



# INFORMATION SHEET

## A Guide to the Accreditation Process

### **Purpose**

This document explains the need for facilities to demonstrate compliance with the Act, the regulations and the standards established by the Council under section 8 of the Act 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 a facility director must undertake to be responsible for the facility.

Facilities must meet all of the requirements contained in the Act, the regulations and the standards established by the Council under section 8 of the Act in order to receive a certificate of accreditation. On inspection, if any requirement is found not in compliance, the facility director is given time to correct the deficiency or to submit a request for an exemption to the Accreditation Committee.

The standards for a Certificate of Accreditation 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.

### **Authority of the Accreditation Committee**

The Accreditation Committee is a statutory committee of the College with the primary responsibility for deciding upon and directing the issuance of Certificates of Accreditation for those facilities that are referred to it by the Registrar. The Accreditation Committee may not pass a regulation, by-law or standard.

The Accreditation Committee:

- May exempt an applicant or veterinary facility from compliance with any qualification, requirement or standard for a Certificate of Accreditation
- Determines the eligibility of applicants and facilities for Certificates of Accreditation that have been referred to the committee and after considering application for issuance or renewal of the Certificate of Accreditation, may direct Registrar:
  - To issue or to renew the Certificate of Accreditation
  - To refuse to issue or to renew the Certificate of Accreditation
  - To issue or to renew the Certificate of Accreditation subject to the conditions and limitations the Accreditation Committee specifies
- Reviews existing policy and considers new policy items, as directed by Council, and makes recommendations for changes or additions to/updates of the standards for a Certificate of Accreditation
- Shall appoint a time for, give notice of and hold a hearing to determine the allegations in respect of a Certificate of Accreditation
- Make referral to the Registrar over concerns about potential professional misconduct.

### **Appeal of Accreditation Committee Decision**

If the facility director is not satisfied with a decision of the Accreditation Committee, then they have 30 days from receipt of the decision to file an appeal with the Health Professions Appeal and Review Board (HPARB). HPARB is an independent tribunal established by the provincial government whose function is to review decisions of statutory committees of all the regulated health professions in Ontario.

The powers of HPARB regarding certificates of accreditation are as follows:

- Confirm the proposed decision of the Accreditation Committee;
- Require the Accreditation Committee to direct the Registrar to issue or renew a certificate of accreditation for the appropriate class of veterinary facility; or
- Refer the matter back to the Accreditation Committee for further consideration and the Board may make recommendations.

## **Role of the Facility Director**

All accredited veterinary facilities are under the oversight of a licensed veterinarian who is the facility director. Facility directors are responsible for ensuring that veterinary facilities are operated in accordance with the facility standards set by the College Council.

The facility director may be an owner of the veterinary facility or a partner in the practice conducted in or from the facility, or a licensed veterinarian designated by the owner(s) or partner(s). The facility director must be engaged in the practice of veterinary medicine conducted in or from the facility.

The [Policy Statement – Facility Director – Accreditation](#) has been developed to clarify the obligations and responsibilities of a facility director.

## **Responsibilities of the Holder of a Certificate of Accreditation**

The holder of a certificate of accreditation is the owner(s) of the veterinary facility or the partners in the practice conducted in or from the facility.

The holder of a certificate of accreditation must ensure the certificate of accreditation is posted visibly in the veterinary facility; or in the case of a mobile facility, makes the certificate of accreditation available for review upon request.

The holder of a certificate of accreditation is required to immediately notify the College, in writing, if any of the following events occur:

1. A change to the name of the veterinary facility.
2. A change in the type of species treated in or from the facility.
3. A change in the scope of veterinary services offered in or from the facility.
4. The relocation of the veterinary facility or of a stationary element of a facility with a mobile element.
5. A change in the identity of the facility director.
6. The facility no longer has any licensed veterinarian who would satisfy the requirements of a facility director as set out in paragraph 3 of subsection 11 (2) of Regulation 1093.

The College expects that the facility director will assist the holder of the certificate of accreditation in fulfilling these responsibilities.

## **The Accreditation Process**

### **The Application Process**

All applications related to facility accreditation are available by logging into the College's [Professional Practice Portal](#).

### **Facility Names**

As of July 1, 2022, previous facility naming rules are revoked and an owner(s) of a facility is not required to meet the prescriptive terms for facility naming that were set out in the previous regulations.

