

AGENDA ITEM 5.

TOPIC: Overview of Concept Work Related to the Authorized Activity Model

Overview

The Veterinary Professionals Act, 2024 grants the Transition Council of the College of Veterinary Professionals of Ontario the ability to propose any regulations required to support the implementation of a new statutory framework for the practice of veterinary medicine in Ontario. The development of these regulations remains subject to the approval of the Lieutenant Governor in Council and is supported and overseen by the Ministry of Agriculture, Food, and Agribusiness (OMAFA).

In developing these proposed regulations, OMAFA has advised that it would be beneficial for the Transition Council to focus on the development of regulatory concepts – instead of specific regulatory language – to reflect and support the way that OMAFA conducts its work. Cohesiveness in approach whenever possible between the Transition Council and OMAFA during the regulation development process is beneficial as it will allow for both the public and the profession to experience consistency in the way they receive information. Given this, work related to regulation development has moved forward with a concept-based lens for the Transition Council to review and consider.

Process for Regulation Development

A flow chart has been developed to help illustrate the multi-step process required to instill a new Regulation under the *Veterinary Professionals Act, 2024.* (see below).

General Work of the Transition Council

The Transition Council is now tasked with reviewing each of the draft regulatory concepts and providing direction to College staff on whether the draft concept can be approved for public consultation as presented or amended or whether it requires further review or development.

Work of the Transition Council Related to the Authorized Activity

Model

The regulatory concept related to the authorized activity model is one of the most complex and multi-faceted aspects of the Transition Council's work. Given this, College staff have developed



a slightly modified two-part approach to its presentation to allow for as much information and background to be provided as possible. This includes:

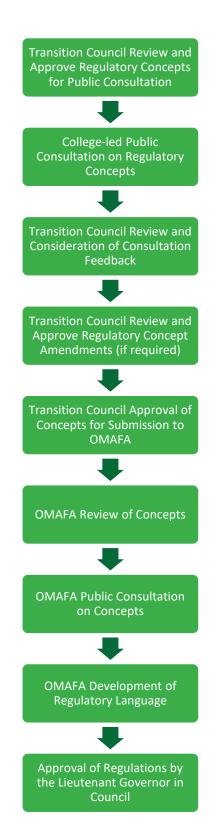
- 1. Multiple Cover Sheets (to outline specific topics and themes within the proposed authorized activity model including their history, proposed direction, associated reasoning, and any applicable specific regulatory language);
- 2. Outline of Specific Legislative Authority (for ease of reference); and
- 3. Draft Concept Language (presented as it will appear during the College's public consultation).

Part One will focus on the authorized activity model as it relates to the scope of practice for both veterinarians and veterinary technicians.

Part Two will focus on the authorized activity model as it relates to the development of regulatory exemptions for other non-veterinary animal care providers and/or activities.

In reviewing these documents, the Transition Council is encouraged to debate, discuss, and question any aspect of the material presented. To aid in these discussions, opportunities will be presented at the end of each specific topic to allow for focused feedback. Then, once all specific topics have been presented and discussed, Transition Council will also have the opportunity to review the draft concept language as a whole for its potential approval.







AGENDA ITEM 5.1.

<u>TOPIC:</u> Overarching Framework of the Authorized Activities Model for Veterinarians and Veterinary Technicians

Overview

Section 9 of the *Veterinary Professionals Act, 2024* establishes the legislative authority for the development of an authorized activity model for the practice of veterinary medicine in Ontario. This framework is further supported by Schedule One of the *Act*, where a list of seventeen (17) authorized activities is outlined.

While the *Veterinary Professionals Act, 2024* and Schedule One create the basis for this model, most of the additional detail required for implementation is left to regulation development. Given this, there are several topics where further consideration and comment by the Transition Council is required.

This cover sheet outlines overall recommendations that will apply to all members (veterinarians and veterinary technicians) for inclusion in a regulatory concept on the authorized activity model.

Relevant Sections

An overview of the relevant sections of legislation, regulation, by-law, and policy related to the authorized activity model (both current and future) has been attached to this cover sheet as Appendix "**A**".

History of College Work Related to the Authorized Activity Model

Current Framework

The *Veterinarians Act* and Regulation 1093 currently outline an exclusive scope of practice model for veterinary medicine in Ontario. This means that unless otherwise specifically stated, veterinary medicine may only be performed by a licensed veterinarian or an auxiliary working under their supervision and delegation.

The current framework has served both the people and animals of Ontario well for many years but has not kept pace with the changing realities of the provision animal care within the province.



