

# Boardtalk

December 2018

Issue 49



## President's Report

I have been hearing the word governance frequently, and in a number of different contexts lately. Whether it is the Banking Royal Commission, or the Board of the ABC, or even the Federal Government and the manner of allocation of nearly half a billion dollars to the Great Barrier Reef Foundation, the function, efficiency, reliability, and reputation of an organisation or authority is dramatically affected by its governance.

Governance is the framework of rules, relationships, systems and processes by which authority is exercised and controlled in organisations. I have learned a lot about governance since being on the NSW Veterinary Practitioners Board. I have developed an understanding of the crucial role it plays in our organisation passively, through watching and learning the way our Board works.

So when a new Board was appointed by the Minister in July this year the Board has, for the first time, added a formal Governance training day to the induction process. As usual, formal training has, for me, "fleshed out" the general understanding that governance is just doing the right thing. And this has further been emphasised to me in my role as the Chair of AVBC, where intense negotiations with the

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*President's report continued*

Veterinary Surgeons Board of South Australia (VSBSA) this year (in the wake of the notification of their resignation) have focused on governance of both AVBC and the VSBSA as a major issue.

In my time on the NSW Board I have been witness to myriad examples of good governance that has come to be the hallmark of this institution. And if there is one aspect of governance which I have come to respect as foundational, it is that of selflessness. In particular it is the ability to separate your personal preferences for a particular course of action from the best for the organisation. In many circumstances these two things are coincident, and so doing the best thing is easier. But when one's personal views are not consistent with the best interests of an organisation then it is much harder to separate those things.

Pleasingly I routinely see this ability to put the good of the organisation above advocacy for a particular person or group in the work of the NSW Board. The ability to leave your role as an employer, or member of another organisation at the door, and approach the work of the Board with no agenda or advocacy has been one of the strengths of all the Board members I have worked with over the last 9 years. Their zealous application of the principles of good governance has built a strength and trustworthiness into the protocols and procedures that guide the Board's important work. I congratulate them on behalf of all the stakeholders of the veterinary profession in NSW.

Once again the festive "holiday" season is upon us, and I am struck by the irony that this time of year is probably the busiest for those of us in practice, but I implore you if you can, to take some time to slow down, reflect, spend time with family, and do all those things away from your profession that replenish your reserves of well-being and allow you to return to work refreshed.

So on behalf of the members and staff of the Board, I would like to take this opportunity to wish all registered veterinarians in NSW a very merry Christmas, and a happy and safe New Year.



Best wishes, Mark Simpson  
President



**Confidential Help for  
Veterinarians**

Doctors Health Advisory Service  
24 hours a day.

**(02) 9437 6552**

**Did you know?**

The most popular first name for a veterinarian in NSW is David. The next most popular names are Andrew, Peter, Michael, Sarah, Michelle, Elizabeth and James.

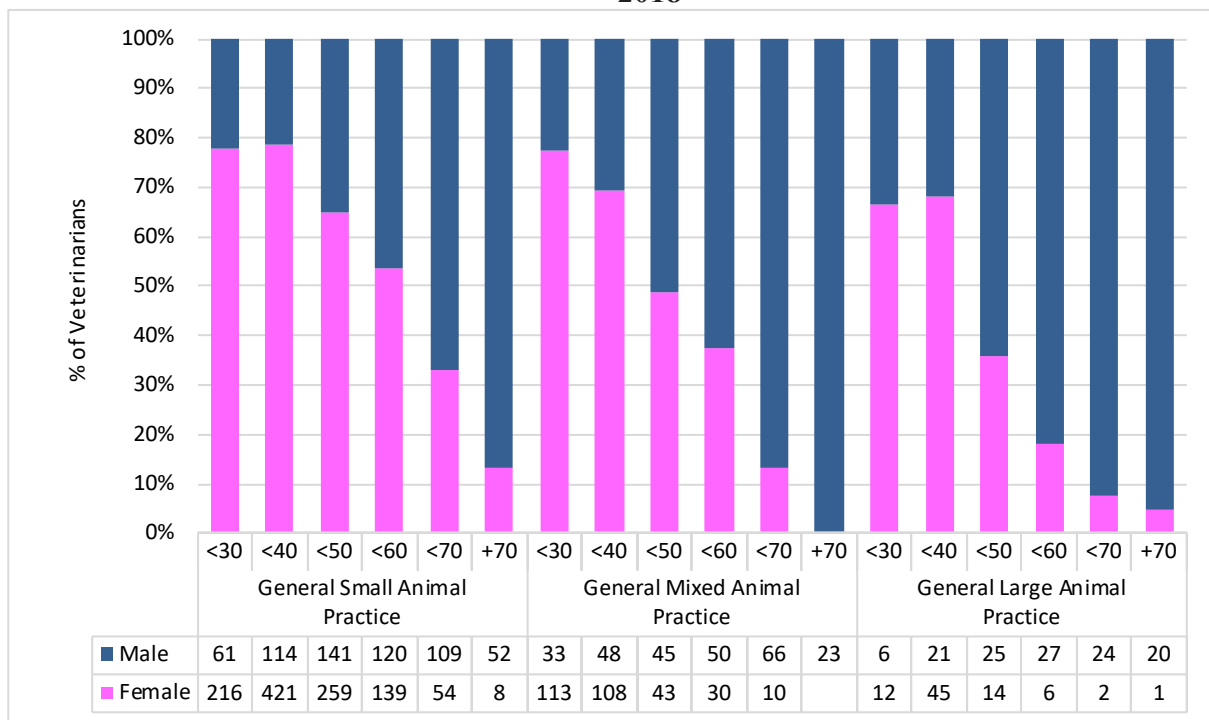
The most popular family name for a veterinarian in NSW is Lee. The next most popular names are Smith, Wong, Brown, Chan, Walker, Taylor and Jones.

## From the Registrar's Desk

The Board collects a significant amount of information each year from the veterinary profession through changes to the Register, Annual Returns and its hospital licensing function. We also have some interesting information for the profession and the public on complaint investigations.

As at 30 June 2018 there were 3,920 registered veterinary practitioners in NSW (3,784 in 2017). This includes 417 veterinarians with honorary registration (441 in 2017) and 127 registered veterinary specialists (163 in 2017). The number of registered specialists has fallen slightly compared to typical increases each year as those who have applied for honorary registration have now been placed in that division of the Register.

### Employment General Practice Gender and Age Group 2018



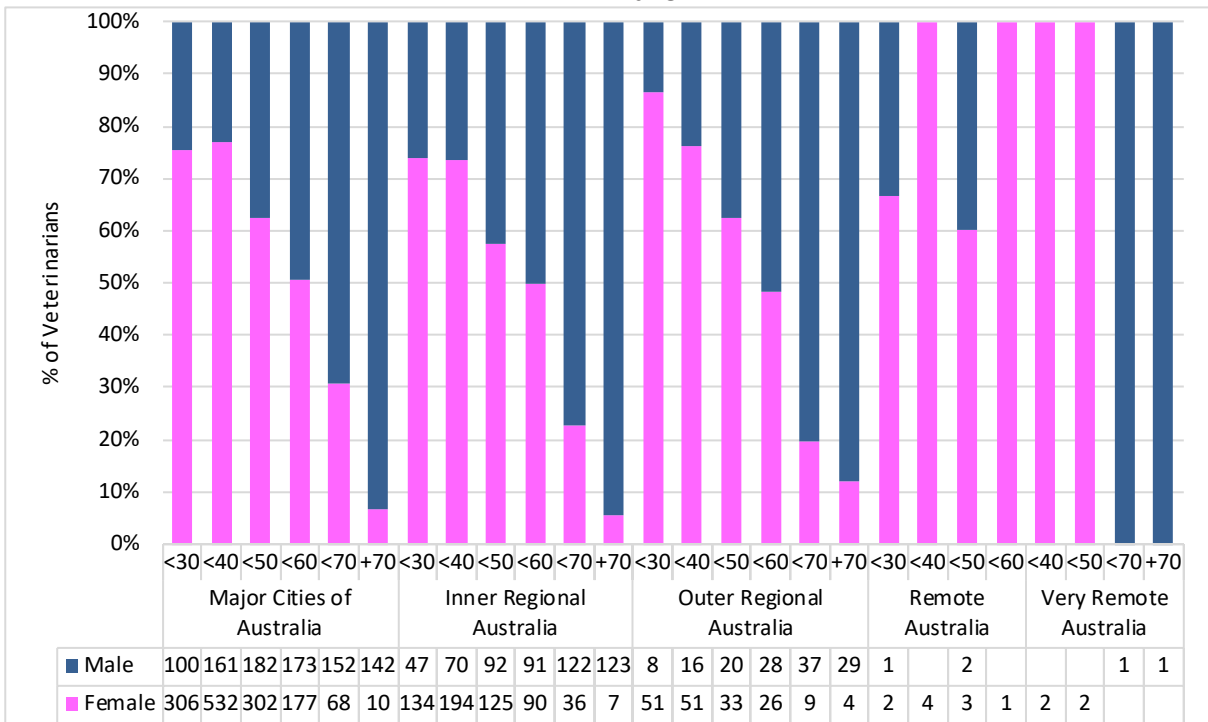
The majority of registered veterinarians work in general veterinary practice (60%) and the majority of these veterinarians work in general small animal practice (70%). The age and gender distribution of veterinarians in general veterinary practice is shown in the graph above – Employment General Practice, Gender and Age Group 2018.