This means that owners of accredited veterinary facilities can name their facility as they wish if it is in accordance with the new regulatory language related to advertising which is outlined in the [Professional Practice Standard - Advertising](#). This includes, among other things, that the information is factual, accurate and verifiable, and must not reasonably be regarded by members as likely to demean the integrity or dignity of the profession or to bring the profession into disrepute.

Any facility using the term “emergency” in its name must have met the appropriate accreditation standards.

Owners of veterinary facilities are still required to inform the College of the name of their facility by submitting it in the Professional Practice Portal. This facility name will appear on the Public Register. When owners of a facility submit a change to the name of a current facility, they are confirming that the previous name will cease to exist to prevent confusion to the public.

## **Inspections**

Facilities must meet all of the requirements contained in the Act, the regulations and the standards established by the Council under section 8 of the Act in order to receive a certificate of accreditation. To ensure that compliance is established and maintained, the College inspects every facility prior to its opening, and prior to the renewal of its certificate of accreditation.

The facility director must be present at the veterinary facility to discuss the outcome of the accreditation inspection with the College’s inspector. Inspections are authorized by the Registrar and include a review of all requirements in the relevant Facility Title of the [Minimum Standards for Veterinary Facilities in Ontario](#), including the records requirements that are stipulated in O. 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 Temporary 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 later, after which the certificate is issued. (See Temporary Waivers of Enforcement below for details).

Members are required to maintain the standards for a Certificate of Accreditation 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 to ensure that the facility is meeting all of the requirements contained in the Act, the regulations and the standards established by the Council under section 8 of the Act.

## **5-year Inspection Cycles**

Ontario Regulation 1093 s.12 (1) 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 the purpose of renewing the accreditation certificate approximately 3 months prior to expiry.

## **Causes of Earlier Re-inspections**

Ontario Regulation 1093 section 12 (2) states that a certificate of accreditation shall expire before the 5-year inspection cycle if any of the following events occurs:

1. A veterinary facility, or a stationary element of a facility with a mobile element is relocated;

2. The veterinary facility no longer has a facility director;
3. The veterinary facility no longer has any members who have made an undertaking;
4. If the Accreditation Committee sets an earlier expiry date or places conditions on the certificate that include periodic re-inspections.

Significant renovations (such as the addition of a surgical suite) may also require re-inspection.

### **Inspection Outcomes**

Inspectors record their findings on site during the inspection and advise the Facility Director of their 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 Temporary 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 or email 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 exemptions 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, the Registrar convenes a meeting of the Accreditation Committee as soon as practicable, in order to consider the request for exemptions in a timely manner.

### **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 facility director is given a reasonable amount of time to comply and/or respond. However, the certificate will expire and the facility director will not be in a legal position to operate the facility if they do not appeal the Committee decision and do not comply within the timeframe stipulated by the Committee. Certificates that expire during the period of appeal are also deemed to be valid until HPARB issues a decision, after which the facility director is given a reasonable period of time to comply with that decision.

### **Temporary Waivers of Enforcement**

In exceptional circumstances, the Registrar will consider issuing a Temporary Waiver of Enforcement (Appendix B) 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 A) assuring the College of their intent to maintain or meet all standards. Temporary Waivers of Enforcement, 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 facility 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 Temporary Waiver might be issued if the Registrar deems it appropriate (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 Temporary Waiver of Enforcement or to notify the facility director that the facility must not open until a certificate of accreditation is issued.

### **Legislative Authority**

Veterinarians Act, R.S.O. 1990, c. V.3, s. 15, 18 and 36

R.R.O 1990, Reg, 1093: General, s. 10-15, 17, and 50 (Veterinarians Act)

# Appendix A

ACKNOWLEDGEMENT AND UNDERTAKING  
MADE TO THE COLLEGE OF VETERINARIANS OF ONTARIO  
BY DR. FACILITY DIRECTOR NAME

I, DR. FACILITY DIRECTOR NAME acknowledge that:

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

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.

