services website](#) or contact your local [District Veterinarian](#).



Emergency Animal Diseases A guide for veterinarians

[A glovebox guide](#) for veterinarians on foot-and-mouth disease, African swine fever, lumpy skin disease, avian influenza, and African horse sickness is now available.

The guide includes disease information, clinical signs, sampling and laboratory testing, differential diagnoses, and transmission pathways as well as key information on biosecurity control, reporting, laboratory information and emergency management training opportunities.



Japanese Encephalitis Update

Japanese encephalitis virus (JEV) appears to be widespread in NSW based on this years surveillance and remains a notifiable disease.

[NSW DPI reported](#) the first case of Japanese Encephalitis (JE) in pigs for the 2022-2023 season on 18 November 2022. Piglets were from the Murray Local Land Services region.

This means, if you observe clinical signs of disease, behaviour or death consistent with JEV, you must report it to the Emergency Animal Disease Watch Hotline on 1800 675 888 or a Local Land Services Authorised Officer (District Veterinarian) on 1300 795 29.

Japanese encephalitis is a mosquito-borne viral disease that can cause reproductive losses and encephalitis in susceptible species. The infection occurs in pigs and horses and can also rarely cause disease in other animals and people.

Animals and people become infected through the bite of infected mosquitoes. The disease is maintained and spreads between mosquitoes, some wild and domestic birds, and pigs.

With recent flooding in parts of the state, health officials nationally are predicting a significant increase in mosquito activity this summer, increasing the risk of Japanese encephalitis.

In pigs, clinical signs include:

- Abortion, mummified foetuses, stillborn or weak piglets, some with neurological signs.
- Piglets infected after birth can develop:
 - Encephalitis which presents as paddling or other neurological signs in the first six months of life
 - Wasting, depression or hindlimb paralysis that may be seen in suckling piglets and weaners.

Adult sows do not typically show overt signs of disease. If boars are present on farm, infertility and oedematous, and congested testicles may be observed.

NSW DPI, in collaboration with other jurisdictions, industry and pig veterinarians, has developed a [mosquito management plan template](#) and guidance document for pig owners and producers, to support on-farm mosquito management controls.

In addition, version 2 of the [Integrated mosquito management principles for piggeries](#) has been updated to include more detailed advice on environmental and chemical management of mosquitoes.

To manage the risk of mosquito bite and JE to you and your team, refer to the [NSW Health website](#).

The latest mosquito surveillance information is also available from [NSW Health](#).

Integrated Mosquito Management Principles for Piggeries



Version 2



Japanese encephalitis sampling and laboratory testing

Collection container	Collect from live pigs	Collect from deceased pigs (<12 hrs)
EDTA tube (purple top) - full	- 10 mL of serum or clotted blood from sows of affected and unaffected litters (up to x10 of each) - 10 mL of serum or clotted blood from several animals in the convalescent stage or from cohorts	
Plain tube (red or grey/red speckled top)	Blood for serology	
Separate sterile collection containers (no media) for fresh samples ¹ (kept chilled at 4 °C not frozen)	Semen from board with sperm abnormalities or azoospermia	Fresh brain, spleen, thoracic fluid/serum, liver, CSF
Collection containers with 10% neutral buffered formalin		Brain, spleen, liver, kidney, heart, lung

¹ To minimise the risk of contamination, take samples as aseptically as possible without delay

Ensure you report all notifiable diseases to the Emergency Animal Disease Hotline on **1800 675 888** or an Authorised Officer on 1300 795 299.

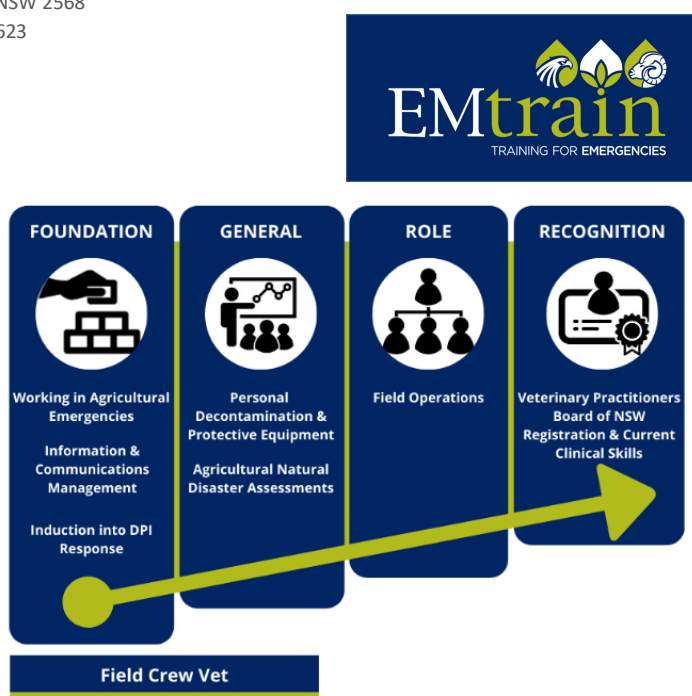
To allow a definitive laboratory diagnosis, obtain a full range of samples. If you can, collect **serum from 10 animals** (live, clinically affected animals) and 10 from animals in the convalescent stage or from cohorts.