Another interesting way to look at the distribution of veterinarians in NSW is through the remoteness index. This index was developed to describe access to a range of services and specifically how far a person has to travel to centres of various sizes<sup>1</sup>. These data can be seen in the graph – All Veterinarians, Gender, Age Group and Remoteness of Practice 2018.

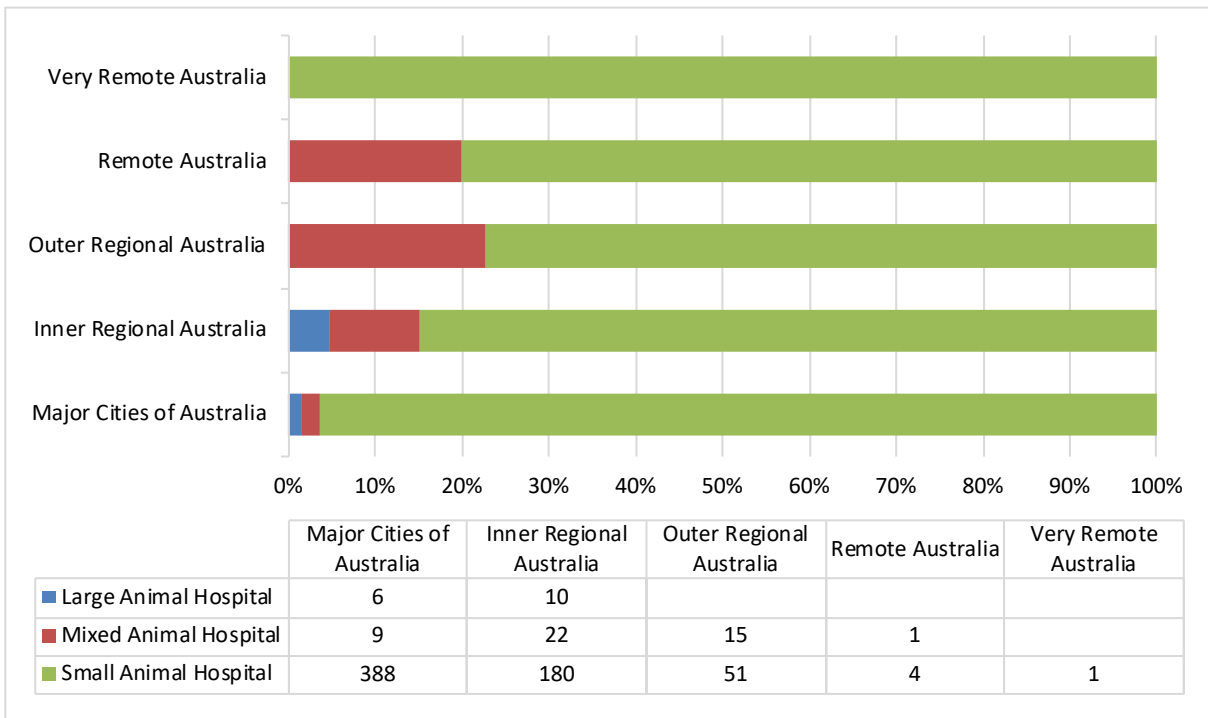
As at 30 June 2018 there were 687 licensed hospitals in NSW (676 in 2017). This includes 624 small animal hospitals (616 in 2017), 47 mixed animal hospitals (44 in 2017), and 16 large animal hospitals (16 in 2017). The remoteness analysis can also be applied to hospitals by licence type and these data can be seen in the graph – Veterinary Hospitals, Licence Type and Remoteness of Practice 2018.

<sup>1</sup> Australian Institute of Health and Welfare 2004, Rural regional and remote health, A guide to remoteness classifications, AIHW.

### All Veterinarians Gender, Age Group and Remoteness of Practice 2018

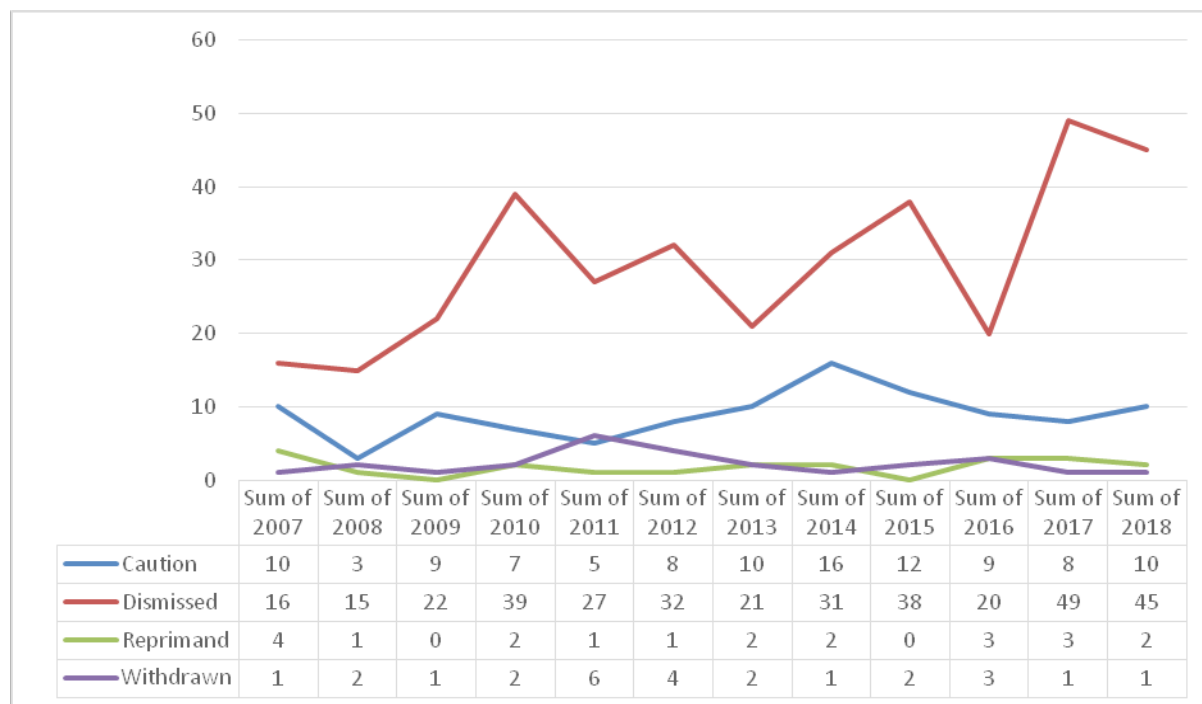


### Veterinary Hospitals Licence Type and Remoteness of Practice 2018



During the financial year the Board received 57 new complaints (72 in 2017) and finalised 58 complaints (62 in 2017). Approximately 78% of these complaints were dismissed but overall in the years 2007-2018 approximately 70% of complaints have been dismissed. The determination of complaints for the period 2007-2018 can be seen in the graph – Complaint Decisions 2007-2018.

