Purpose

This document explains the need for facilities to demonstrate compliance with the *Minimum Standards for Veterinary Facilities in Ontario* (the “Minimum Standards”), as well as the procedures of the College with respect to the accreditation of facilities. It outlines the process of applying for a Certificate of Accreditation as well as the process that the College follows after a facility has been inspected and before a certificate is issued.

Scope

This document is relevant to members who currently operate or are planning to open a veterinary facility in Ontario.

Background

In Ontario, veterinarians must be licensed and the facilities in which they practice must be accredited by the College of Veterinarians of Ontario. In order to apply for a Certificate of Accreditation, a person must be a member of the College who holds a general or restricted licence (the conditions on which are in keeping with the operation of a facility), and he/she must undertake to be responsible for the facility.

Facilities must meet all of the requirements contained in the Minimum Standards in order to receive a certificate of accreditation. On inspection, if any item is found not in compliance, the
The Minimum Standards are created and revised by the profession at large in order to assure the public that veterinary facilities contain the essential equipment and resources required for the provision of safe, quality veterinary services. As a result, the Accreditation Committee grants exemptions rarely and only when it deems that there is a strong public-interest reason to do so.

The Accreditation Process

Application for Facility Name

A Facility Director must apply for approval of a facility name before applying for an inspection for a new facility. The Registrar approves a name that meets the requirements set out in Ont. Reg. 1093 (see below). The Registrar may refer name requests that do not comply with the naming rules outlined in O.Reg.1093 to the Accreditation Committee for consideration.

Ontario Regulation 1093
Names must be consistent with Part IV, section 41 of O.Reg.1093 and not be easily confused with other similar facility names or professional corporations. The rules for the naming of the facility indicate that the name shall contain:

(a) a geographical reference appropriate to the location of the facility or the surname of a member who is or was associated with the practice;
(b) the word “animal”, “pet” or “veterinary” except, (i) if the practice in or from the facility is restricted to one particular species, and,
(c) an appropriate term as indicated in the table below:

<table>
<thead>
<tr>
<th>Class of Veterinary Facility</th>
<th>Appropriate Terms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Companion Animal Hospital</td>
<td>Clinic, Hospital or Services</td>
</tr>
<tr>
<td>Companion Animal Office</td>
<td>Office or Services</td>
</tr>
<tr>
<td>Companion Animal Mobile Office</td>
<td>Mobile Office or Mobile Services</td>
</tr>
<tr>
<td>Companion Animal Mobile</td>
<td>Mobile, Mobile Services or House Call Services</td>
</tr>
<tr>
<td>Remote Area Companion Animal Mobile</td>
<td>Remote Mobile or Remote Mobile Services</td>
</tr>
<tr>
<td>Companion Animal Emergency Clinic</td>
<td>Emergency Clinic or Emergency Hospital</td>
</tr>
<tr>
<td>Companion Animal Spay-neuter Clinic</td>
<td>Spay-neuter Clinic</td>
</tr>
<tr>
<td>Food-producing Animal Hospital</td>
<td>Clinic, Hospital or Services</td>
</tr>
<tr>
<td>Food-producing Animal Mobile</td>
<td>Mobile, Services or Mobile Services</td>
</tr>
<tr>
<td>Equine Clinic</td>
<td>Clinic, Hospital or Services</td>
</tr>
<tr>
<td>Equine Mobile</td>
<td>Mobile, Services or Mobile Services</td>
</tr>
<tr>
<td>Emergency Equine Mobile</td>
<td>Emergency Mobile, Emergency Services or Emergency Mobile Services</td>
</tr>
<tr>
<td>Poultry Service</td>
<td>Clinic or Services</td>
</tr>
<tr>
<td>Specialty Animal Hospital</td>
<td>Clinic, Hospital or Services</td>
</tr>
</tbody>
</table>
In addition to the words required above, a name may contain any additional words to convey information about the veterinary facility that,

a) Are factual, accurate and verifiable;

b) Will not lead the public to confuse the facility with another facility;

c) Will not mislead the public as to the nature of the services provided at the facility; or

d) Could not reasonably be regarded by members as likely to demean the integrity or dignity of the profession or to bring the profession into disrepute.