Whole fresh aborted or stillborn foetuses are also suitable for submission where samples can't be collected on farm. Ensure whole samples are double bagged and clearly identified as suspect Japanese encephalitis; and packed securely.

Do not freeze samples at -20 °C as it reduces the sensitivity of virus isolation testing.

Send samples in appropriate packaging via courier to the NSW Animal and Plant Health Laboratories at Elizabeth Macarthur Agricultural Institute:

Elizabeth Macarthur Agricultural Institute
Woodbridge Road
MENANGLE NSW 2568
T: 1800 675 623



Did you know?

If you undertake training for working in an emergency animal disease response, you can claim these as structured Continuing Professional Development (CPD) points.

Training opportunities can be found at:

[NSW DPI EM Train](#) which has training for working within NSW responses

[Animal Health Australia \(AHA\)](#) hosts a variety of online courses related to emergency animal disease (EAD) preparedness arrangements and biosecurity.

Get started today and earn your CPD points!

Wildlife welfare charter of engagement

In the interests of fostering the cooperation and mutual respect necessary to ensure animal welfare is prioritised and legal obligations are met, NSW National Parks and Wildlife Service have published a **Charter of Engagement with Veterinary Professionals** for licensed wildlife rehabilitators.

Wildlife rehabilitation groups are encouraged to adopt the charter and embed it in their new volunteer training and organisational policies.

The charter can be [accessed here](#).



NPWS has also collaborated with Koala Conservation Australia and [Versatile Vet](#) to develop [a series of short videos](#) on koala rescue and rehabilitation.

[The videos](#) are a useful practical resource for wildlife rehabilitators and veterinary professionals and intended to promote best practice standards in providing care for sick and injured koalas in NSW.

Wildlife disease investigations

Are you a private veterinarian that has seen an unusual wildlife case? Would you like to investigate further?

If you suspect a significant disease event in wildlife, contact the NSW Wildlife Health Australia (WHA) Wildlife Co-ordinators at NSW Department of Primary Industries (NSW DPI).

There are programs available to support laboratory investigation of wildlife disease investigations.

The NSW Wildlife Co-ordinators work with the experts at the **Australian Registry of Wildlife Health** at Taronga Zoo to prioritise and fund diagnostic investigations.

The Registry staff provide:

- Guidance on whether an investigation is warranted,
- Assistance with differential diagnoses, and
- Advice on sample collection and transport.

Where approved, the Registry will undertake laboratory diagnostic investigation of the case at no cost to the submitter.

The registry can be contacted directly to discuss the case and arrange for submission on 0481 468 505.

If you suspect an emergency animal disease, please contact the **Emergency Animal Disease Hotline on 1800 675 888**.

The **National Significant Disease Investigation (NSDI) Program** provides funding for investigation by private veterinarians, of approved significant disease investigations in wildlife and livestock.

Funding is available from Wildlife Health Australia for approved investigations by registered, non-government veterinarians who are engaged in clinical veterinary medicine, including veterinarians in university clinics, zoos, and wildlife parks.

To apply for NSDI program funding, you will need to provide:

- A history of the event
- Why it is unusual/significant
- What has been done so far
- What further investigation is planned.

Funding under the NSDI Program is determined on an individual case basis, to an agreed limit.

A case report and an invoice are required to be submitted to WHA at the end of the investigation.

If you are interested in applying for NSDI funding for a wildlife disease investigation, or would like to discuss which cases might qualify, please contact the WHA or the NSW Wildlife Co-ordinators - refer to the NSW contact details on the [Wildlife Health Australia website](#).

If you suspect an emergency animal disease, please call the **Emergency Animal Disease Hotline on 1800 675 888**.