### Complaint Decisions 2007 - 2018



If you would like more information regarding Board operations, including registrations, licensing and complaints, go to the Resources section of the Board’s website. Descriptive statistics on these topics for the last financial year are available in the 2018 Annual Report and trends in registration, licensing and complaints are available from the Statistics page.

A new Board was appointed in July 2018 with all but one member being returned for another 3 year term. I would like to welcome all Board members and particularly Jane Lord, our new member, who represents academics in veterinary science and is based at Charles Sturt University. Jane replaced Jules Beatty of the University of Sydney and the Board and the public benefited significantly from Jules’s practical wisdom and resolute attention to the profession’s role in promoting animal welfare.

Finally, this is also an opportunity to thank the Board members, and staff members Mary, Glenn, Melanie, Des and Kathryn for their valuable contributions to the work of the Board during this past year.

Wishing you a safe and happy Christmas.

John Baguley



# From the Hospital Inspector's Car

## Technology

Information technology in veterinary practices is certainly on the move in NSW.

I've noticed a significant increase in software programs that appear (from what I'm told) to be assisting practitioners in their business.

- Programs and screens to track in-house patient movements and their current treatment status (like an electronic white board in the treatment room)
- NSW Health approved software to track Schedule 8 inventory and balances (hence no need to keep an S8 register)
- The implementation of 'e forms' such as consents etc. on tablet computers (iPads) with electronic signatures and easily stored and retrieved if required.

In fact my own appointment diary and hospital checklist will soon be electronic. This system will assist me to plan travel and record non compliance and observations at inspection. Information will stream seamlessly into the Board's database - an automated email will be generated which will require a response once the matter has been rectified by the practice.

The system will provide reports to the profession and be communicated via Boardtalk.

## Appointment of superintendents

A friendly reminder that every licensed hospital in NSW must have a nominated superintendent who attends the practice at least once a week. The Board must be notified in writing of the nominated superintendent before that person assumes the duties of a superintendent. The requirement to notify the Board does not apply to short term appointments such as holidays etc., although the practice should internally appoint a veterinarian for this purpose.

Forms for notifying the Board can be found at: [www.vpb.nsw.gov.au/appoint-superintendent](http://www.vpb.nsw.gov.au/appoint-superintendent)

## Storage of euthanasia solution in safes

Since the Board recommended that euthanasia solutions such as Lethabarb be locked away, it is very pleasing to see the vast majority of veterinary hospitals co operating.

It is rare now that I don't see it locked up although some practices have safes that don't easily fit the 450ml bottle. I would encourage them to go to the hardware store and buy one that will fit it, I've seen them for sale and they are not expensive.

## Conclusion of this inspection cycle

As at 30 June 2018 there were 687 licensed veterinary hospitals in NSW. See Resources, Statistics, Hospital Licensing for further details.

Inspecting hospitals in a part time capacity, performing follow up inspections, unannounced inspections and duties such as investigations for the Board, has taken me around 5 years (to complete the cycle).

By the time you read this newsletter, I should have completed them all, time for a car service!

I've been with the Board since 2000 and in that time I've come to know many of you and I admire the profession immensely. It's that respect and admiration that motivates me to do my best to assist and protect the profession in any way I can.

My hope is to perform at least one more cycle – with my new technology in hand!

I wish all readers of Boardtalk a very safe and happy Christmas period.

Glenn Lynch  
Hospital Inspector / Investigator

## The Complaints Committee Report

The Board has reviewed and determined 35 complaints made against veterinarians between April and October 2018. Of these, 28 complaints were dismissed, 2 complaints were dismissed with a recommendation, 3 veterinarians were found guilty of unsatisfactory professional conduct, and 2 veterinarians were found guilty of professional misconduct.

### Unsatisfactory professional conduct

One veterinarian was cautioned and fined as a result of her advice given in the management of a dog presenting after ovariohysterectomy with surgical wound dehiscence and herniation of omentum. The veterinarian had advised that the dog's prognosis was poor as she suspected intestinal trauma and euthanasia was recommended without clinical evidence to support this diagnosis or prognosis. A finding of unsatisfactory professional conduct in breach of the *Veterinary Practice Act 2003* (s 35(k)) was made as the management of this case demonstrated a lack of skill, knowledge, judgment or care in the practice of veterinary science.

A second veterinarian was cautioned and fined after failing to obtain the client's consent for the number of extractions performed in the course of dental treatment of a dog. Twelve teeth were extracted during treatment when the owner had been previously advised that few extractions were likely to be necessary. No attempt had been made by the veterinarian to contact the owner to discuss the planned extent of treatment after the dog's mouth had been examined under general anaesthesia.

The Board has previously published recommendations in Boardtalk April 2014 that state, where practical, the owner must be given the opportunity to provide consent for the extent of any dental treatment. A finding of unsatisfactory professional conduct in breach of the *Veterinary Practice Act 2003* (s 35(k)) was made as a result of the failure to obtain the owner's consent for the extent of dental surgery performed demonstrating a lack of skill,

judgement or care in the practice of veterinary science.

A third veterinarian was cautioned and fined after a dog in his care died overnight in an unattended veterinary hospital. The dog had been admitted for treatment earlier in the day after having been found collapsed at home. The dog had improved after treatment was started with intravenous fluids but the cause of the dog's clinical signs had not been determined and the veterinarian recommended continued hospitalisation.

The dog was found dead in her cage the following morning when staff reopened the hospital. The dog's owner advised that she was unaware that the dog would be left unattended for 14 hours and that she would have opted to take her dog home for ongoing care if she had known this. A finding of unsatisfactory professional conduct in breach of the *Veterinary Practice Act 2003* (s 35(k)) was made as a result of the veterinarian's failure to obtain informed consent from the client in relation to available options for overnight care of the patient and this demonstrated a lack of skill, judgement or care in the practice of veterinary science.

The Board advised all veterinarians of their obligations when discussing the afterhours care of animals with clients in Boardtalk December 2017 ("Who will look after my pet when you are closed?") and advised at that time "that veterinarians may think the clients know what arrangements are in place but it's wrong to assume the client knows what your practice offers after hours".

The Board's advice to veterinarians was "... the client has a right to be fully informed. You should consider discussing, when appropriate, the benefits that the specific form of afterhours hospitalisation may provide to the animal and client, the level of supervision that will or could be provided during hospitalisation, the various other options available, and the costs of these various options." It is the veterinarian's responsibility to ensure that the client is fully informed.

Options may include (but are not limited to):

- a. no supervision – animal left unattended
- b. minimal supervision – scheduled supervised visits by veterinary or nursing staff during the hospitalisation period
- c. constant supervision – veterinary or nursing staff to provide constant supervision throughout the hospitalisation period
- d. referral to another facility e.g. an afterhours emergency centre
- e. client taking the animal home to provide supervision

### **Professional misconduct**

A veterinarian was reprimanded as a result of breaching the Australian Rule of Racing AR175(1) and in doing so contravened the Veterinary Practitioners Code of Professional Conduct (Code) (cl 14). The veterinarian was charged by Racing NSW stewards and found guilty of 12 breaches of the Australian Rules of Racing including AR175(1) on 21 September 2015. The veterinarian voluntarily stood down from all duties associated with the provision of veterinary services to racehorses 1 August 2015. Protracted legal proceedings with Racing NSW and Racing Victoria delayed the Board's investigation of the complaint made against this veterinarian. The Board was advised that legal proceedings concluded February 2018 and a penalty of 4 years disqualification from all duties associated with the provision of veterinary services to racehorses was determined.

The veterinarian was subsequently found by the Board to have breached the Australian Rules of Racing and in doing so breached the Code (cl 14) which is defined as professional misconduct by the *Veterinary Practice Regulation 2013* (cl 11).

A second veterinarian was found guilty of professional misconduct, reprimanded and fined after his treatment of a dog resulted in amputation of both the dog's pelvic limbs. The veterinarian was presented with a middle aged dog with a pelvic limb lameness and on the basis of his radiographs made a diagnosis of osteosarcoma and recommended limb amputation. The unaffected limb was mistakenly amputated. The veterinarian then recommended amputation of the limb he identified as having osteosarcoma.