Inclusion in Legislative Reform

The College's 2018 Concept Paper entitled "Achieving a Modern Approach to the Regulation of Veterinary Medicine in Ontario" contained several recommendations which outlined a proposed shift away from an exclusive scope of practice model in favour of an authorized activity model. This proposed model offered a clearer definition of what veterinary medicine is and laid out a risk-based approach to authorized activities. Activities that posed the greatest risk of harm or potential harm to animals and/or people were proposed to continue to be regulated under the College's oversight. Activities that did not fall within these restrictions were recognized as being within the public domain. This proposed model was designed to assist with clarity for the veterinary profession, the public, and the courts in determining whether a person had engaged in unauthorized practice. In addition, the proposed model acknowledged veterinary medicine as a system that includes defined areas of co-accountability between veterinarians and veterinary technicians as licensed professionals. These recommendations were made after several rounds of consideration and conversation amongst both the College's Working Groups and Legacy Council, including extensive background research and two rounds of public consultation.

The *Veterinary Professionals Act, 2024* reflects these recommendations and the Transition Council is now in the position to develop a proposed regulatory concept related to the authorized activity model.

What Will This Look Like?

The practice of veterinary medicine will continue to be overseen by the College under the *Veterinary Professionals Act, 2024.* Both veterinarians and veterinary technicians will become licensed members of the College under the one profession, two professionals model.

The Veterinary Professionals Act, 2024 will continue to contain a definition of the practice of veterinary medicine. This definition, however, will no longer be exclusive in nature and instead will serve as an overarching illustration of the types of activities that constitute the practice of veterinary medicine. Instead, the list of authorized activities outlined in Schedule One will define what activities can only be performed on animals by members of the College unless otherwise specifically stated.

This means that there will be certain lower risk aspects of the practice of veterinary medicine that will now also exist in the public domain and can be performed by any person without having to hold a licence with the College (such as massage therapy).

Importantly, both members and non-members of the College (such as auxiliaries and non-veterinary animal care providers) will be required to adhere to both the *Veterinary Professionals Act, 2024* and its associated Regulation to perform authorized activities.



Proposed Overarching Recommendations for All Members

It is proposed that a regulatory concept related to the authorized activity model outline that veterinarian members are permitted to perform all authorized activities and to delegate or order all delegable authorized activities, and that veterinary technician members are permitted to perform all delegable authorized activities in one of three ways –through a veterinarian member's delegation, or pursuant to the order of a veterinarian member, or through initiation. It is also proposed that the regulatory concept outline that veterinary technician members are not permitted to sub-delegate the performance of any authorized activity.

(More information on these processes will be provided in subsequent cover sheets).

In addition to this general framework, there are three (3) additional overarching recommendations proposed for inclusion in a regulatory concept related to the authorized activity model. Each of these proposed recommendations has been developed based on extensive research and conversation including guidance obtained from the College's legal team.

1. Authorized Activities to be Performed from an Accredited Facility

The first recommendation proposed for all members is that the practice of authorized activities be required to occur from an accredited facility unless otherwise specifically stated. This recommendation reflects the fundamental importance of the College's accreditation model in serving and protecting the public interest. It is also supported by the definition of accredited facility in the *Veterinary Professionals Act, 2024* which states:

"Veterinary facility" means a building, a vehicle or land, or any combination of them, used or intended to be used as a place in or from which a member carries out authorized activities in the practice of veterinary medicine.

2. Authorized Activities to be Performed in Accordance with Facility Standards Established by the Facility Director

The second recommendation proposed for all members is that the practice of authorized activities be required to occur in accordance with the facility policies established by the Facility Director (who will continue to be a veterinarian member).

For clarity, this means that a Facility Director would be able to determine which aspects of the authorized activity model they wish to employ within their facility including whether they choose to utilize the ability for veterinary technicians to work under initiation or order or only through delegation.



This recommendation is designed to reflect a Facility Director's ultimate oversight of the practice of veterinary medicine within their accredited facility and to allow for flexibility and professional judgment to be used in the development of individual approaches to practice.

3. Members to Only Perform authorized activities within their Sphere of Competence and in Accordance with any Terms, Conditions, and Limitations on their Licence

The third recommendation proposed for all members is that they be required to only perform authorized activities that are within their sphere of competence and in accordance with any terms, conditions, and limitations on their licence. This recommendation is designed to codify the need for professionals to reflect on their own skills, knowledge, and judgement in the delivery of veterinary services and to ensure that members are only performing activities when they are confident that they can do so as safely as possible.

