

RMB Newsletter Vol 3:4 Once-in-a-lifetime opportunity October 2003

Dear Tom,

A once-in-a-lifetime opportunity has arisen, but we need to act in the lifetime of the opportunity before 17 December 2003.

Recently I spoke with the British government officer, Mr Paul McDonald, who is coordinating submissions for the review of the Veterinary Surgeons Act (the Act governing the conduct of British vets). Mr McDonald was most helpful but, perhaps not surprisingly, he had no prior knowledge of the pet food industry/veterinary profession scientific and consumer fraud. After our telephone discussion I sent a letter setting out some of the issues (see foot of Newsletter).

About 75% of veterinary time is devoted to the treatment of domestic pets pets poisoned by the junk food diets recommended and sold by veterinarians.

Junk food injures the health of animals in broadly three, sometimes five, different ways.

- 1.) Soft canned foods and grain based kibble fail to clean teeth giving rise to chronic oral disease and resultant production of toxins.
- 2.) Cooked carbohydrates, proteins and fats are toxic in differing degrees. Absorption into the circulation through the small intestine adversely affects several body systems.
- 3.) Poorly digested grains support a large population of toxin producing bacteria in the lower bowel. Local reactions of the toxins on the bowel lining and absorption of the toxins affect several body systems.
- 4.) Disease processes arising from the aforementioned insults, for instance nephritis, hepatitis and dermatitis, give rise to further toxins and thus further insult.
- 5.) Veterinary medicines prescribed for disease processes, for instance nephritis, hepatitis and dermatitis, add to the toxic load.

Many vets appear not to know these facts but the veterinary schools, veterinary organisations and veterinary regulators do know.

Now is our chance before 17 December to let the British Government know so that the veterinary schools, veterinary organisations and veterinary regulators can be held accountable for their role in distorting the scientific evidence and promoting dietary products that are neither suitable nor safe.

The main Web link for the Government proposals is:
<http://www.defra.gov.uk/corporate/consult/vetsurgeons/index.htm>

The Department for Environment, Food and Rural Affairs asks for ‘any other views you may have on reforming the Act.’ (See Clause 46 in letter below.)

Please don’t be deterred if you are not a UK resident — your views still count.

By providing the British Government with the facts - before the changes become law - we can expect flow-on effects in other countries.

Please write/email to:

Mr Paul McDonald
VSA Team
Department for Environment, Food and Rural Affairs
Area 605
1A Page Street
London
SW1P 4PQ

Email: Paul.A.McDonald@defra.gsi.gov.uk
Fax: +44 (0)20 7904 6962

Below there’s a suggested email letter that can be modified to suit your circumstances.

If you need help with your submission please contact:

Australia: Tom Lonsdale tom@rawmeatybones.com Phone: 040 3046 464

UK: Dr Johan Joubert jojou@eye2eye.cc Phone: 077 5378 3942

UK: Roger Meacock MRCVS roger@naturalhealingsolutions.co.uk Phone: 07866 687296

USA: Alison Tyler Atyler1462@aol.com Phone: 770-757-1498

Please copy any correspondence to tom@rawmeatybones.com I shall maintain an archive and may publish items in future RMB Newsletters.

Here’s looking forward to an effective, peaceful campaign to change a small but important part of the world.

Best wishes,

Tom Lonsdale

EXAMPLE EMAIL WHICH CAN BE MODIFIED FOR YOUR PERSONAL USE

To: Paul.A.McDonald@defra.gsi.gov.uk
Subject: Modernisation of Veterinary Surgeons Act
Cc: tom@rawmeatybones.com

Dear Mr McDonald,

Thank you for the opportunity to comment on the proposals for modernisation of the Veterinary Surgeons Act.

In my opinion much vital information has been locked-up behind the 'pet food curtain' with resultant distortion and loss in key areas:

Pet health and welfare widespread animal suffering and needless veterinary work

Economic costs £millions in pet food costs and veterinary activities

Human health costs diet related dog bite injuries, stress associated with caring for chronically ill animals, sub-standard medical research etc

Environmental costs pollution issues, manufacturing and production costs, needless pharmaceutical production

WRITE HERE COMMENTS/OBSERVATIONS/SUGGESTIONS WRITE HERE

I hope that the British Government takes due account of the failings of the present Veterinary Surgeons Act and thereby ensures that the new Act provides redress.