You can help in an emergency animal disease response

The NSW Department of Primary Industries works with animal owners, industry, communities and Local Land Services to keep NSW animals healthy and safe.



BE AWARE
OF CURRENT
THREATS



REPORT SUSPECTED EADS
AND COMPLETE EMERGENCY
RESPONSE TRAINING



CONSIDER A VET LIAISON ROLE,
PARTICIPATE IN FIELD OPERATIONS OR
VOLUNTEER IN A LOCAL CONTROL CENTRE



www.dpi.nsw.gov.au



The Animal Welfare Code of Practice—breeding dogs and cats

In NSW there are laws, regulations, and standards in place to help ensure good animal welfare outcomes.

The welfare of dogs and cats in NSW is protected by legislation and supporting Codes and Standards.

The [NSW Animal Welfare Code of Practice - breeding dogs and cats](#) (Breeding Code) is mandated under *The Prevention of Cruelty to Animals Act 1979* (POCTA) and is designed for everyone involved in breeding dogs and cats for fee or reward. It has been developed to protect the welfare of animals in their care.



By adhering to the Breeding Code, people involved in the activity of breeding demonstrate their concern for the welfare of the animals in their care.

To assist vets to help dog and cat breeders find the information they require, the NSW Department of Primary Industries has [resources that vets](#) can provide to their clients.

This includes a webpage dedicated to [Selling or giving away a cat or dog](#), as well as information dedicated to people looking at [Buying or adopting a cat or dog](#).

To stay up to date with animal welfare news in NSW, including future education material that will be developed, you can join the [mailing list](#) to receive NSW Chief Animal Welfare Officer eNewsletters.

Veterinary engagement

NSW DPI Animal Biosecurity and Animal Welfare teams recently attended *VetExpo* at Sydney's International Conference Centre.

This was the first event for the teams post-covid and was an excellent opportunity to speak with the veterinary and para-veterinary profession in person about responsible companion animal trade and welfare, emergency animal diseases (EADs) and the role of vets in EAD responses.



Dr Sarah Britton, NSW Chief Veterinary Officer, and Dr Kim Filmer, NSW Chief Animal Welfare Officer, each gave plenary presentations on the "Key EAD threats in NSW and the vet's role in managing them" and "Animal welfare - who's who in the zoo?", respectively.

Dr Michele Campbell, Animal Welfare Team Leader Policy and Programs, and veterinary wildlife specialist, presented on "Reptilian welfare - moving beyond controlled deprivation".

To view the Animal Welfare talks, [visit NSW DPI website](#).

The CVO talk will be available soon.

Can you spot the difference?

Dog and cat breeders trust their vet. To help your clients spot a responsible breeder look for helpful resources on the NSW Department of Primary Industries website.
www.dpi.nsw.gov.au



Confidentiality and release of records

Under the Code (cl 12) a veterinary practitioner must maintain the confidentiality of information obtained in the course of professional practice, unless the disclosure of the information is:

- (a) authorised or required by this code of conduct or a law of this State or of the Commonwealth, or another State or Territory, or
- (b) to an officer under the *Prevention of Cruelty to Animals Act 1979* or an approved charitable organisation within the meaning of that Act and relates to an alleged offence under that Act or an alleged offence relating to animal cruelty under the *Crimes Act 1900*, or
- (c) to the Greyhound Welfare and Integrity Commission under the *Greyhound Racing Act 2017* and relates to an alleged offence under the *Prevention of Cruelty to Animals Act 1979*.

Veterinarians should seek their own legal advice prior to producing records in particular circumstances but disclosure pursuant to a notice issued under the *Greyhound Racing Act 2017* (s 70) would not be in breach of the Code (cl 12).

Greyhound Welfare—e Trac

In order to ensure greyhound welfare, one of the key recommendations of the Greyhound Industry Reform Panel (accepted by the NSW Government in 2017), was ‘whole-of-life tracking’.

Upon commencement in 2018, the Greyhound Welfare and Integrity Commission(GWIC) was tasked with developing an effective system to track and monitor the location and wellbeing of all registered greyhounds in NSW.

The Commission’s eTrac program provides the NSW greyhound racing industry with a cloud-based system to improve greyhound traceability, making it easier and quicker for the Commission to regulate, track, assure and report on the welfare of greyhounds registered in NSW.

The eTracking system was launched on 31 May 2022 where several groups of industry participants were randomly selected to have their greyhounds checked-in at one of 40+ locations across New South Wales.