- 1) 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.
- 2) I will make myself available and will fully cooperate when the accreditation inspector returns within 90-120 days of this Undertaking to conduct the medical records review.
- 3) If the medical records review does not take place within 90-120 days 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: \_\_\_\_\_,DVM

**COLLEGE OF VETERINARIANS OF ONTARIO**  
**TEMPORARY WAIVER OF ENFORCEMENT**

**For FACILITY NAME**  
**AND FACILITY DIRECTOR NAME**

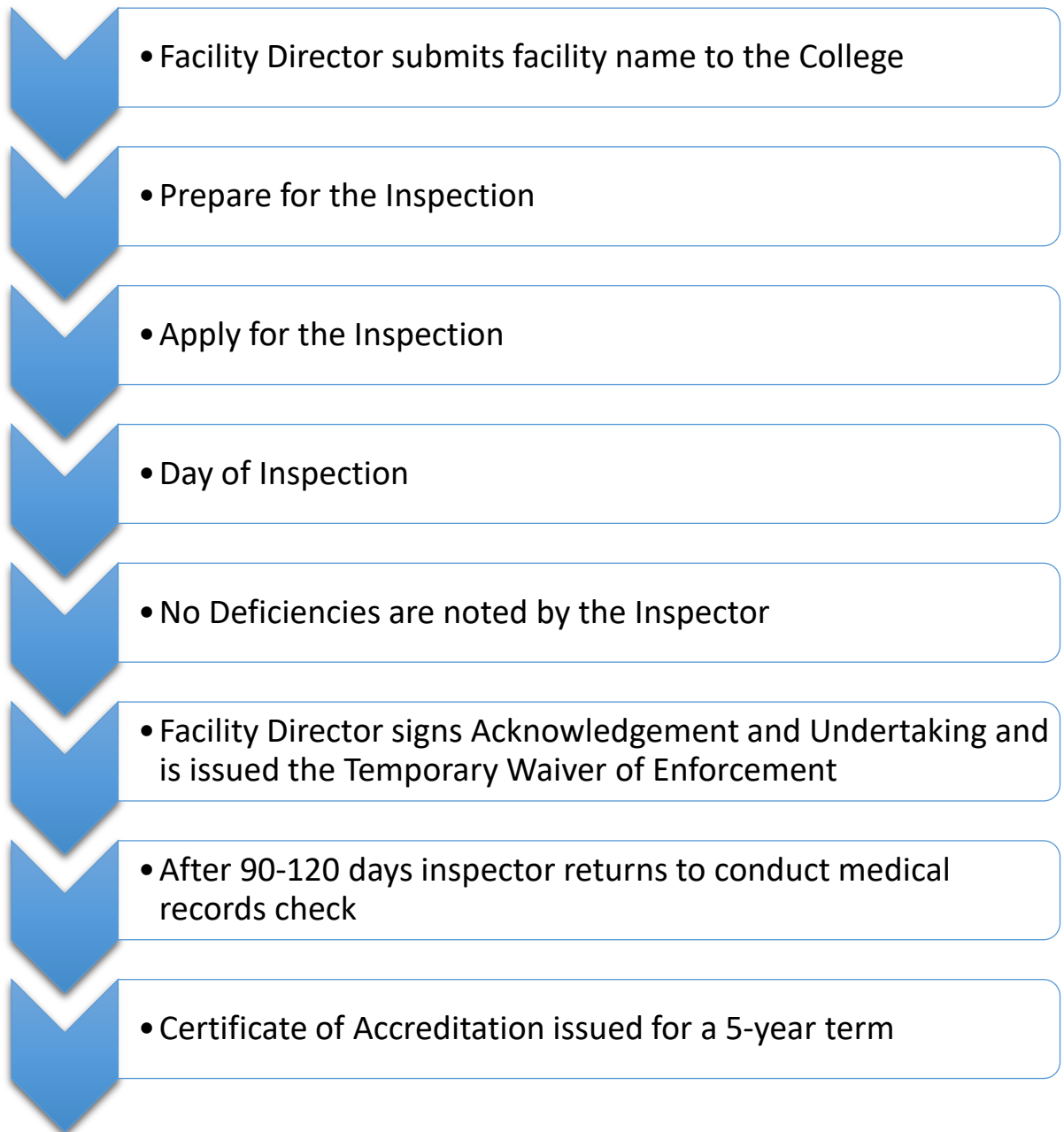
The COLLEGE OF VETERINARIANS OF ONTARIO through its Registrar temporarily agrees not to enforce the requirement for a Certificate of Accreditation for the FACILITY TYPE. This waiver is given in accordance with the terms of the Acknowledgement and Undertaking signed by DR. FACILITY DIRECTOR NAME on date 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 1 year of issuance of this waiver; or 3), upon termination by the College.