I shall be pleased to supply more information as you may require.

Thank you for your consideration.

Yours sincerely,

Letter from Department for Environment, Food and Rural Affairs (DEFRA)
<http://www.defra.gov.uk/corporate/consult/vetsurgeons/letter.htm>

24 September 2003

Dear Sir or Madam

MODERNISATION OF THE VETERINARY SURGEONS ACT 1966

1. I am writing to invite your comments on proposals to update and modernise the Veterinary Surgeons Act 1966 (VSA). The Act provides for the management of the veterinary profession, for the registration of veterinary surgeons and veterinary practitioners, for regulating their professional education and professional conduct and for cancelling or suspending registration in cases of misconduct. It also permits veterinary nurses to carry out medical treatment and minor surgery (not involving entry into a body cavity) on any species of animal. It also provides for the making of Exemption Orders allowing procedures considered to be acts of veterinary surgery to be carried out by suitably trained and competent persons not registered as veterinary surgeons. The VSA designates the Royal College of Veterinary Surgeons (RCVS) as the competent authority for supervising the veterinary profession within the UK.

2. Since the VSA was passed there have been major developments both in the veterinary profession and in the way veterinary services are delivered. In the intervening period the expectations of the public have changed and are now more demanding in terms of the services provided. This applies to professions across the board and not just to the veterinary profession. It is particularly the case in those professions where there is frequent face-to-face contact, the medical professions being the prime example. The public's perceptions have also changed in that they now expect the professional bodies to monitor standards to ensure that problems do not arise, rather than dealing with them when things go wrong. It is considered that now is an opportune time for a new modernised Act to be introduced.

The Time for Change

3. It is now over 35 years since the VSA was passed. The profession has moved on in the intervening period both in terms of technical developments and in skills. Users of veterinary services, and the public in general, need to be confident that their animals are receiving the best care and most modern approaches to treatment. They need to be sure that the regulatory bodies are setting standards that are maintained across the profession. This means that the regulatory bodies and the profession as a whole must be accountable and transparent in their dealings with their customers and the public at large.

4. Many veterinarians recognise that their time may be better utilised as leaders of multi-disciplinary teams that include veterinary nurses and fully trained and experienced para-professionals. This enables veterinary surgeons to spend more of their time on diagnosis and advanced medical procedures leaving the more routine procedures to veterinary nurses and paraprofessionals. Defra recognises that there is scope for further deregulation of the profession, but before any further liberalisation occurs there must be systems in place to ensure the competence of the

individual para-professional. This will involve training, continuing professional development and revalidation as necessary.

5. On the question of transparency there is increasing pressure for greater clarity on the way the profession and RCVS operate. This is particularly so in relation to the disciplinary procedures of the RCVS. There have been an increasing number of complaints in recent years that the interests of animal owners are not given sufficient weight in the deliberations of the various disciplinary committees. While the Government has seen no evidence to support this view there appears to be a need for greater openness to restore the faith of clients in the fairness of the system. Linked to this is the need to ensure that the procedures are in compliance with human rights legislation, and that the system provides veterinarians with an accountable and transparent disciplinary system with access to an independent appeals procedure.

6. While some individuals and organisations have called for an independent regulatory authority to oversee the profession, the Government's view is that self-regulation should continue to be the preferred option. Accordingly the RCVS will remain the competent authority for the profession with responsibilities for the education, registration and disciplining of veterinary surgeons in the UK.

Proposals

Council of the RCVS

Proposal 1

7. It is proposed that the Council of the RCVS should remain approximately the same size with a membership not exceeding the current 40 members. However we are proposing a change in the composition of the Council. The present number of council members elected from among the members of the RCVS would be reduced from 24 to 18. The lay membership of the Council would be increased from the current 3 to 14. Lay members would be appointed by Defra / the Privy Council / an independent appointments panel in consultation with the devolved administrations through open competition and in line with the Nolan principles. Your views on whether appointments should be through a Government department or an independent panel would be welcome. The representation of the six UK Veterinary Schools would be reduced from 12 to 1 or 2 (greater representation would result in fewer elected members). The UK's Chief Veterinary Officer would be an ex officio member, and there would be provision for representation from the veterinary nursing profession. We would welcome your views on the appropriate length of term for elected members, and for the length of term, and how many consecutive terms should be served for appointed members.