**Facility Name Approval Process**

Facility Director applies for approval of a Facility Name

- Name Declined by Registrar
  - Re-apply for a different facility name
- Name Approved by Registrar
  - Request Accreditation Committee review application
  - Facility Director has 6 months to arrange for inspection to become accredited prior to opening practice

Name Declined by Accreditation Committee, Facility Director to re-apply for a different facility name

Name Approved by Accreditation Committee, Facility Director to apply for inspection

**Inspections**

Facilities must meet the *Minimum Standards for Veterinary Facilities in Ontario (Minimum Standards)*. To ensure that compliance is established and maintained, the College inspects every facility prior to its opening, after a facility’s relocation and after the facility’s sale has been finalized, before the change of or addition of category and/or prior to the renewal of the facility’s certificate of accreditation.
Inspections are authorized by the Registrar and include a review of all requirements in the relevant Facility Title of the *Minimum Standards*, including the records requirements that are stipulated in Ont. Reg. 1093. New facilities that are inspected on the day of opening, which do not have any records to inspect, are not in full compliance immediately, and therefore are issued a Waiver of Enforcement (see Appendix C) so that they may begin to operate and accumulate records. The inspector returns to inspect records for compliance approximately 90-120 days, after which the certificate is issued. (See *Waivers of Enforcement*, below, for details).

Members are required to maintain the *Minimum Standards* between inspections, and the Facility Director of each facility undertakes to assure the facility maintains all requirements, as stipulated on the application for accreditation. The Registrar may order an inspection of a facility at any time in order under O.Reg.1093 s. 50, to ensure that the facility is operating as required under the requirements of the legislation and/or Minimum Standards.

5-year Inspection Cycles
Ontario Regulation 1093 s.12 specifies that accreditation certificates are valid for a period of 5 years, unless the Accreditation Committee places an earlier expiry date as a condition of the certificate. The College notifies Facility Directors of pending inspections for renewing the accreditation certificate approximately 3 months prior to expiry.

Causes of Earlier Re-inspections
If a practice is sold, or if a facility moves from one location to another, the certificate expires and a re-inspection must take place. Significant renovations (such as the addition of a surgical suite) may also require re-inspection. Inspections may also occur earlier than 5 years after the last inspection if the Committee sets an earlier expiry date or places conditions on the certificate that include periodic re-inspection.

Inspection Outcomes
Inspectors record their findings on site during the inspection and advise the Facility Director of his/her findings. The most common outcome of an inspection is that the facility meets all requirements and a certificate of accreditation is issued or renewed (this is not possible for new facilities; see below under *Waivers of Enforcement*). When all requirements are deemed in compliance the Registrar issues the certificate of accreditation on receipt of the Inspector’s Report in these situations.

If the facility is found to be noncompliant with one or more requirements for accreditation—referred to as “deficiencies” in the Report—then the Facility Director receives a letter with the report and is asked to do one of the following:

a. Correct the deficiencies and provide proof of compliance acceptable to the College within 30 days;

b. Submit a request for exemption(s) to the requirements to the Accreditation Committee, with rationale for why the Committee should consider granting the requests; or

c. A combination of (a) and (b), where some items are corrected and requests for exemption from others are submitted.
If the Facility Director requests exemptions to the Minimum Standards, the Registrar convenes a meeting of the Accreditation Committee as soon as practicable, including by teleconference, in order to consider the request for exemptions in a timely manner.

**New Facilities with Request for Exemptions**
If the Facility Director of a new facility is considering limiting the scope of practice from their facility (i.e. companion animal mobile, limited to palliative and in-home euthanasia), the Facility Director will be required to request exemptions to the Minimum Standards from the Accreditation Committee, and may not open their new facility until the Accreditation Committee has made their decision regarding the requests for exemptions.

**Certificate Expiry Dates**
Should the expiry date of the current certificate of accreditation pass during the process of reinspection when the Committee is involved, the certificate is considered valid until such time as the Committee makes a decision and the member is given a reasonable amount of time to comply and/or respond. The certificate will however expire and the director will not be in a legal position to operate the facility if he/she does not appeal the Committee decision and does not comply within the timeframe stipulated by the Committee. Certificates that expire during the period of appeal are also deemed to be valid until the Health Professions Appeal and Review Board; issues a decision, after which the parties are given a reasonable period of time to comply with that decision.

**Waivers of Enforcement**
In exceptional circumstances, the Registrar will consider issuing a temporary Waiver of Enforcement of the requirement to hold a valid certificate of accreditation in order to operate a veterinary facility. Before a waiver will be issued, however, the Facility Director must sign an Acknowledgement and Undertaking (Appendix B) assuring the College of his or her intent to maintain or meet all standards. Waivers, which may be cancelled by the Registrar at any time, may be issued under circumstances such as:

**New Practices without Records:** The College recognizes that a facility which is inspected prior to opening will not contain medical records. A new practice therefore cannot meet all requirements for accreditation, on opening, and is therefore required to sign an undertaking assuring the College that the Minimum Standards will be maintained despite the absence of a certificate, and the Registrar issues a temporary Waiver of Enforcement of the requirement for a certificate, giving the facility 90-120 days to accumulate medical records for inspection. On receipt of a clean inspection report on these records, the certificate of accreditation is issued.