This recommendation also includes the requirement that a veterinarian member be competent to perform any authorized activity that they delegate. This includes delegation to veterinary technician members and non-members of the College (such as auxiliaries). This is designed to ensure that the veterinarian member remains available to perform the authorized activity should the person they delegated to no longer be able to perform it.

Discussion

Transition Council is asked to review these proposed recommendations related to the overarching framework for the authorized activity model and to share any associated questions, comments, or concerns. To aid in this discussion, Transition Council is encouraged to consider the following questions:

- Is there anything unclear or missing in these proposed recommendations?
- Do the proposed recommendations seem logical?
- Do the proposed recommendations raise any concerns?
- Do the proposed recommendations raise any thoughts or considerations related to unintended consequences?

Overarching Framework – Authorized Activities

Relevant Sections of Legislation, Regulation, By-Law, and Policy

Current Framework Under the Veterinarians Act

1 (1) In this Act,

"practice of veterinary medicine" includes the practice of dentistry, obstetrics including ova and embryo transfer, and surgery, in relation to an animal other than a human being; ("exercice de la médecine vétérinaire")

Regulations

7 (1) Subject to the approval of the Lieutenant Governor in Council and with prior review by the Minister, the Council may make regulations with respect to the following matters:

8. Prescribing and governing standards of practice for the profession.

Licence required

11 (1) No person shall engage in the practice of veterinary medicine or hold himself, herself or itself out as engaging in the practice of veterinary medicine unless the person is the holder of a licence. R.S.O. 1990, c. V.3, s. 11 (1).

Future Framework under the Veterinary Professionals Act, 2024

Authorized activities

9 (1) No person shall carry out an authorized activity described in section 1 of Schedule 1 while engaged in the practice of veterinary medicine unless the person is a member.

Limitations

(2) A member may only carry out an authorized activity while engaged in the practice of veterinary medicine and subject to any prescribed conditions or prohibitions and any terms, conditions or limitations imposed on their licence.

Authorized activities ---- non-members

(3) Despite subsection (1), a person who is not a member may, subject to any prescribed conditions or prohibitions, carry out an authorized activity while engaged in the practice of veterinary medicine if,

(a) the regulations permit a person who is not a member to carry out the authorized activity; and

(b) the authorized activity is delegated to that person by a member.

Authorized activities — students

(4) Despite subsections (1) and (3), a student may carry out an authorized activity if the student is doing so while fulfilling the requirements to become a member and the activity is done under the supervision or direction of a veterinarian member.

Risk of harm

11 (1) No person other than a member acting within the scope of the practice of veterinary medicine shall treat an animal, or advise an owner or their representative with respect to an animal's health, in circumstances in which it is reasonably foreseeable that serious bodily harm to an animal or a person may result from the treatment or advice or from an omission from the treatment or advice.

Exceptions

(2) Subsection (1) does not apply with respect to,

(a) any treatment by a person who is acting under the direction of or in collaboration with a member if the treatment is within the scope of the practice of veterinary medicine;

(b) an activity carried out by a person if the activity is an authorized activity that was delegated under subsection 9 (3) to the person by a member;

(c) an activity set out in section 2 of Schedule 1, if the person carrying out the activity is not otherwise prevented to do so under the Act; or

(d) any prescribed treatment, advice, authorized activity or person

Restricted titles

Veterinarian members

12 (1) Unless otherwise permitted by the regulations, no person other than a veterinarian member shall use the title "veterinarian", "veterinary surgeon" or "doctor" or variations, abbreviations, abbreviations of variations or equivalents in another language, while engaged in the practice of veterinary medicine.

Veterinary technician members

(2) Unless otherwise permitted by the regulations, no person other than a veterinary technician member shall use the title "Registered veterinary technician" or "Registered veterinary technologist" or variations, abbreviations, abbreviations of variations or equivalents in another language, while engaged in the practice of veterinary medicine.