8. There is an argument that specific customer groups should be represented on the Council. We would welcome views on this suggestion and suggestions for representation by any specific groups of stakeholders.

Representatives from specific stakeholder groups would be included as part of the lay membership of the Council. We would also welcome views on how a stakeholder group should be defined. There is the question of whether there should be provisions to ensure that there is regional balance in representation on the Council with seats designated for Scotland (2), Wales (1) and N. Ireland (1). We would also welcome views on this.

OR

Proposal 2

9. We propose a reduced Council in line with developments in other professions. This would consist of 14 elected members, a reduction from the current 24 elected members, an increase in lay membership from 3 to 10, and a reduction in the number representing the veterinary schools from 12 to 1 or 2 (greater representation would result in fewer elected members). Lay members would be appointed by Defra/the Privy Council/an independent appointments panel through open competition and in line with the Nolan principles. Your views on whether appointments should be through a Government department or an independent panel would be welcome. In addition the UK's Chief Veterinary Officer would be an ex officio member, and there would be provision for representation from the veterinary nursing profession. We would welcome your views on the appropriate length of term for elected members, and for the length of term, and how many consecutive terms should be served for appointed members.

10. There is an argument that specific customer groups should be represented on the Council. We would welcome views on this suggestion, and suggestions for representation by any specific groups of stakeholders. Representatives from specific stakeholder groups would be included as part of the lay membership of the Council. We would welcome views on how a stakeholder group should be defined. There is the question of whether there should be provisions to ensure that there is regional balance in representation on the Council with seats designated for Scotland (2), Wales (1) and N. Ireland (1). We would welcome views on this.

11. With reduced membership the Council it may find it difficult to fill all the College's committees with elected members of the Council. In this situation ordinary members of the RCVS could be invited to join specific committees, for example academics from the veterinary schools could be invited to join the Education Committee. In all cases, however, it is suggested that the Chairpersons of all the committees should be members of the Council.

12. Both proposals would mean that vets constitute approximately 60% of the membership of the Council (not including appointed members, i.e. the CVO and the representative of the veterinary nursing profession), with lay members constituting 30%-35%.

Supervision of Professional Competence

13. The great majority of veterinary surgeons in the UK provide a good quality of care to the animals they treat, and deal with their clients in a professional manner. However, as with all professions a small minority fall below the standards the rest of the profession expect. As a result they may put animals' lives at risk, weaken animal disease controls or have an adverse affect on public health, resulting in damage to the reputation of the profession as a whole. It is proposed that the RCVS would continue to exercise powers to rule on the fitness of veterinary surgeons to continue to practice their profession in the UK. The RCVS will be given specific powers to determine an individual's right to continue to be registered to practice. These powers will cover professional competence (including the state of health of the veterinary surgeon in question), conduct and criminal convictions of the veterinary surgeon.

14 Legal powers will be granted to enable the RCVS to take effective action to deal with veterinary surgeons that fail to meet the required standards. This will protect the welfare of animals and the rights of their owners against the failure of a veterinary surgeon to meet the necessary professional standards. It will also protect against any adverse effects on public health and animal disease controls. However, these powers will need to be balanced against the human rights of the individual veterinary surgeon concerned. It is intended that the range of disciplinary powers currently available to the RCVS will be expanded to provide greater flexibility when dealing with varying degrees of misconduct and range of offences that do not constitute misconduct but may bring into question the veterinary surgeon's fitness to practise.

15. It is proposed that the RCVS should have powers to:

A.

- Issue a formal and public rebuke;
- Demand a formal apology be made;
- Order that professional fees be waived, reduced or refunded;
- Adjudicate when the level of fees is disputed;
- Require the provision of all relevant records;
- In the case of the most serious allegations, suspend the right to practice pending a hearing by the Disciplinary Committee, but with provision for financial compensation in the case of the hearing finding in favour of the veterinary surgeon;

B.