**New Practices with other Deficiencies Noted:** If other deficiencies are reported on first inspection, the inspector shall advise the Facility Director of the deficiencies and provide the Facility Director with an Acknowledgement and Undertaking; a Waiver might be issued if the deficiencies are minor (if no such waiver is issued, the facility may not open or operate). The Registrar decides whether or not it is reasonable to issue a Waiver of Enforcement or to notify the director that the facility must not open until a certificate of accreditation is issued.
Schedules Prevent Re-inspection Prior to Expiry: If an inspector is not able to attend to a facility to reinspect before the certificate expires, a Waiver of Enforcement may be issued until such time as the inspection takes place and the certificate is subsequently renewed.

The Inspection Process

Facility Director applies for an Accreditation Inspection for:
- New Practice
- Facility Relocation
- Change of Ownership
- Adding a Category
- Renewing a Certificate

If No Deficiencies are noted by the Inspector, Staff prepares Certificate of Accreditation for Registrar’s signature

If Deficiencies are reported by the Inspector, Facility Director receives an Inspection Summary report with a deadline of 30 days

Facility Director provides proof of correction of the deficiencies and the Certificate of Accreditation is issued.

Facility Director submits a written Request for Exemption to the Accreditation Committee

Accreditation Committee Grants Exemption Request & Certificate of Accreditation is Issued

Accreditation Committee Declines Exemption Request

Facility Director provides proof of correction of the deficiencies and the Certificate of Accreditation is issued

Facility Director appeals to HPARB within 30 days of receipt of the Committee’s decision
The Accreditation Committee

The Accreditation Committee receives its authority to make decisions related to the naming of a facility under Part IV, section 41 of O.Reg.1093 and the compliance of a facility with the Minimum Standards, under the Veterinarians Act, ss. 17(5)(c).

Matters of naming and compliance that do not meet the set criteria of the Minimum Standards, are brought to the attention of the Committee by the Registrar and the outcome on such matters are at the discretion of the Committee.

The Accreditation Committee has the authority to direct the Registrar to issue the certificate of accreditation, to refuse to issue a certificate of accreditation, or to put any conditions on a certificate that it deems appropriate—including, for example, the condition that reinspection shall take place in less than 5 years, or that any number of unannounced re-inspections at the facility’s expense shall take place within a specified time frame.

Under the Veterinarians Act section 17(4), the Accreditation Committee has the authority to exempt an applicant or veterinary facility from compliance with any qualifications, requirement or standard for a certificate of accreditation. Exemptions to the standard granted by the Committee, can result in the following:

1) The Committee can grant the exemption with no corresponding restriction placed on the certificate of accreditation of the veterinary facility; and/or

2) The Committee grants the exemption requests and there are terms, limitations and conditions placed on the certificate of accreditation.

Both types of exemption requests are considered to be limitations and will be included on the College’s public directory as a limitation.

Facility Directors are informed of a Committee’s decision in writing inclusive of its reasons.

In its review of a matter, if the Committee has concerns about potential professional misconduct of a licensed member, it can refer the issue(s) to the Registrar for a Registrar’s Investigation. Such a path is parallel to, not instead of, making a decision on the accreditation certificate itself. The Committee must still make an independent decision as to whether to issue the accreditation certificate.

Appeal of Committee Decision

A Facility Director may appeal a decision of the Accreditation Committee after the Committee has made its decision on whether or not, and under what, if any, conditions, the certificate may be issued.

Appeals are made to the Health Professions Appeal and Review Board; the process of appeal is described in the letter that is sent by staff to the Facility Director, who receives the written Decision and Reasons of the Committee at the same time.
Legislative Authority

Veterinarians Act

Authority to Operate
s.15 No person shall establish or operate a veterinary facility except under and in accordance with a certificate of accreditation.

Registrar’s Authority
s. 17 (1) Subject to subsections (2) and (3), the Registrar shall issue or renew a certificate of accreditation upon the application of a member of the College who applies therefor if the applicant and the veterinary facility meet the qualifications, requirements and standards prescribed by the regulations and by the Council for the proposed veterinary facility.
(2) The Registrar shall refuse to issue or renew a certificate of accreditation where, in the opinion of the Registrar, the applicant or the veterinary facility does not meet the qualifications, requirements and standards prescribed by the regulations and by the Council for the proposed veterinary facility.
(3) The Registrar, on his or her own initiative, may refer and on the request of the applicant shall refer the application to the Accreditation Committee for a determination as to whether or not the applicant or the facility or both meet the qualifications, requirements and standards prescribed by the regulations and by the Council for the proposed veterinary facility.