93 (1) Subject to the approval of the Lieutenant Governor in Council, the Council may make regulations,

1. prescribing and governing anything in this Act that is described as being prescribed, done in accordance with the regulations, provided for in the regulations or authorized or required by the regulations, other than a matter that this Act describes as being prescribed by the Minister or Lieutenant Governor in Council or provided for in regulations made by the Minister or Lieutenant Governor in Council;

7. with respect to authorized activities,

i. prescribing authorized activities for the purposes of section 9,

ii. limiting or clarifying the authorized activities,

iii. permitting or prohibiting veterinary technician members or classes of veterinarian members from carrying out specified authorized activities and governing the circumstances in which those activities may or shall not be carried out, and

iv. permitting persons who are not members to carry out specified authorized activities and limiting and governing the carrying out of such activities;

8. prescribing exceptions for the purpose of section 10 or 11 or limiting or clarifying the exceptions set out in sections 2 and 3 of Schedule 1;

97 (1) The Council may establish,

(a) standards for veterinary facilities that must be met by an applicant for a certificate of accreditation and maintained by the holder of a certificate of accreditation or other prescribed persons; and

(b) standards for the practice of veterinary medicine that must be met and maintained by members.

Schedule 1 Authorized Activities

Authorized activities

1 The following are authorized activities for the purposes of the Act:

1. Communicating to an individual a diagnosis identifying a disease, disorder, dysfunction or condition as the cause of an animal's signs and presentation in circumstances in which it is reasonably foreseeable that the individual will rely on the diagnosis.

2. Performing a medical assessment to determine the fitness for purpose or soundness of an animal, or group of animals, on which it is reasonably foreseeable that a person or organization will rely on the assessment.

3. Ordering laboratory tests on an animal or on specimens taken from an animal.

- 4. Prescribing a drug.
- 5. Compounding, dispensing or selling a drug.
- 6. Performing a procedure on tissue below the dermis.

7. Performing a procedure below the surface of a mucous membrane.

8. Performing a procedure on or below the surfaces of the teeth, including the scaling of teeth and occlusal equilibration.

9. Performing a procedure on or below the surface of the cornea.

10. Setting, immobilizing or casting a fracture of a bone or a dislocation of a joint or a severed tendon.

11. Administering a substance by injection or inhalation, or monitoring of such injection or inhalation.

12. Moving the joints of the spine beyond the animal's usual physiological range of motion using a fast, low amplitude thrust.

13. Putting an instrument, arm, hand or finger,

- i. beyond the external ear canal,
- ii. beyond the point in the nasal passages where they normally narrow,
- iii. beyond the larynx,
- iv. beyond the opening of the urethra,
- v. beyond the labia majora,
- vi. beyond the anus or cloaca, or
- vii. into any other natural or artificial opening into the body.

14. Applying or ordering the application of a prescribed form of energy.

15. Performing upon an animal any manual procedure for the diagnosis or treatment of pregnancy, sterility or infertility, inclusive of ova and embryo transfer.

16. Performing allergy testing.

17. Such other authorized activities as may be prescribed.

Exceptions

2 The following are exceptions for the purposes of sections 10 and 11 of the Act:

1. Rendering first aid or temporary assistance in an emergency without fee.

2. Treating an animal if the person is the owner of the animal, is a member of the household of the owner of the animal or is employed for general agricultural or domestic work by the owner of the animal.

3. The administration of a treatment plan by a custodian of an animal if the treatment plan is made by a veterinarian member and carried out at the direction of the owner.

4. Taking blood samples.

5. Preventing or treating fish and invertebrate diseases or pests in fish or invertebrates.

6. Such other exceptions as may be prescribed.

Same

3 The following are exceptions for the purposes of section 10 of the Act:

1. Collecting or using semen as part of a business that engages in the artificial insemination of livestock.

2. Implantation of embryos as part of a business that engages in the artificial insemination of livestock.

3. Confirmation of pregnancy in domesticated farm animals of the genus ovis or capra through ultrasound conducted on the surface of the skin.

4. Confirmation of pregnancy in livestock through blood or milk analysis as part of a business.

5. Administration of heat synchronisation injections to livestock as part of a business that engages in the artificial insemination of livestock.

6. Collecting or transporting ova and embryos of animals other than mammals.

7. Non-surgical insemination.

8. Artificial insemination of invertebrates.

9. Such other exceptions as may be prescribed.



AGENDA ITEM 5.2.

TOPIC: Delegation and Non-Delegable Activities

Overview

Section 9 of the *Veterinary Professionals Act, 2024* allows for the development of regulation language that outlines the ways in which both veterinarian and veterinary technician members are permitted to perform authorized activities.

This cover sheet outlines proposed recommendations related to delegation for inclusion in a regulatory concept on the authorized activity model.

Relevant Sections

An overview of the relevant sections of legislation, regulation, by-law, and policy related to delegation (both current and future) has been attached to this cover sheet as Appendix "**A**".