- Make orders regarding costs;
- Award compensation payments to clients;
- Impose fines;
- Enter and seize records when these are not provided on request;
- Place restrictions on right to practice, e.g. retraining, supervision, medical treatment, etc.;
- Suspend/remove the right to practice; the Disciplinary Committee will recommend the period before reinstatement can be considered

depending on the severity of the offence, this will range from a minimum of 1 year to a maximum of 3 years;

C.

- Issue Code of Conduct; provide advice and guidance to the profession; failure to comply with the Code of Conduct could be cited in any disciplinary proceedings.

16. Your views are sought on: (i) whether the Preliminary Investigation Committee should continue to only investigate complaints and refer to the Disciplinary Committee those they believe should be taken further; or (ii) should they have the power to reach a decision on less serious cases which do not constitute misconduct, and where appropriate impose penalties? In the latter case, should the Preliminary Investigation Committee be able to impose the penalties listed in Section 15A? Should there be other penalties the Committee can impose? We would also welcome your views on the required standards of proof in any disciplinary procedures. Should this be based on 'the strong balance of probabilities', rather than the stricter requirements of 'beyond reasonable doubt', as required in criminal prosecutions? It may be that different standards of proof should be obtained, depending upon the severity of the alleged offence and the likely disciplinary action. Previous legal advice with regard to disciplinary procedures in another profession was, that to comply with the European Convention on Human Rights, the most serious charges should attract a criminal standard of proof. However, for less serious allegations it was considered that a sliding civil standard might be appropriate.

Disciplinary Procedures

17. We are proposing that the non-veterinary membership of the Council of the RCVS be increased substantially bringing the veterinary profession into line with the medical and dental professions. Currently, members of the veterinary profession have the right to appeal to the Privy Council against decisions taken by the Disciplinary Committee of the RCVS. We are proposing that those who have brought complaints against a veterinary surgeon should have a similar right to appeal against a decision taken by the Disciplinary Committee. Do you agree with this and, if so, what would be the appropriate mechanism by which such an appeal could be heard? Your views are also sought on whether the Judicial Committee of the Privy Council should continue to act as the final appeals body for the veterinary profession, or should it be brought into line with other professions and the right of appeal to the Privy Council abolished. If the Privy Council's role is abolished what would be the appropriate appeals body? Should, for example, appeals be made to the High Court or an independent appeals tribunal? Finally should there be a role for an ombudsman to oversee the entire appeals process?

RCVS Disciplinary Committees

18. It is proposed that the current structure of the statutory committees

of the RCVS should be maintained, although there may be changes in the way they operate. The current committees are the Preliminary Investigation Committee and the Disciplinary Committee.

Preliminary Investigation Committee

19. It is proposed that the Committee's composition and powers will be as follows:

- The committee will have a membership of 12, consisting of six MRCVS and six non-veterinarians. A non-veterinarian will act as Chairperson of the Committee and have the casting vote in the case of a tied vote;
- A quorum of the Committee will be 5 so that if required two panels might hear cases simultaneously. Each sub-group of the committee will be constituted 50/50 as described above, and both sub-groups will be chaired by a non-veterinarian;
- Either the President or one of the two Vice-Presidents of the RCVS will sit on the Committee;
- The Committee will have the powers to hear complaints and either dismiss them, make orders as specified in Section 15A, or pass them to the Disciplinary Committee for further investigation and final disposal;
- The Committee will investigate complaints against a veterinary surgeon where the surgeon's competence is alleged to have fallen short of the standards expected by the profession. It will also investigate cases where an individual has been convicted of an offence, or where their behaviour has been such as to bring the profession into disrepute;
- A veterinary surgeon charged with an offence under the VSA will not have the right to appeal against a decision to pass the case to the Disciplinary Committee. However, defendants will have the right to demand a hearing before the Disciplinary Committee should they dispute any penalty imposed by the Preliminary Investigation Committee. Complainants will have the right to appeal to an independent arbitrator/ against a decision of the Committee to dismiss a case, or against any penalty imposed should they feel it to be too lenient.
- The Committee will no longer hear cases of fraudulent entry in the register of veterinary surgeons unless the individual accused of providing fraudulent information disputes the case.