The radiographs taken of the dog's pelvic limb did not support a diagnosis of osteosarcoma and no pathology was performed prior to or after surgery. The veterinarian was found guilty of professional misconduct in breach of the Code in that he:

1. Failed to perform sufficient testing to support his diagnosis of osteosarcoma
2. Failed to utilise the skills of colleagues by consultation or referral to support the diagnosis of osteosarcoma
3. Failed to take adequate precautions to ensure he was operating on the correct limb
4. Amputated the second limb without performing further diagnostic testing or offering referral
5. His records were not in sufficient detail to enable another veterinary practitioner to continue the treatment of the animal

Conditions were placed on the veterinarian's practice of veterinary medicine such that he

1. Must engage an approved colleague as a mentor and this mentor must meet weekly (the mentor) must provide a quarterly report to the Board describing medical and surgical case management, compliance with record keeping requirements, and compliance with practice protocols.
2. Must engage a radiology specialist to review his radiographs monthly, or as required, and this radiologist must provide a quarterly report to the Board confirming compliance with this condition and information regarding the range of cases and radiographic diagnoses discussed.
3. Must not perform a limb amputation unless he has discussed the management of this case with a colleague and the name of the colleague must be recorded in the medical record.

### **Dismissed Complaints**

Whilst the Board may dismiss a complaint against a veterinarian it may also make a recommendation to the veterinarian for the purpose of reducing the likelihood of similar adverse events or similar complaints.



Two complaints were investigated in this reporting period that were dismissed by the Board however both involved concerns that are recurring themes with respect to complaints - namely lack of communication and the lack of a written estimate for the cost of veterinary services.

A recommendation was made to the superintendent of an emergency hospital to recommend he review the hospital's complaint handling policies to ensure timely and adequate responses are made to a client's concerns.

A recommendation was made to a veterinarian to obtain, where practicable, written consent for treatment including an estimate of the costs of services to be provided and to ensure that communication is sufficient to ensure clients do understand fully the reasons and nature of treatments recommended.

Complaints may arise due to poor communication regarding the treatment given, diagnostics performed, prognosis or the cost of services to be provided. An estimate of the cost of veterinary care including diagnostic tests and treatment where practicable is a requirement under the Code (cl 16).

Board communications previously have recommended written consent and estimates for all hospitalised cases.

While providing an estimate of costs for all minor procedures and treatments carried out during routine consultations may not be common practice, the provision of an estimate is not likely to be impracticable and all consultations, treatments and diagnostic tests can be considered veterinary services. As such, an effort should be made to provide an estimate (verbal or written) of costs to the client, in addition to client consent, prior to any service. Verbal consent for treatment and estimates of costs of veterinary services is compliant with the Code but the Board strongly recommends the use of written consent forms.

It can be difficult to provide an estimate for the total care of patients where the extent of the treatment that may be necessary is not predictable

however the estimate of total costs to date should be updated (daily or more frequently) to the client and permission for additional diagnostic tests and treatment should be obtained before they are performed where practicable.

The Code (cl 16) requires the veterinarian to inform the person responsible for the care of the animal of both an estimate of costs and likely extent and outcome of the veterinary services. This must be considered together with clause 7 of the Code which requires the veterinarian to obtain informed consent, where practicable, from the person responsible for the care of the animal before providing veterinary services to the animal.

On occasion the extent of treatment recommended may change between the time of consultation with the client and examination of an animal under anaesthesia. In most situations it would be regarded as practicable to contact the client during for example a dental treatment or other elective procedure prior to continuing if consent had not been specifically obtained initially (e.g. on admission) for the extent of any treatment to be undertaken.

For elective procedures, if the client cannot be contacted and had not specifically consented to more extensive treatment if deemed necessary, then any treatment which had not been previously discussed should be deferred.

Poor communication (or perceived poor communication) remains an ongoing source of complaints against veterinarians.

Communication is critical to enable a client to understand the animal's condition, all the treatment options available and the costs involved.

Communication is also important between veterinarians to provide a continuity of care both for the animal and the client where multiple veterinarians are involved in a patient's care and especially where a procedure may be performed by a veterinarian that has not had any consultation with the client previously.

Communication with clients should be in terms that are understood. The understanding of clinical conditions, diagnostics and treatments recommended varies considerably amongst clients and discussions should always be thorough.

It is recommended that communications with clients be noted in an animal's medical record. Where practicable, for animals that have been hospitalised for or have had a surgical procedure, clear written instructions should be given to clients to ensure appropriate ongoing treatment, to advise of what to expect after treatment, and to advise of what to do in the event of any concerns after discharge.

In the event of client concerns regarding an animal's treatment or the outcome of veterinary treatment timely response to these concerns may prevent escalation of grievances to formal complaints which can be very stressful for both the clients and veterinarians involved.

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## **Confidentiality – What's the secret?**

This very important area of veterinary practice is sometimes poorly understood yet it underpins everything we do as professionals. Confidentiality provides a significant foundation to the trust the public and our clients have in the veterinary profession.

Breaches of confidentiality may be subject to investigations by the Board and proceedings in the courts.

### **1. What does the veterinary practice legislation say about confidentiality?**

i. *The Veterinary Practice Act 2003* (Act) (s 55) states that:

(1) A veterinary practitioner must comply with a requirement under this Part to answer a question or to produce information or a document despite any duty of confidentiality in respect of a communication between the veterinary practitioner and a client (but only if the client is the complainant or consents to its disclosure).

(2) A veterinary practitioner may disclose a matter to the Board, a committee of the Board or the Tribunal in breach of any duty of confidentiality if the Board, committee or Tribunal is satisfied that it is necessary for the veterinary practitioner to do so to rebut an allegation in the complaint.

'A requirement under this Part' in paragraph (1) above refers to Part 5 of the Act, complaints and disciplinary proceedings.

**In relation to a complaint investigation by the Board, if the client is the complainant, you must release records and other information to the Board when requested.**

You may release records or disclose matters without client consent if it is necessary to do so to defend yourself against an allegation in a complaint.

ii. *The Veterinary Practice Regulation 2013* (Regulation) schedule 2 Veterinary Practitioners Code of Professional Conduct (Code), clause 12 states that:

Except as otherwise required by this code of conduct, a veterinary practitioner must maintain the confidentiality of information obtained in the course of professional practice.

Clause 10 of this Code states that:

A veterinary practitioner who has previously treated an animal must, when requested to do so, and with the consent of the person responsible for the care of the animal, provide copies or originals of all relevant case history records directly to another veterinary practitioner who has taken over the treatment of the animal.

**If another veterinarian requests the records for a patient that he or she is now caring for and has the consent of the person responsible for the care of that animal then you must release these records to that veterinarian.**

The release of client information gained in the course of your professional activities in other circumstances is therefore likely to be viewed as a breach of client confidentiality under clause 12 of the Code. Exceptions however can be found from an examination of other legislation and circumstances below.

## **2. What about other legislation?**

i. A subpoena is issued in connection with court proceedings and compels you to provide evidence. It specifies exactly what is required, nominates the court to which this must be delivered, and the date by which this information must be supplied.

If your medical records are included in a subpoena, the client has the right to appeal to the court against the release of these records. If you were to give the records to anyone else (e.g. police), you will deprive your client of that right.

**If a court requires you to release specific client information you must do so.**

ii. The other area of law that requires veterinarians to release information gained during the course of their professional practice is in relation to notifiable diseases in NSW declared under the *Biosecurity Act 2015*.

**There is a legal obligation on veterinarians (and stock owners or managers) who know or suspect that an animal has a notifiable disease to notify the relevant authorities.**

Finally, there are a few circumstances where you **may but are not required** to release client information such as medical records. For example:

i. Releasing information to your legal, insurance or other professional advisor who is assisting you to defend an allegation before a court, tribunal or the Veterinary Practitioners Board. That advisor has a duty of confidentiality to you.

ii. Releasing records to your client but remember consent is specific and release records only for the period when your client was the person responsible for the care of the animal concerned.

iii. Release of records with the consent of the client to a client's animal insurance provider.

iv. Release of records to a racing steward upon request and in relation to an investigation where the trainer or person responsible for the care of the horse has provided a signed consent for the release of these records to the racing authorities. It would be prudent before releasing such records to confirm this permission with the client and ensure that you release only the relevant record for that specific horse.