History of College Work Related to the Authorized Activity Model

Current Framework

The *Veterinarians Act* and Regulation 1093 currently outline an exclusive scope of practice model for veterinary medicine. This means that unless otherwise specifically stated, veterinary medicine may only be performed by a licensed veterinarian or an auxiliary working under their supervision and delegation.

The term auxiliary currently encompasses both Registered Veterinary Technicians and other non-members who are working under a veterinarian's supervision and delegation.

A veterinarian is permitted to delegate the performance of veterinary medicine to an auxiliary in one of the following methods:

<u>Immediate Supervision:</u> Where the veterinarian is on the same premises as the auxiliary and can see and hear the auxiliary perform the task.

<u>Direct Supervision:</u> Where the veterinarian is on the same premises as the auxiliary and, although not present to see and hear the task being performed, is accessible to the auxiliary in a timely and appropriate manner.



<u>Indirect Supervision:</u> Where the veterinarian is not on the same premises as the auxiliary while the task is being performed but where the member communicates appropriately with the auxiliary before and after the auxiliary performs the task and is accessible to the auxiliary in a timely and appropriate manner while the task is being performed.

College policy outlines several veterinary tasks that are either non-delegable (such as prescribing, diagnosing, or performing major surgery) or require a certain level of supervision to be delegated (such as dentistry or euthanasia). Outside of these specific circumstances, a veterinarian is permitted to use their professional judgement when determining the level of appropriate supervision.

Inclusion in Legislative Reform

The College's 2018 Concept Paper entitled "Achieving a Modern Approach to the Regulation of Veterinary Medicine in Ontario" contained several specific recommendations related to delegation as part of its overall proposal related to the authorized activity model.

These included:

- Ongoing recognition of a veterinarian's ability to delegate to members and non-members as well their associated professional responsibilities related to supervision and delegation;
- 2. A list of proposed non-delegable activities to be outlined in regulation;
- 3. The ability for veterinary technicians to continue to work under delegation; and
- 4. The inability for veterinary technicians to sub-delegate.

These recommendations were made after several rounds of consideration and conversation amongst both the College's Working Groups and Legacy Council, including extensive background research and two rounds of public consultation.

The *Veterinary Professionals Act, 2024* reflects these recommendations and the Transition Council is now in the position to develop a proposed regulatory concept related to the authorized activity model that contains components pertaining to delegation.

Additional Conversation and Research

Since the *Veterinary Professionals Act, 2024* received Royal Assent in June 2024, the College has undertaken additional research and outreach related to the authorized activity model to ensure currency. This has included ongoing conversations with interested parties including:

- The Ontario Association of Veterinary Technicians;
- The Ontario Veterinary Medical Association;



- Scope of Practice Working Group 2023 version (veterinarian and RVT representation); and
- Group discussions with large animal veterinarians.

This work has also included ongoing jurisdictional scans related to other veterinary models including those developed by the American Association of Veterinary State Boards, the Alberta Veterinary Medical Association, and the Manitoba Veterinary Medical Association, as well other models adopted in other professions such as medicine, nursing, and pharmacy.

What Will This Look Like?

Veterinarian members will continue to be able to delegate to either veterinary technician members or other non-members (i.e. auxiliaries) under one of the three forms of supervision. Veterinarian members will remain professionally responsible for their decision to delegate as well as appropriate supervision.

Non-delegable authorized activities will be specifically outlined in Regulation.

College Council will maintain the ability to set out additional expectations related to delegation and supervision (such as the level of supervision required for a specific activity to be delegated) within College policy.

Veterinary technician members will continue to be able to practice under a veterinarian member's supervision and delegation. There will be additional expectations for a veterinary technician member related to only accepting delegation of activities that they are competent to perform.

Proposed Recommendations Related to Delegation

Within the regulatory concept related to authorized activity model, it is proposed that the following five (5) recommendations pertaining to delegation be incorporated. Each of these recommendations has been developed based on extensive research and conversation including guidance obtained from the College's legal team.

Non-Delegable Activities

It is proposed that a regulatory concept related to the authorized activity model outline the activities (or components of) that are not permitted to be delegated by a veterinarian member.

The authorized activities outlined in this cover sheet are less exhaustive than those contained in the College's 2018 Concept Paper. This shift in approach has occurred due to ongoing development of the authorized activity model since the Concept Paper was introduced, and has been informed by both risk-based analysis and legal advice.