Finally, should the hearings of the Preliminary Investigation Committee be held in public?

Disciplinary Committee

20. It is proposed that the composition of the Disciplinary Committee and its powers will be as follows:

- It will consist of three members, two MRCVS and one non-veterinarian appointed by open competition; the non-veterinarian will be the Chairperson;
- OR
- The Committee will consist of three members, one MRCVS and two non-veterinarians appointed by open competition; the Chairperson to be a

non-veterinarian;

OR

- The Committee will consist of three members all of whom will be non-veterinarians appointed by open competition. They will be assisted by two veterinarians, not members of the Council of the RCVS but appointed by the Council, who will assist the Committee by providing the necessary technical background to cases being investigated.

OR

- The Committee will consist of three members selected from a panel of suitably qualified veterinary surgeons and lay persons appointed by open competition. None of the members of the panel will be members of the RCVS Council. At least one of the Committee members will be a veterinary surgeon. (This alternative is based on the new model adopted by the GMC and due to come into effect in 2004).

Your views are sought on these alternatives.

21. The Committee will examine all cases passed to it by the Preliminary Investigation Committee and decide whether the allegations of failure to maintain professional standards are justified, or whether an individual by their actions have brought the profession into disrepute;

22. A veterinary surgeon found to have failed to maintain the standards expected, or to have brought the profession into disrepute, will be subject to a range of sanctions to reflect the severity of the offence as outlined in Section 15B. The ultimate sanction will be removal from the list of registered veterinary surgeons for a minimum of 1 year and a maximum of 3 years before reinstatement can be considered;

23. Both the veterinary surgeon concerned and the complainant(s) will have the right to be represented before the Committee and to give evidence;

24. There will be an appeals procedure both for the veterinary surgeon and the complainant;

25. We would welcome your views on whether appeals should be heard by the Privy Council, judicial tribunal, or ombudsman. The appeal body's decision will be final.

Registration

26. Under the current registration requirements of the VSA a graduate of a recognised UK veterinary school, an EU/EEA national who is the holder of a recognised European veterinary qualification, a graduate of an overseas school recognised by the RCVS, or a graduate of an overseas veterinary school who has passed the RCVS statutory membership examination, are entitled to be registered to practice veterinary surgery within the UK. They may set up their own practice immediately should they so choose.

27. We would welcome your views as to:

- Whether there should be a period under the direction of an experienced veterinary surgeon before new graduates gain full registration, and if so how long this period should be?
- Should there be any restrictions on what procedures the newly qualified veterinary surgeon can carry out?
- If newly qualified graduates are restricted in the procedures they can carry out who should pay their salaries?
- Do you agree that newly qualified overseas veterinary surgeons should be required to undergo the same period under the direction of a qualified veterinary surgeon?
- Should newly qualified veterinary surgeons be able gain the necessary experience, prior to full registration, in the State Veterinary Service, the Meat Hygiene Service, or other similar official bodies?

28. There is also the issue of the assumed omni-competence of veterinary surgeons. Should veterinary surgeons be licensed to practice on particular species of animal or in a particular area of the profession, or should they, as now, be permitted to practice veterinary surgery/medicine on all species of animals and all areas without any further specific training? Your views on this issue would be welcome.

29. There is some concern, within the profession, that veterinary surgeons can be identified, through the register, by animal rights extremists. The current Act requires the RCVS to print and publish the register, which contains names and addresses. As it stands, the legislation (Data Protection Act and the VSA) does not give a member the right to request his or her details to be excluded. Views would, therefore, be welcome on whether the modernised legislation should include a clause for veterinary surgeons working in, for example, laboratory animal science, to have the right to request their personal details to be omitted from the published register.

Accreditation

30. It is proposed that the RCVS continue to supervise veterinary training in the UK, provide accreditation for UK veterinary schools and approve courses of study and examinations. It is also proposed that the RCVS continue to provide accreditation for qualifications obtained in countries outside the EU.