As previously discussed in Boardtalk, medical records are the property either of the individual veterinarian or of the veterinary practice. Veterinarians working in a multi-person practice should also seek permission from the practice superintendent before releasing medical records.

It is worthy of noting that veterinary practice legislation refers to 'client' and 'person responsible for the care of the animal' and not 'owner' in these matters.

In summary, there are a few circumstances where you must release information you have obtained in the course of your professional practice, a few circumstances when you may release this information, but otherwise you must maintain the confidentiality of information obtained in the course of your professional practice.

If you are unsure about what to do when confronted with issues of confidentiality it is prudent to seek independent legal advice.

## Q fever reminder – an occupational hazard for veterinary practice

NSW Health has been notified of two clusters of Q fever infection in staff employed in veterinary clinics in recent weeks.

Q fever is a bacterial disease caused by the bacterium *Coxiella burnetii* that can cause a severe flu-like illness. If not treated, up to one in ten people can develop chronic-fatigue-like illness and other ongoing health problems. While the main carriers of the disease are farm animals such as cattle, sheep and goats it is a common misconception that Q fever is only a “large animal” disease when in fact Q fever is spread to humans from a wide range of animals including domestic pets (e.g. dogs and cats) and wildlife (e.g. wallabies and kangaroos).

Veterinary staff have an increased risk of contracting zoonotic infections such as Q fever due to their level of contact with sick animals. Vaccination is the most effective way to prevent Q fever, and is recommended for all veterinary practice staff including those not directly in contact with animals, animal products or equipment. This includes veterinarians, overseas graduates, veterinary nurses and assistants, university and TAFE students of animal-related disciplines, school students over 15 years on veterinary work experience, veterinary volunteers, cleaning staff and receptionists of veterinary practices.

In the most recent NSW clusters, it is evident that nursing and cleaning staff were not aware of the increased occupational risk of this disease, and so had not received the vaccination.

Clinic management have a duty to ensure all clinical and ancillary staff (and volunteers) are reminded of this risk. Under work health and safety legislation, clinic management have obligations to protect people in the workplace who may be exposed to the disease.

All staff should be screened, and if needed, vaccinated against Q fever at least 2 weeks before starting work. While the vaccine and the skin testing is not government funded, costs are tax deductible for most at-risk occupations including the veterinary industry.

There are many resources for you to use to assist you to take care of yourself and those working with you.

1. NSW Ministry of Health Q fever Fact Sheet for veterinary staff (including links to other potentially relevant Q fever factsheets) <http://www.health.nsw.gov.au/Infectious/factsheets/Pages/q-fever-veterinary-staff.aspx>
2. Australian Veterinary Association Guidelines for Veterinary Personal Biosecurity. This provides a template infection control plan that may assist superintendents to meet their obligations. [www.ava.com.au/biosecurity-guidelines](http://www.ava.com.au/biosecurity-guidelines)
3. SafeWork NSW factsheet on work health and safety obligations in relation to Q fever <https://www.safework.nsw.gov.au/hazards-a-z/diseases/q-fever>
4. The “Australian immunisation handbook”, which recommends Q fever vaccine for those at risk of infection with *C. burnetii*. This includes veterinarians, veterinary nurses, veterinary students, professional dog and cat breeders, wildlife and zoo workers (working with high-risk animals) and laboratory personnel handling veterinary specimens or working with the organism. [www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook10-home~handbook10part4~handbook10-4-15](http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook10-home~handbook10part4~handbook10-4-15)
5. Zoetis through Vets Australia has also published very practical information in Infection Control Guidelines [https://www.cve.edu.au/sites/default/files/ZOEVE1291\\_AIDAPIinfection%20Control%20V16FINAL.pdf](https://www.cve.edu.au/sites/default/files/ZOEVE1291_AIDAPIinfection%20Control%20V16FINAL.pdf)

## New and improved pet registry

The NSW Government is launching a new and improved NSW Pet Registry website to provide an enhanced customer experience for people registering cats and dogs across the State. Public users of the Registry will soon notice the website has a fresh look, enhanced navigation and a range of great new features.

The upgraded website will make it easier to register cats and dogs, return lost cats and dogs to their owners and improve animal welfare outcomes in line with recent changes to Companion Animals legislation.

### What is changing for vets?

#### Lost and found feature

Allows vet clinics to advise a cat or dog owner they have found their pet via a secure message, without having to call the owner or local NSW council office.

#### Create/add a litter feature

Breeders will have the option of preparing draft microchip records for a litter of puppies or kittens. They can pre-record the following information for each offspring:

- Gender
- Breed
- Colour
- Name
- Date of Birth

This reduces the data entry time for vets so they can complete the record more quickly after they have microchipped a litter.

### Breeder Identification Numbers to assist with data entry after microchipping

When creating a cat or dog record on behalf of a breeder, vets will be able to enter the unique Breeder Identification Number which will automatically complete the contact information of the breeder. This will further reduce data entry time for vets. The number format will be B and 9 digits, for example: B123456789.

Please note the new Breeder Identification Number will replace all Breeder Numbers currently used in the NSW Pet Registry. Breeders will receive their new number shortly.

### Other enhancements

#### Search function

The Breeder Identification Number, microchip number and rehoming body number will be able to be searched by members of the public wishing to conduct pre-purchase research on cats or dogs. Prospective cat or dog owners can use those numbers to access important information including breed, age, gender and whether or not the animal is de-sexed.

#### Upload a cat or dog photo

This feature enables cat or dog owners and breeders to include a photo of their animal on the Pet Profile page to help identify and return the animal should it get lost.

These improvements are the next phase in the Government's staged upgrade to the Companion Animals Register and its commitment to managing cats and dogs in NSW.

We will continue to improve the Registry for all users and streamline and modernise the digital registration process including future links with other Government platforms.

The Office of Local Government will provide further information about these changes.

We have also included below a factsheet, video and social media tiles for you to distribute to your members via your own communication channels to ensure they are informed of the Registry improvements.

The Government also values your feedback about its responsible pet ownership programs including the new Pet Registry website.

If you require any further assistance, please contact the NSW Pet Registry team on 1300 134 460 or email [pets@olg.nsw.gov.au](mailto:pets@olg.nsw.gov.au)



## Board letterhead is changing

The Board is in the process of updating its letterhead in accordance with NSW Government Brand Guidelines. The main impact of these guidelines will be a movement away from the Coat of Arms which was adopted as part of the logo for both the Veterinary Surgeons Board and Veterinary Practitioners Board.

The NSW Government logo is to be used across all communications from NSW Government agencies and entities (the Board is a government statutory body) to reinforce the role of the NSW Government.



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## Ownership, writing, maintaining and releasing records

A veterinarian's responsibilities in relation to veterinary and animal health records are covered in three clauses of the Veterinary practitioners code of professional conduct:

### 1. Provision of records

Under the Code (clause 10), a veterinary practitioner who has previously treated an animal must, when requested to do so, and with the consent of the person responsible for the care of the animal, provide copies or originals of all relevant case history records directly to another veterinary practitioner who has taken over the treatment of the animal.

### 2. Writing and maintaining records

Under the Code (clause 15):

- (1) A veterinary practitioner must ensure that a detailed record of any consultation, procedure or treatment is made as soon as is practicable
- (2) The record:
  - a. Must be legible and in sufficient detail to enable another veterinary practitioner to continue the treatment of the animal, and
  - b. Must include the results of any diagnostic tests, analysis and treatments
- (3) If a record is altered, the alteration must be clearly identified in the record as such
- (4) A veterinary practitioner must ensure that all records of any consultation, procedure or treatment are retained for at least 3 years after they are made.

### 3. Client confidentiality

Under the Code (clause 12) a veterinary practitioner must, except as otherwise required by the Code, maintain the confidentiality of information obtained in the course of his or her professional practice.

## Ownership of records

With respect to the ownership of records the Board has previously commented on this issue in Boardtalk.<sup>1</sup> The courts have determined that medical records are either owned by the practice or by the individual medical practitioner.<sup>2,3,4</sup> Privacy legislation now makes it clear that a person has the right to access all personal information about him or her but animal health information is not covered by privacy legislation and these cases continue to provide general principles and guidance for questions of ownership of veterinary and animal health records.