DATE: \_\_\_\_\_

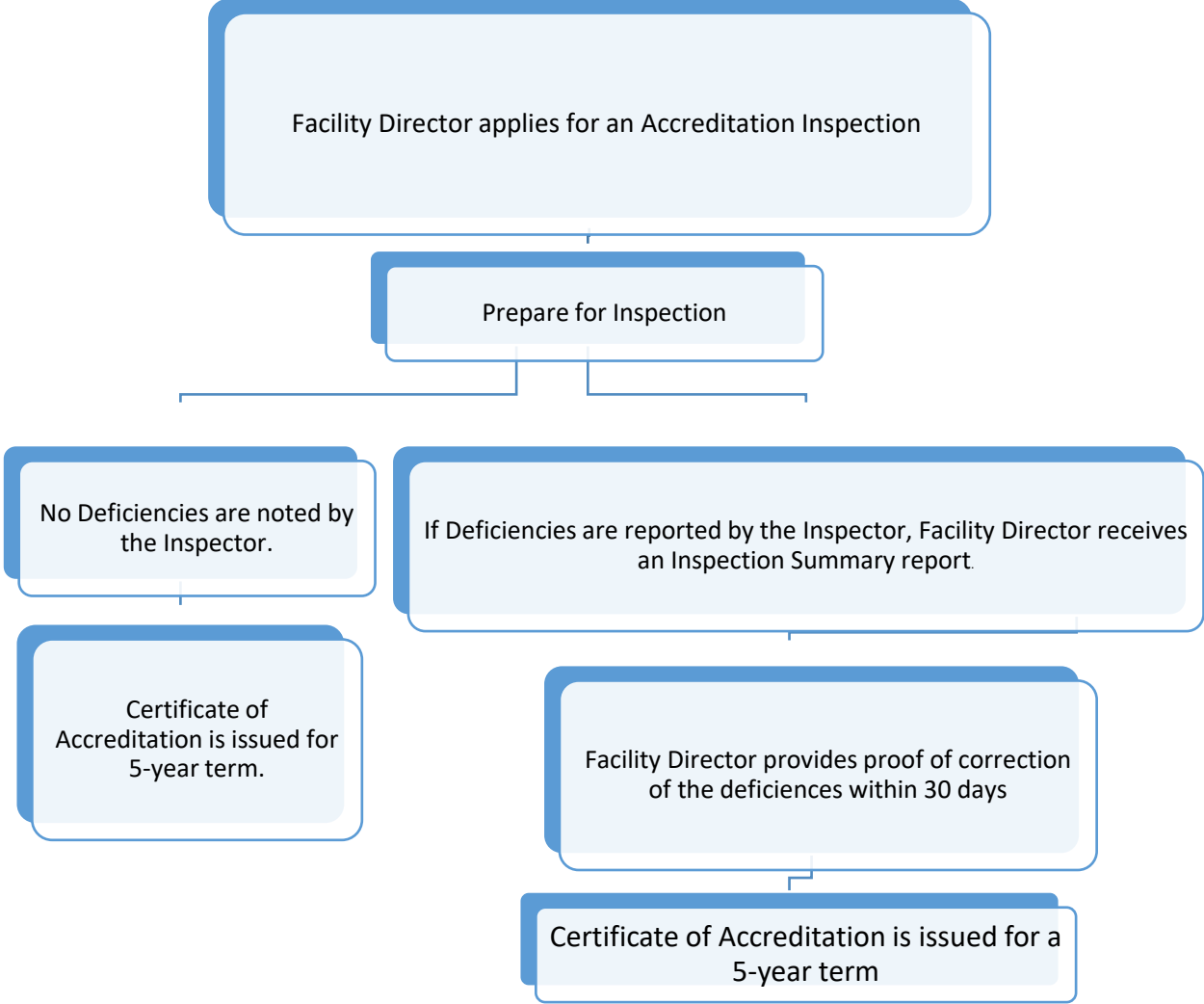
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Registrar & CEO



### The Inspection Process for Opening New Facility



The Inspection Process



## The Inspection Process – with Exemption Requests