31. The issue of the recognition of EU qualifications is still under discussion in Brussels as part of the overall discussion on the proposed EU Directive on recognition of professional qualifications (COM (2002) 119 final). Currently the profession is governed by EU Council Directives 78/1026/EEC and 78/1027/EEC. These establish the basic qualifications required to practice veterinary surgery within the EU and recognise specific qualifications awarded by veterinary schools within the current EU 15 Member States. The final outcome of the discussions on the

Directive will need to be taken into consideration when the modernised VSA is being drawn up.

32. Currently holders of overseas veterinary qualifications not recognised by the RCVS may be registered provided they pass the RCVS's membership examination. It has been suggested that a more appropriate way of judging the competence of foreign vets would be to require them to undergo a period of training prior to being granted registration. An alternative would be to issue them with provisional registration enabling them to work under supervision in an approved evaluation practice, during which time they would be assessed for full registration. During this period language skills could also be assessed. We would welcome your views on whether the current system of assessment by examination should be retained, or attendance at a training course, or a system of provisional registration, be substituted.

Continuing Professional Development

33. It is proposed that registered practising veterinary surgeons should be required to undertake continuing professional training and development as determined by the Council, on advice from the Continuing Professional Development Committee established for that purpose OR the Education Committee. Our initial view is that it will be incumbent on each practising veterinary surgeon to provide to the registrar of the RCVS documentary evidence of the training undertaken every year OR 3 years OR 5 years. An alternative would be for the veterinary surgeon to be required to keep records of CPD undertaken, and to produce those records on demand. If it appears to the registrar that a practising veterinary surgeon has failed to comply with the continuing training requirements the veterinary surgeon in question will be given such time as previously determined by the Council, to make good the training deficit. Should the veterinary surgeon fail to complete the required training within the given period, the registrar may/will remove the veterinary surgeon's name from the Register until such time as the training has been completed. Provision will be made for an appeal against the registrar's decision. We would welcome your views on these proposals.

34. An alternative to the above proposals on CPD would be to introduce a requirement for all practising veterinary surgeons to have a licence to practise and to undergo revalidation on a regular basis, to demonstrate that they remain up-to-date and fit to practise. The General Medical Council will be introducing such a requirement. From 1 January 2005 all doctors will require a license to practise if they wish to practise as a doctor (including prescribing and signing statutory certificates). These will be granted to all doctors on the GMC Register at the end of 2004 and will indicate that the GMC believe they are properly qualified and have to agree to take part in periodic revalidation. The GMC are proposing that revalidation would occur at 5 yearly intervals. Doctors who practise within an established health care organisation, e.g. the NHS, will undergo an annual appraisal system, and provided they participate fully

in the appraisal process, they will receive revalidation without having to collect any additional information. Doctors outside an established health care organisation will have to demonstrate to the GMC from time to time that they remain competent and up-to-date in their particular field of medicine. In order to do this evidence will need to be presented that the individual is adopting the principles of good medical practise. This will include evidence of CPD, but the process has not yet been spelled out in detail.

35. We are seeking views on whether the veterinary profession should adopt similar requirements, and if so how it would be implemented. Clearly the annual appraisal route will not be as easy to implement as for the medical profession where the majority of doctors work in the NHS. What would be appropriate ways for veterinary surgeons to demonstrate their competence? There is also the question as to how frequently revalidation should occur. Is five years an appropriate interval, or should it be longer or shorter? There is also an issue of how vets from countries that did not have a revalidation system would be dealt with. This is a complex issue and we would hope for a range of views.

Definition of 'Veterinary Surgery' within the VSA

36. The VSA defines 'veterinary surgery' as meaning "the art and science of veterinary surgery and medicine and, without prejudice to the generality of the foregoing, shall be taken to include -

- (a) the diagnosis of disease in, and injuries to, animals including tests performed on animals for diagnostic purposes;
- (b) the giving of advice based upon such diagnosis;
- (c) the medical or surgical treatment of animals; and
- (d) the performance of surgical operations on animals."

We would welcome views on whether this definition needs to be modified and, if so, in what way.