These check-in locations include rehoming agencies, veterinary clinics, greyhound racing clubs, trial tracks and select industry participants. Greyhounds are also having check-ins through everyday industry interactions, for example at race meetings or during kennel inspections conducted by the Commission.

The program will enable the Commission to have all NSW registered greyhounds, sighted, scanned and accounted for every 6 months or 12 months, depending on what stage of their racing career they are at.

Additionally, eTrac will provide the Commission and the industry with a single and accurate set of data which can be used to conduct evidenced-based research.

If your veterinary practice is involved with greyhound care, feel free to request a scanner from the Commission emailus@gwic.nsw.gov.au

By doing so, you will be supporting your greyhound clients, and the Commission in monitoring the health and wellbeing of racing greyhounds.

Further information and updates regarding eTracking can be found at:

[eTrac | Greyhounds Welfare Integrity Commission](#)





Public Spaces (Unattended Property) Act 2021

New rules for animals

The *Public Spaces (Unattended Property) Act 2021* (Act) and the *Public Spaces (Unattended Property) Regulation 2022* (Regulation) commenced in NSW on 1 November 2022.

The new laws apply to stock animals. Cats and dogs are excluded except for dogs in national parks.

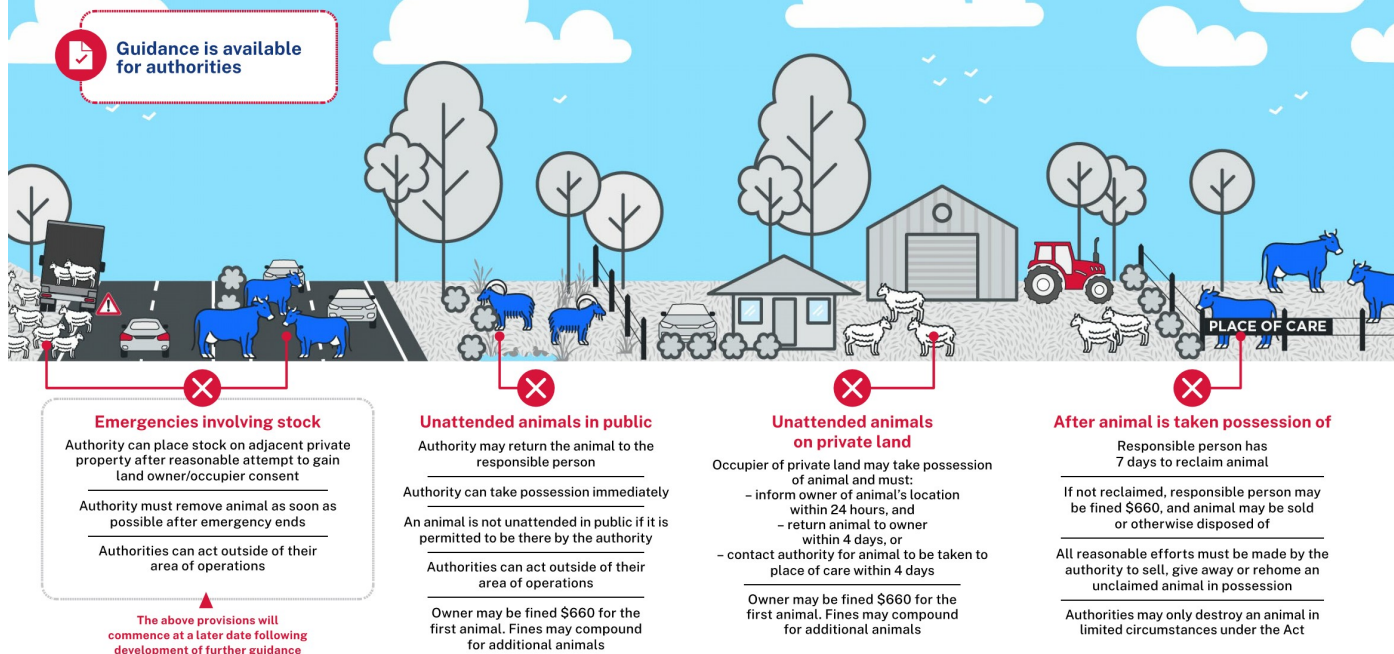
To allow the public and businesses to become familiar and comply with the new laws, a grace period will apply until 1 May 2023 for some penalties. Special arrangements for emergencies involving stock animals on public land, particularly roads, will be commenced by the Minister for Local Government by proclamation once the supporting guidance is in place. This guidance will balance public safety and biosecurity considerations.