Accreditation Committee’s Authority to Exempt
(4) The Accreditation Committee may exempt an applicant or veterinary facility from compliance with any qualification, requirement or standard for a certificate of accreditation.
(5) The Accreditation Committee shall determine the eligibility of applicants and facilities for certificates of accreditation that are referred to the Accreditation Committee under subsection (3) and, after considering an application for the issuance or renewal of a certificate of accreditation, may direct the Registrar,
   (a) to issue or to renew the certificate of accreditation;
   (b) to refuse to issue or to renew the certificate of accreditation; or
   (c) to issue or to renew the certificate of accreditation subject to the conditions and limitations the Accreditation Committee specifies.  R.S.O. 1990, c. V.3, s. 17.

Regulation 1093

Application for Certificate
s. 10. The requirements for the issuing or renewing of any certificate of accreditation are that the veterinary facility meets the standards established under subsection 8 (1) of the Act for the class of certificate of accreditation for which application is made and the applicant,
(a) submits to the College an application in a form provided by the Registrar;
(b) is the owner of, or a partner in, the practice conducted on or from the facility that is the subject of application, or submits to the College the written authority of the owners or partners of that practice to provide the undertaking required under clause (c);
(c) provides a written undertaking to be responsible for the facility on a form provided by the Registrar;
(d) holds a general licence or a restricted licence the conditions of which are consistent with the conditions of the certificate of accreditation; and (e) pays the inspection fee set out in the Schedule.

Expiration of Certificate

s. 12 (1) A certificate of accreditation expires five years after it is issued or renewed unless it expires at an earlier date under subsection (2) or unless the Accreditation Committee issued or renewed the certificate on condition that it expire at an earlier date.

(2) A certificate of accreditation expires before the period described in subsection (1) if, (a) a stationary veterinary facility, or a stationary element of a facility with a mobile element, is relocated; or (b) no member meets the requirements in clauses 10 (a), (b), (c) and (d) in respect of the veterinary facility.

Inspections

50. (1) The Registrar shall cause, and the members shall permit, the inspection of facilities and of the records kept by members in connection with the practice of veterinary medicine, in order to determine if, (a) the facility is being operated under and in accordance with a certificate of accreditation; (b) the facility and the applicant or holder of a certificate of accreditation meet the qualifications and requirements for a certificate of accreditation; (c) the records in respect of the practice of veterinary medicine are being kept as required; and (d) the veterinary medicine being practised is generally in accordance with the standards of practice of the profession. R.R.O. 1990, Reg. 1093, s. 50 (1).
ACKNOWLEDGEMENT AND UNDERTAKING

MADE TO THE COLLEGE OF VETERINARIANS OF ONTARIO

BY DR. SURNAME

I, DR. SURNAME, acknowledge that:

1) My veterinary facility named **FACILITY NAME** is inspected in respect of the category(ies) for a **FACILITY TYPE**.

2) I am responsible for the operation of the above-named facility, ensuring that the facility meets all Minimum Standards for Veterinary Facilities in Ontario and fully complies with the *Veterinarians Act* and Regulation 1093.

3) I am legally obliged by section 15 of the *Veterinarians Act* to have a certificate of accreditation to operate this facility. The College temporarily waives enforcement of this requirement in order for a medical records review to be conducted at this new facility.

4) I will make myself available and will fully cooperate when the accreditation inspector returns in 90-120 days to conduct the medical records review.

5) If the medical records review does not take place within 6 months of issuance of the waiver of enforcement, the waiver of enforcement will be terminated and I will be required to re-apply for accreditation and inspection of this facility.

**I HEREBY UNDERTAKE** to immediately cease to operate the facility if I am advised by the College that the temporary waiver of enforcement has been terminated for any reason. I acknowledge that it is professional misconduct to breach an undertaking with the College.

Date: _____________________         ________________________________

��況: DVM, DVM
Appendix C

COLLEGE OF VETERINARIANS OF ONTARIO

TEMPORARY WAIVER OF ENFORCEMENT

For ABC ANIMAL HOSPITAL
AND DR. Surname

The COLLEGE OF VETERINARIANS OF ONTARIO through its Registrar temporarily agrees not to enforce the requirement for a Certificate of Accreditation for the Facility Type. This waiver is given in accordance with the terms of the Acknowledgement and Undertaking signed by DR. Surname on date indicated below. This waiver expires upon the earliest of any of the following occurrences: 1) upon issuance of a Certificate of Accreditation; 2) if the facility has not operated within 6 months of issuance of this waiver; or 3), upon termination by the College.

DATE:_______________________              ________________________

Registrar & CEO

College publications contain practice parameters and standards which should be considered by all Ontario veterinarians in the care of their patients and in the practice of the profession. College publications are developed in consultation with the profession and describe current professional expectations. It is important to note that these College publications may be used by the College or other bodies in determining whether appropriate standards of practice and professional responsibilities have been maintained. The College encourages you to refer to the website (www.cvo.org) to ensure you are referring to the most recent version of any document.