Further Deregulation of Procedures Designated as Acts of Veterinary Surgery

37. It has been increasingly recognised in recent years that there are a number of procedures defined as 'acts of veterinary surgery' that could be safely derogated to fully trained and qualified paraprofessionals, including veterinary nurses.

38. Several procedures, e.g. ultrasound scanning of cattle, equine and cattle AI, equine dental treatment, etc., have been, or are being, deregulated. Others that have been deregulated to a certain extent may require further deregulation or amendment. These include:

- Physiotherapy, osteopathy and chiropractic treatments;
- Vaccination of poultry;
- Sampling of faeces;
- Epidural anaesthesia for, for example, embryo collection and transfer;

39. A number of further procedures have been suggested for deregulation, including Tuberculin testing of cattle (which is currently the subject of a separate consultation). However, there may be other procedures suitable for deregulation, and we would welcome your views on the procedures listed here and possible additions to the list.

Administration of Veterinary Nurses and Veterinary Paraprofessionals

40. Since 1966 there have been major changes in the way veterinary services are delivered. One of the most significant of these changes has been the growth of the veterinary nursing profession. There are now nearly 5000 qualified veterinary nurses listed with the RCVS, while approximately a further 4000 have obtained the necessary qualifications awarded by the RCVS but are not currently listed. Numbers are expected to continue to grow as suitably qualified veterinary nurses may now work with any animal species and not just companion animals. However, the profession is currently governed by the limited powers contained in Schedule 3 of the VSA. At issue is the future governance of the veterinary nursing profession. Should veterinary nurses be regulated by the RCVS with new powers provided to regulate their conduct, or alternatively should veterinary nursing become an independent regulated profession? We would welcome your views on this issue.

41. As discussed above, in recent years there has been a significant increase in the number of areas of veterinary treatment where work is being undertaken by paraprofessionals. This reflects partly developments in the range of equipment available for diagnosis of conditions in, in particular, farm and large animals (e.g. pregnancy of cattle), and partly the improved skill levels and experience of the paraprofessionals. Currently paraprofessionals undertaking acts of veterinary surgery are regulated by Exemption Orders to the VSA. These identify the necessary training and qualifications required by non-veterinarians before they may undertake procedures subject to Exemption Orders. The necessary training courses and examinations are approved by Defra in consultation with the RCVS, and Defra issues Certificates of Exemption to those who complete the training and pass the approved examination. It is proposed that this procedure continue. At present the numbers of paraprofessionals covered by Exemption Orders are small, although it is anticipated that numbers will increase. Issues on which we would welcome views are: (i) should there be registration of paraprofessionals over and above the issuing of Certificates of Exemption, and if so by which body; (ii) should there be a body responsible for maintaining standards of professional conduct; and (iii) should there be provision for re-accreditation?

42. It has been proposed that other groups, in particular Senior/Animal Health Officers of the State Veterinary Service, should receive specific recognition for the training they undergo. This would be along the lines of that granted to Veterinary Nurses once they had completed a recognised training programme. Training programmes would be drawn up by Defra in

consultation with the RCVS. We would welcome your views on this proposal.

Other Issues

43. Other issues which have been suggested as requiring consideration during the drafting of a new Act include: (1) the issue of the regulation of the delivery of veterinary services; (2) the regulation and/or registration of veterinary practices; and (3) the enforcement of the prohibition on the carrying out of acts of veterinary surgery by those not covered by an exemption. We seek your views on the need for all or any such provisions and who should be responsible for enforcing such provisions.

Partial Regulatory Impact Assessment

44. Enclosed, at Appendix B, is a Partial Regulatory Impact Assessment (RIA). Under the Government's Better Regulation initiative an RIA must be prepared assessing the costs and benefits of compliance with any new legislation. We are, obviously, at the very early stages of the legislative process. However, we would be interested to receive views on the consequences for businesses, in terms of both additional costs and benefits, on any of the proposals set out in this consultation / RIA, or indeed any proposals you may have for change.

45. Information on specific businesses will not be identified in the RIA, which will be updated and amended as we progress with the modernisation of the Act, following the consultation exercise and will reflect the comments received. The purpose of the RIA is to ensure that all potential consequences of the new legislation have been fully considered before Ministers agree to introduce them. I would welcome your comments on the RIA.