The Public Spaces (Unattended Property) Guideline for Councils and Other Authorities issued under the Act (s 23) provides information to support councils and other public land managers to interpret and implement the new laws.

Other resources have been developed to assist the public and authorities to better understand the new laws, including a Circular to Councils, FAQ's, fact sheets and infographics [available from this website](#).

New rules for animals

This includes stock animals. Cats and dogs are excluded, except for dogs in national parks.



Fines and penalties for unattended animals will commence 1 May 2023



Animals taken into possession must be cared for in line with animal welfare laws



**Public Spaces
(Unattended Property) Act 2021**

Veterinary Practitioners Board

The object of the *Veterinary Practice Act 2003* is to regulate the provision of veterinary services in NSW to promote animal welfare and protect the public.

Board members:

Steven Ferguson (President)
Peter Alexander
Magdoline Awad
Georgina Child
Sarah Hunter
Paul McGreevy
Kate Mills
Lisa Minogue

Veterinary Practitioners Board
Suite 7.09, 247 Coward St
Mascot NSW 2020

T: +61 8338 1177
E: admin@vpb.nsw.gov.au
W: www.vpb.nsw.gov.au

The information contained in this newsletter reflects the policies of the Veterinary Practitioners Board (Board) and the current NSW legislation.

Any advice on specific issues not relating to Board policy should be obtained from either the AVA or appropriate government department or your own legal advisors.

Thank you to Dr Mark Simpson for providing the image used on the cover of this publication.

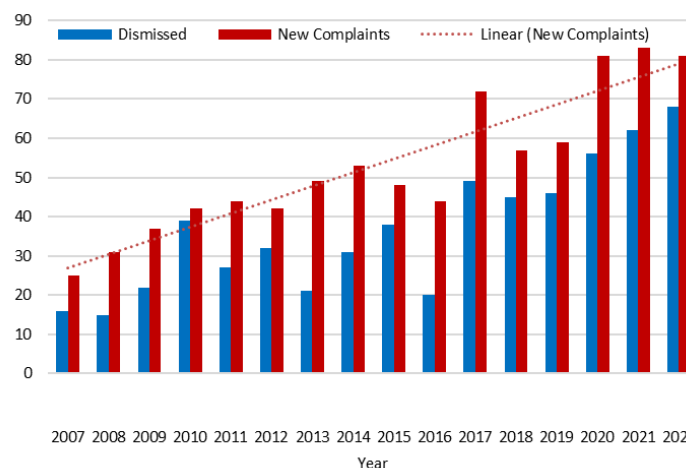
Activities of the Board (continued)

Investigation of Complaints

Last financial year, the Board finalised 87 complaint investigations involving 115 veterinarians. There were 81 new complaints against veterinarians and the number of new complaints against veterinarians has grown by 224% since 2007 or 8.2% annually.

Almost all complaints against veterinarians involve veterinarians working in clinical practice. Approximately 75% of veterinarians are working in clinical practice suggesting 3.5% of veterinarians will be involved in a complaint investigation during the year (approximately 1:30).

Figure 3 Number of complaints against veterinarians 2007-2022



The Board has noted with concern the growth in the number of complaints against veterinarians compared with the growth in the number of veterinarians and has implemented a number of strategies to address this issue including:

- Staff training—the Complaints Officer is a trained counsellor and able to assist both veterinarians and members of the public
- Modification of processes—a second response from the veterinarian is now only required if the Complaints Committee is seeking further information thereby reducing the time for investigations
- Hospital inspections and self-assessments include reviews of processes in addition to facilities and equipment
- BoardTalk provides a review of all complaints in which a veterinarian has been found guilty and where applicable complaint themes are presented
- In a similar approach to AHPRA, findings against veterinarians, where possible, are categorised as conduct, performance or health with action taken by the Board focused on addressing the underlying issue and preventing recurrence
- The Board is providing a scholarship for a PhD on the epidemiology of complaints against veterinarians.

Who's looking after you?

DHAS offers an **independent & confidential** advice service for doctors and medical students

Work related stress • Clinical competence • Concern for a colleague • Relationship issues
Psychological disorders • Alcohol or substance misuse • Financial difficulties
Legal or ethical issues • Physical impairment

NSW Helpline 02 9437 6552 (7 days)
www.dhas.org.au