<sup>1</sup> <https://issuu.com/vpbnswh/docs/160623031016-de5fd892bdd443e3a2f1a425f3913f49?e=13671104/36696822>

<sup>2</sup> <http://www.austlii.edu.au/cgi-bin/sinodisp/au/cases/cth/HCA/1996/57.html?stem=0&synonyms=0&query=breen>

<sup>3</sup> <http://www.austlii.edu.au/cgi-bin/sinodisp/au/cases/nsw/NSWCA/2000/56.html?stem=0&synonyms=0&query=health%20services%20for%20men>

<sup>4</sup> <http://www.austlii.edu.au/cgi-bin/sinodisp/au/cases/nsw/NSWSC/2006/844.html?stem=0&synonyms=0&query=zahedi>

## **Writing and maintaining records**

The Board has commented on these issues previously in Boardtalk due to the importance of records when investigating a complaint. The Board is often confronted with two versions of what has happened and a contemporaneous written record will provide more reliable evidence than a written recount of events.

The current standard of record keeping has also increased over the years but the key element in the Code is for veterinarians to ensure that the details in the record are legible and in sufficient detail for another veterinarian to continue the treatment of the animal.

Records may be requested by the Board when investigating a complaint and also may be subpoenaed by the courts so it is important to ensure that they are accurate and objective.

It is vital that the practice ensures there are procedures in place to retain records for at least 3 years after they are made and all practices should therefore have computer records backed up as often as practicable. Tapes and portable drives should also be stored off site.

## **Release of records**

In all cases consent should be obtained from the client before releasing records relating to that client. The Board also recommends that permission is sought from the individual veterinarian, superintendent, or owner of the veterinary practice depending on circumstances prior to releasing animal health records.

When a specialist or other veterinarian has visited the practice to treat an animal it is likely, based on the above, that the practice would be the owner of the records however it would be prudent and ethically appropriate to discuss this matter with the specialist or other veterinarian prior to any release.

Where the veterinary practitioner holds the records of another practitioner that have been provided pursuant to the Code (cl 10) the

agreement of that practitioner should be sought prior to releasing the records.

When releasing records, veterinary practitioners must also be mindful of the privacy interests of third parties whose personal information may be included in clinical records. In addition to specialists and other veterinarians as above, another example is where the records for an animal include information obtained when the animal was owned or cared for by a different client. Whilst records may be held in one file for an individual animal with multiple clients over time, each client must provide consent for release of information pertaining to when that client was responsible for the care of the animal.

Before releasing records please also consider what other personal information these records hold. A person leaving or who has left a relationship may not wish their contact details to be inadvertently provided to the former partner.

Finally, the Code also provides that veterinary practitioners must at all times act with a primary concern for the welfare of animals. Even where there is no obligation to provide a copy of the clinical records to a third party, it may be appropriate for the veterinary practitioner to disclose, with consent from the client, information from the records that is necessary to facilitate the treatment and care of the animal.

## Stray Dogs and Cats

The Office of Local Government is encouraging vets to become Approved Persons. Approved Persons are able to carry out online searches of the Companion Animals Register 24 hours a day, 7 days a week specifically for the purpose of re-uniting cats and dogs with their owners.

For people working in veterinary practices becoming an Approved Person is voluntary and the potential costs and benefits should be carefully considered.

If you choose to become an Approved Person you must submit an Application Form and once approved you must comply with the Guidelines for Approved Persons to Access the Register. The Application and Guidelines are available from our website.

### Seized dogs and cats

The *Companion Animals Act 1998* (Act) does not define a dog or cat as stray but provides for circumstances in which dogs and cats can be seized by any person.

Under the Act, dogs can be seized under a number of circumstances including when in a public place and not under the effective control of a competent person (s 13), when present in a prohibited public place (s 14), when the dog is present on the property of the person seizing the animal (s 18), or in order to prevent damage to property (s 22).

Under the Act, cats can be seized if present in a prohibited area and the owner is not present or for the cat's protection (s 30), or for the protection of any person or animal other than vermin (s 32).

### What should I do if I am presented with an un-injured seized dog or cat?

If you are an Approved Person you can search the Register to try to find the owner. If you are unable to contact the owner within 72 hours you must contact the council to arrange for delivery of the animal to the Council Pound.

If you are not an Approved Person you need to contact the Council to facilitate the cat or dog being returned with its owner as soon as possible.

The Board is aware from the profession that some councils refuse to accept some seized animals (particularly cats) taken to a veterinarian. Councils are not obliged to take stray animals but many do provide this service. Unfortunately when they refuse there is often a burden on local veterinarians to accept these animals.

**Councils are obliged to accept animals that are seized by members of the public and are taken to the council's pound.**

### What should I do if I am presented with an injured seized cat or dog?

If the animal is injured the Veterinary practitioners code of professional conduct states that you must provide first aid treatment, timely referral to another veterinarian or euthanasia as appropriate. The latter requires that you seize the animal under the *Prevention of Cruelty to Animals Act 1979* (s 26AA) and is only possible if the animal is so severely injured, diseased or in such condition that it is cruel to keep it alive.



If you determine that euthanasia is the best course of treatment it is important to ensure you create and maintain accurate records of the injury/illness to document the reason for your decision.

Should first aid be required the animal could be returned to the council pound when ready.

Again, if you are an Approved Person you can search the Register for the purpose of re-uniting the animal with its owner and then discussing the injuries you have been presented with.

If you cannot establish ownership of the animal or if there is some discrepancy you should notify council as soon as practicable.

If the animal is deceased and has a microchip it would be appropriate to report this to the council as the owners will often call the council looking for their pets.

### **What should I do if I am presented with a dog or cat that is seized for other reasons?**

The Board is aware that animals seized by police may be presented to veterinarians due to various circumstances being faced by their owners such as hospitalisation and incarceration.

You are not obliged to accept these animals. If you would like to assist animals with seeking refuge in these circumstances you may consider discussing such cases with the police, local animal shelters and the local council pound.

## **Jury Duty**

The *Jury Act 1977* (sch 2) lists occupations and circumstances of people who have a right to claim an exemption from jury duty. The list includes dentists, pharmacists and medical practitioners but does not include veterinarians.

Veterinarians (and others) may apply to be excused from jury service for a number of reasons including:

1. Undue hardship
2. Sole trader or contractor
3. Advanced stage of pregnancy

If you receive a jury summons notice you are able to login to [juror.nsw.gov.au](http://juror.nsw.gov.au) to apply to be excused. Further information regarding 'good cause' to be excused and specific circumstances in which the sheriff may excuse you from jury service are available from NSW Government Justice website.

Juries are used to determine serious criminal matters and civil matters involving large sums of money and therefore jury service plays a vital role in society.

According to the NSW Government Justice website, approximately 200,000 potential jurors are randomly selected from the Electoral Roll each year and of these approximately 9,000 will serve on a jury panel to hear and determine specific trials.

**Doctors Health Advisory Service Helpline  
02 9437 6552**

**LIFELINE**

**24 hour Crisis Support:**

**Suicide Prevention**

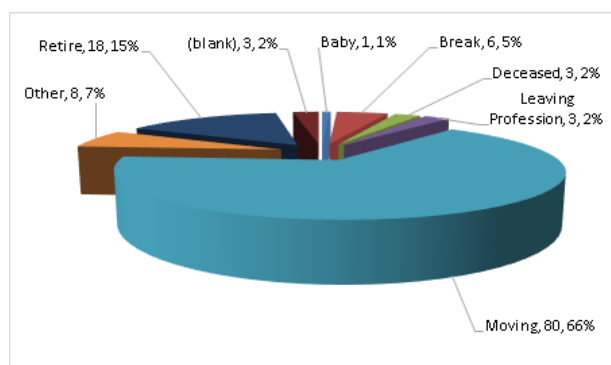
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## Voluntary Removal from the Register

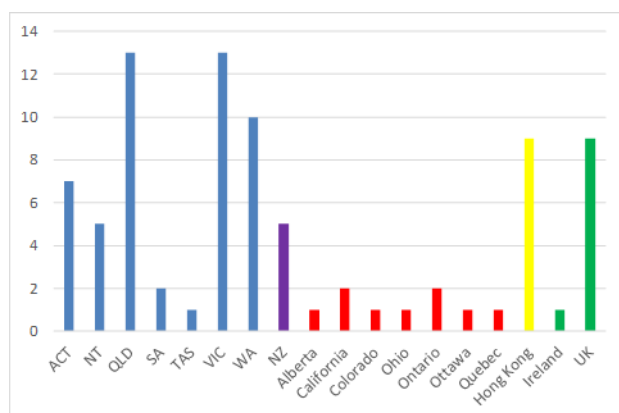
The Board reports on a variety of statistics each year in the Annual Report. Various presentations on statistics in relation to registration, licensing and complaint investigations are also reported separately and published on the Board's website under Resources, Statistics.