The Consultation Process

46. In this document we have laid out broad proposals for reform and modernisation of the Veterinary Surgeons Act. Individuals and organisations are invited to submit their comments to Defra on any of the issues dealt with in this document, and in particular those areas where we have specifically sought your views on important matters related to that reform. We would also welcome any other views you may have on reforming the Act. We would be grateful to receive your comments by 17 December 2003. These should be addressed to:-

Paul McDonald
VSA Team
Department for Environment, Food and Rural Affairs
Area 605
1A Page Street
London
SW1P 4PQ

47. If you would prefer to submit your response electronically the fax number is 020 7904 6962. Alternatively you may respond by e-mail to: Paul.A.McDonald@defra.gsi.gov.uk. Attachments to e-mails should be in Microsoft Word only please. When responding please indicate whether you are replying on behalf of an organisation or as an individual.

48. Further copies of this document are available from the above address. Alternatively you are welcome to make photocopies.

49. In line with other consultations, and in order to inform public debate on issues raised, Defra intends that all comments received will be made available at the end of the consultation period, unless you specifically state that you wish part or all of your response to be kept confidential.

50. Responses will be placed in the Departmental Library at Nobel House, 17 Smith Square, London, SW1P 3JR (telephone 020 7238 6575). On request the Library will supply copies of the consultation responses to personal callers or those requesting them by telephone. If you wish to obtain a copy of the responses you should be aware that an administrative charge would be made to cover the costs of copying and postage. To avoid unnecessary delays for those calling at the Library in person, it is requested that you give the Library at least 24 hours notice of your requirements.

51. This document is being issued by Defra to stakeholders in England, Wales, Scotland and Northern Ireland. If you are aware of any organisations or individuals who might be interested in receiving this document, please let us know and we will arrange for a copy to be sent. If you have any questions relating to this consultation please contact Mr McDonald, at the address in paragraph 46, or telephone him on 020 7904 6588, or email him (Paul.A.McDonald@defra.gsi.gov.uk).

Yours faithfully
Tony Hughes
Animal Welfare Division

LETTER FROM DR TOM LONSDALE

23 October 2003

Paul McDonald
VSA Team
Department for Environment, Food and Rural Affairs
Area 605
1A Page Street
London SW1P 4PQ

Dear Mr McDonald,

MODERNISATION OF THE VETERINARY SURGEONS ACT 1966

Since 1991 a group of concerned Australian veterinary surgeons have been campaigning against the perceived scientific and consumer fraud perpetrated by the veterinary profession acting with and on behalf of the artificial pet food industry. http://www.rawmeatybones.com/No_3128.html

In 1997 the matter was brought formally to the attention of the Royal College of Veterinary Surgeons (RCVS).
<http://www.rawmeatybones.com/VetResearch.html>

Every year since 1997 I have stood as a candidate in RCVS Council elections. <http://www.rawmeatybones.com/elections.html> My election campaigns have focussed on the pet food scandal and each year I have polled about 10% of the votes cast. (From 1997 until his death in 2002 Mr Oliver Graham-Jones FRCVS, himself a long-serving former RCVS Councillor, provided the nomination.)

Repeated calls for a full and independent committee of enquiry, commissioned by the RCVS, have been met by blank refusal (correspondence on file).

It is my contention that members of the Council of the RCVS, whether individually or jointly, have protected, even perpetrated, major scientific and consumer fraud. That before any meaningful review of the Veterinary Surgeons Act can be accomplished there needs to be a high-level official enquiry.

I shall be pleased to supply supporting information as you may require.

Please advise how these allegations of serious corruption can be fully aired and what further steps need to be taken to ensure all those in positions of responsibility are fully briefed.

Thank you for your consideration.

Yours sincerely,

Tom Lonsdale
Cc Interested parties

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The Raw Meaty Bones Newsletter is published by:

Tom Lonsdale
Rivetco P/L
PO Box 6096
Windsor Delivery Centre
NSW 2756
Australia

Phone: +61 2 4574 0537

Fax: +61 2 4574 0538

Email: rivetco@rawmeatybones.com

Web: <http://www.rawmeatybones.com>

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