Recently the Board has invited veterinarians to provide a reason when seeking voluntary removal from the Register (see Selected Reasons for Voluntary Removal from the Register below).

### Selected Reasons for Voluntary Removal from the Register 2018



### Veterinarians Moving to Another Jurisdiction 2018 Locations



As can be seen from the graphs above, the main reason for voluntary removal from the Register is moving to a new jurisdiction but

more than 20% are either retiring from the profession, leaving the profession or taking a career break.

Analysis of a sample of our letters of professional standing processed by the Board reveal that of those moving jurisdictions over 60% are staying within Australia. For this sample, the remaining 40% moved in approximately equal numbers to North America, Hong Kong and the UK and Ireland with just a few less moving to New Zealand.

## National Recognition of Veterinary Registration

National Recognition of Veterinary Registration (NRVR) will be introduced in the ACT with the commencement of the *Veterinary Practice Act 2018 (ACT)* on 21 December 2018.

Under NRVR veterinarians registered in any state or territory of Australia have deemed registration in other states and territories.

From 21 December 2018 this will mean that Western Australia (WA) and the Northern Territory (NT) are the only jurisdictions not to have implemented NRVR. Veterinarians wishing to work in WA or NT must apply for registration in those jurisdictions even if they are currently registered elsewhere in Australia.

Before working in any other jurisdiction please contact the local veterinary board to ensure you are able to comply with their legislation.

Further information is available from the ACT Board website

<https://www.tccs.act.gov.au/about-us/veterinary-surgeons-board/national-recognition>



THE UNIVERSITY OF  
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## Would you like to be a part of our ground breaking research in Canine Dementia?

In a world first trial, the Regenerative Neuroscience Group of the Brain and Mind Centre at The University of Sydney, is studying stem cell therapy as a possible treatment for Canine Cognitive Dysfunction.

Despite being in the early stages of this clinical trial, the treatment has shown very promising results in its ability to reverse the signs of CCD.

We would greatly appreciate your assistance in recruiting CCD patients in the Greater Sydney Region. Not only will you be assisting us with our research into an effective treatment for CCD, but in doing so, you will also be contributing to future research in human Alzheimer's Disease. It is hoped that this trial will pave the way for similar trials in humans with dementia.

For further information, please contact the trial coordinator, Dr Kaylene Jones [kaylene.jones@sydney.edu.au](mailto:kaylene.jones@sydney.edu.au)

Please also feel free to pass this email address on to pet owners, should they wish to contact me directly.

<https://www.youtube.com/watch?v=bmfh4yF2Q0E&feature=youtu.be>

<https://www.vettalktv.com/dogs-2/978-the-unlikely-symbol-of-hope-for-dementia-sufferers>

<https://www.smh.com.au/national/how-leo-s-doggy-dementia-reversal-gives-hope-for-a-cure-in-humans-20180622-p4zn7f.html>

<http://rng.org.au>

## Veterinary Workforce Survey Reminder

The Veterinary Workforce Survey 2018 will be open until 31 December.

<https://www.surveymonkey.com/r/GBBWNNQ>

The survey is undertaken every second year to examine the current profile of the veterinary profession and anticipate future trends and changes. The information is intended to help the profession, government, veterinary boards and others to understand how the provision of veterinary services may be affected by various factors, including increasing or decreasing numbers of veterinary graduates, career breaks, part-time working, early retirement and veterinarians choosing to work outside the profession.

There is benefit to the veterinary profession, government and veterinary boards in the data being as representative as possible and we encourage registered veterinarians to complete the survey.

The AVA provides a commitment that the results will be made freely available to the Board and will include comparisons with the previous survey results. All reports on past surveys can be viewed at <http://www.ava.com.au/workforce-data>



## EMAI Diagnostic Laboratories - Menangle - Christmas and New Year trading hours 2018/19

To our valued customers,

As the year comes to a close we would like to take this opportunity to thank you for your ongoing support of our laboratory.

We would like to advise that over the Christmas and New Year period for 2018/2019 our trading hours are as follows:

<b>DECEMBER 2018</b>						
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
17 December	18 December	19 December	20 December	21 December	22 December	23 December
Open  8:30am – 4:30pm  Couriers available	Open  8:30am – 4:30pm  Couriers available	Open  8:30am – 4:30pm  Couriers available	Open  8:30am – 4:30pm  Couriers available	Open  8:30am – 4:30pm  Couriers available	Open for  Deliveries  Couriers available	Closed
<b>DECEMBER 2018 &amp; JANUARY 2019</b>						
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
24 December	25 December	26 December	27 December	28 December	29 December	30 December
Open  8:30am – 4:30pm  Couriers available	Closed  Public Holiday	Closed  Public Holiday	Closed  Public Service Holiday	Open (Reduced staff)  8:30am – 4:30pm  Couriers available	Open for  Deliveries  Couriers available	Closed
<b>JANUARY 2019</b>						
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
31 December	1 January	2 January	3 January	4 January	5 January	6 January
Open (Reduced staff)  8:30am – 4:30pm  Couriers available	Closed  Public Holiday	Open (Reduced staff)  8:30am – 4:30pm  Couriers available	Open (Reduced staff)  8:30am – 4:30pm  Couriers available	Open (Reduced staff)  8:30am – 4:30pm  Couriers available	Open for  Deliveries  Couriers available	Closed

Please ensure that couriers are contacted to confirm their operations during the holiday period. Pick-ups just prior to public holidays may be held over in courier holding facilities in which the storage conditions cannot be accounted for. Please discuss this with couriers prior to sending samples.

The Emergency Animal Disease Hotline will continue to operate continuously over the holiday period and can be contacted on 1800 675 888.

For any enquiries related to the laboratory operations over the holiday period, please contact our Customer Service Unit on 1800 675 623 during normal trading hours.

For further information about the services offered by DPI Laboratory Services please visit our website: [www.dpi.nsw.gov.au/labs](http://www.dpi.nsw.gov.au/labs).

Again we thank you for your support of and look forward to continuing to assist your business in being able to make reliable and professional decisions based on the results we provide during 2019 and beyond.

## **Animal Biosecurity Emergency Hotline**

Report suspect exotic, notifiable or emergency animal diseases and pests or biosecurity events to the 24 hour Animal Biosecurity Emergency Hotline

**1800 675 888**

### **Submissions to our Veterinary Diagnostic Laboratories**

Samples for our Veterinary Diagnostic Laboratories must be accompanied by a submission form. These forms are downloadable at the NSW DPI website. Please throw away any out-of-date submission forms that you have in the clinic.

For suspect notifiable disease testing, the address of where the sample was collected should be included on the submission form. If the property has a property identification code (PIC) this should be included on the submission form.

To report suspect notifiable animal pests and diseases phone:

The Animal Biosecurity Emergency Hotline 1800 675 888 (available 24-hours a day), or Your Local Land Services office on 1300 795 299 (available during business hours)

### **Animal Welfare**

In recognition of the increasing complexities and public scrutiny relating to animal welfare, the NSW Department of Primary Industries (DPI) has created a new role to oversee the Animal Welfare Unit. The Chief Animal Welfare Officer (CAWO) will operate alongside the Chief Veterinary Officer. Following a competitive recruitment process Dr Kim Filmer was recently appointed to the CAWO position.

The CAWO has been busy guiding the Animal Welfare Unit on a number of welfare reforms and promoting new initiatives focussed on welfare during the drought. Current initiatives within DPI or in partnerships with other organisations include:

- NSW Animal Welfare Action Plan - which aims to deliver an animal welfare system that is outcomes-focussed and reflects evolving animal welfare science and community expectations.

<https://www.dpi.nsw.gov.au/animals-and-livestock/animal-welfare/improving/action-plan>

- DroughtHub – a central information portal for advice and services available to assist those in drought-affected regions.

<https://www.dpi.nsw.gov.au/climate-and-emergencies/drougthub>

- NSW Emergency Drought Relief Package - Stock Disposal Scheme – a scheme managed by Local Land Services (LLS) to prevent animal welfare issues by assisting livestock owners to euthanase and dispose of their drought affected stock.

Please contact your closest Local Land Services (LLS) veterinarian for further information: <https://www.lls.nsw.gov.au/>

- Rural Resilience Program – a program which links farming communities and service providers across NSW to strengthen networks, exchange information and deliver relevant initiatives (including financial assistance) that build personal and business resilience skills and knowledge. Rural Resilience Officers and Rural Support Workers are located throughout the state.

<https://www.dpi.nsw.gov.au/about-us/rural-support/RRP>

- The Rural Adversity Mental Health Program (RAMHP) -RAMHP has 14 Coordinators based across NSW who provide specialist knowledge and support for people living in the rural communities who are experiencing mental health concerns. The program delivers, among other services, Suicide Prevention Workshops and self-help

resources such as drought support information.  
<http://www.ramhp.com.au/find-ramhp-coordinator/>

### **Non-native pest animal reporting**

Non-native animals, also known as non-indigenous animals, have been introduced to Australia from the time of the arrival of European settlers. The first settlers brought with them commercially important livestock including pigs, goats, cattle, rabbits and horses. However, feral populations of these species developed and spread after being deliberately released or escaping from captivity. Over time, additional non-native animals have been introduced to Australia through legal, illegal and accidental pathways. Some of these free-living non-native pest species, such as the European starling, Cane toads, European fox, feral pigs, goats, cats and rabbits, have had a devastating impact on our environment, economy and community.

Certain non-native animals haven't established free-living populations yet, but if they did they could impact negatively on the natural environment and commercial enterprises through predation, competition for food and shelter, destruction of habitat, and by potentially spreading exotic animal diseases. In addition, some non-native animals could threaten human health and safety through the transmission of diseases or causing vehicle accidents. These animals enter New South Wales through a combination of pathways such as accidental hitchhikers on ships and planes; illegal importation, illegal trade within Australia and escaping from illegal keeping. Information on key non-native species can be accessed from the following link to the NSW Department of Primary Industries (DPI) webpage.

A list of non-native terrestrial vertebrate species can be accessed from Schedule 3 of the *Biosecurity Act 2015* (the Act) Species listed in Part 2, Division 1 and Part 3 of the Act are considered to be 'prohibited dealings'. It is an offence to keep, move or otherwise deal with these animals unless the dealing is permitted

by NSW DPI. Species listed in Division 2 of the Act are non-native species that are usually kept as domestic pets, livestock or are already widespread pests and therefore, are not considered to be 'prohibited dealings'. Additionally, as a safety-net, any non-native terrestrial vertebrate that is neither listed in Schedule 3 or 4 of the *Biosecurity Act* is considered as a 'prohibited dealing'.

NSW DPI is working to prevent the introduction and establishment of new non-native pest animals and ensure existing non-native pest animals in the state are managed effectively. Under the *Biosecurity Act 2015* managing the biosecurity risk posed by these animals is a shared responsibility between government, industry and communities

### **How can you help??**

1. If you become aware of unusual animals in the wrong place or suspect illegal activities such as the movement, keeping, breeding and sale of unusual non-native animals, you should make a confidential report to NSW DPI as soon as possible.

To report the sighting of an unusual non-native animal being kept illegally or released into the environment, please contact NSW DPI via:

Report Hotline: 1800 680 244

Online report form:  
[www.dpi.nsw.gov.au/biosecurity/sighting](http://www.dpi.nsw.gov.au/biosecurity/sighting)

For further information about the non-native species that are prohibited in NSW please:

Phone: 1800 680 244

Email: [invasive.species@dpi.nsw.gov.au](mailto:invasive.species@dpi.nsw.gov.au)

Visit: <https://www.dpi.nsw.gov.au/animals-and-livestock/nia>

Where you can access a photo library of some of the key non-native pest animals.

2 Help NSW DPI reach as many people as possible with the 'Most Unwanted' campaign to encourage the people of NSW to look for and report non-native pest animals. We have created a digital promotion pack including social videos, a poster and brochure for you to use to spread the word to your clients.

Due to the large size of files, please access the relevant materials via the Dropbox folder. If you are unable to access Dropbox, please contact us with an alternate file sharing system.

In order for us to track our reach to stakeholders, please always use the hashtag #DPIseeitreportit and tag us on Facebook @NSWDPI.Biosec

If you would like to request posters and brochures to be sent to your vet hospital, please email: bfs.communications@dpi.nsw.gov.au

## National harmonisation of veterinary prescribing and compounding rights

This is your opportunity to have a say.

In Australia, the Australian Pesticides and Veterinary Medicines Authority (APVMA) is responsible for import, registration, labelling, and regulation of veterinary chemicals up to the point of distribution. The states and territories are responsible for control-of-use legislation. In NSW this is the *Stock Medicines Act 1989* which is administered by NSW DPI.

For many years each of the states and territories control-of-use legislation has been quite different. This means that product manufacturers, veterinary practitioners, stock feed manufacturers, and livestock producers across state borders have to comply with different rules and regulations in each state.

In 2008 and again in late 2016 the Productivity Commission recommended that the states and territories consider harmonising their legislation to simplify compliance for all stakeholders. A working group was tasked with national harmonisation of control-of-use legislation for veterinary chemicals. That working group is referred to as the 'Veterinary Prescribing and Compounding Working Group'.

The working group has just released a discussion paper for consultation that proposes a model for harmonisation of control-of-use legislation for veterinary prescribing and compounding. The working group and NSW DPI encourage everyone who is interested in veterinary chemical legislation to respond with your thoughts, comments and experiences.

This is a public consultation which is currently open, closing at 2pm on Friday 14 December.

The paper is available at [www.agriculture.gov.au/ag-farm-food/ag-vet-chemicals/domestic-policy/harmonisation-min-vet-prescribing-reg-requirements](http://www.agriculture.gov.au/ag-farm-food/ag-vet-chemicals/domestic-policy/harmonisation-min-vet-prescribing-reg-requirements)

Responses can be submitted to [agvetpolicy@agriculture.gov.au](mailto:agvetpolicy@agriculture.gov.au)



## Welcome to Kathryn McCarthy

Kathryn McCarthy has been appointed as the Board's Finance & Administration Support Officer. Des Lyttle who previously fulfilled these duties continues in the role of Registration Officer.

Kathryn has a Bachelor of Economics (Macquarie University), is a member of the Institute of Chartered Accountants Australia & New Zealand and is a Justice of the Peace (NSW).

Kathryn's previous career roles include Business Services in a Big 4 Chartered Accountancy firm and a long term role in a high net worth family office delivering a varied range of professional financial services to small and medium businesses.

Kathryn's skills and experience will ensure the Board is able to maintain and enhance its financial and administration record keeping processes.

Kathryn's leisure activities include fishing, gardening, cooking, family activities and caring for her family pets which currently include one dog, one rabbit and two turtles.



Christmas is not a time nor a season  
But a state of mind  
To Cherish Peace and Goodwill  
To be plenteous in mercy  
Is to have the real Christmas spirit

Calvin Coolidge



The Board office will close from midday  
Monday 24 December and reopen on  
Wednesday 2 January 2019

### Boardtalk

A publication of the Veterinary  
Practitioners Board of NSW

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Dr Georgina Child

Mrs Wendy Cochrane

Dr Steve Ferguson

Dr Jane Lord

Mrs Lisa Minogue

Dr Kylie Parry

Dr Ian Russ

#### Board Staff:

Dr John Baguley (Registrar)

Mary Lydamore (Deputy Registrar and Complaints officer)

Glenn Lynch (Hospital Inspector and Investigator)

Melanie Robson (IT and Admin Support)

Des Lyttle (Registration Officer)

Kathryn McCarthy (Finance Officer)

#### IMPORTANT:

The information contained in this newsletter reflects the policies of the Veterinary Practitioners 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.