At this time, the following authorized activities are being proposed as non-delegable:

Activity	Reasoning
Communicating to an individual a diagnosis identifying a disease, disorder, dysfunction or condition as the cause of an animal's signs and presentation in circumstances in which it is reasonably foreseeable that the individual will rely on the diagnosis. Except when,	The activity of communicating a diagnosis where an individual may rely on a medical opinion for a course of treatment or action presents an inherent risk of harm or potential harm if not offered or overseen by a veterinarian. Given this, it is proposed this authorized activity be marked as non- delegable in all but three distinct circumstances.
 A veterinary technician member is providing confirmation of a death of an animal or group of animals to an individual; A veterinary technician member is communicating a veterinarian's diagnosis to an individual based on the veterinarian remains readily available to communicate with the individual; or A veterinary technician is providing confirmation of pregnancy in a food producing animal following the application of transabdominal diagnostic ultrasound. 	 The first circumstance is when a veterinary technician member is providing confirmation of a death of an animal(s) or group of animals. This allowance is proposed in recognition of two main factors: 1. Veterinary technicians are often involved in the triaging of animals, especially in emergency situations. In these circumstances, there may arise situations where a veterinary technician member may be presented with an animal(s) or group of animals where it is clear that death has occurred. Allowing for veterinary technician members to communicate this finding would assist in managing client expectations. 2. Auxiliaries, such as veterinary technicians, are already permitted to perform veterinary euthanasia under the indirect supervision of a
	veterinarian. Under the new system, there may also be opportunities for veterinary technician members to perform veterinary euthanasia under the order of a veterinarian member. Permitting veterinary technicians to also communicate the completion of a



	veterinary service that they are already providing would assist in full case management in these circumstances.
	The second circumstance is when a veterinary technician member is communicating a veterinarian's diagnosis to an individual based on a veterinarian's instruction. In these circumstances, the veterinarian would still be responsible for the development of the diagnosis and would be required to be readily available to communicate with the individual. This allowance is proposed in recognition of the need to facilitate a team-based approach to the delivery of veterinary care within accredited facilities whenever possible.
	The third circumstance is when a veterinary technician member provides confirmation of pregnancy in a food producing animal following the application of transabdominal diagnostic ultrasound. This allowance is proposed in recognition of current allowances.
Performing a medical assessment to determine the fitness for purpose or soundness of an animal or group of animals, on which it is reasonably foreseeable that a person or organization will rely on the assessment.	The purpose of this authorized activity is to ensure ongoing regulatory oversight of the medical assessment of an animal(s) or group of animals by veterinarian members related to fitness for sale and/or slaughter. It was also designed to cover any instance where a veterinarian signature would be viewed by the public as an indication that a medical assessment had been completed.
	This authorized activity does not intend nor seek to limit general assessments of an animal's overall fitness and health.
	Given its specific purpose, it is proposed that this authorized activity be marked as non- delegable.



Prescribing a drug.	The ability to safely and accurately prescribe a drug for an animal(s) or group of animals requires an in-depth and distinct set of skills, knowledge, and judgment that present an inherent risk of harm or potential harm if not
	performed by a veterinarian member.
Performing major surgery.	The ability to safely and accurately perform major surgery requires an in-depth and
Major Surgery: means surgery, in which bone, viscera or an extensive area of subcutaneous tissue is exposed.	distinct set of skills, knowledge, and judgment that present an inherent risk of harm or potential harm if not performed by a veterinarian member. The inability to delegate the performance of major surgery does not disallow a veterinarian member from having either a veterinary technician member or other non-member assist them in the performance of surgery, but these roles must be secondary to the veterinarian member's primary performance.
Delegation of Authorized Activities by Veterin	1 21

Delegation of Authorized Activities by Veterinarian Members

It is proposed that a regulatory concept related to the authorized activity model outline how a veterinarian member is permitted to delegate authorized activities including:

- 1. That a veterinarian member is permitted to delegate authorized activities to either a veterinary technician member or another non-member under either immediate, direct, or indirect supervision;
- 2. That a veterinarian member remains professionally responsible for their decision to delegate and the level of supervision provided;
- 3. That a veterinarian member assures themselves that the veterinary technician member or non-member to whom they are delegating can perform the task competently and safely;
- 4. That a veterinarian member only delegates the performance of activities that they themselves are also able to perform competently and safely; and
- 5. That a veterinarian member remains professionally responsible for the conduct of the veterinary technician member or non-member to whom they have delegated and for the suitability and quality of the performance of said activities.

In addition to these overarching recommendations, a veterinarian member would also remain responsible for meeting any additional professional expectations related to delegation as outlined in College policy.



Veterinary Technician Members Working Through a Veterinarian Member's Delegation

In recognition of the one profession, two professionals model that the *Veterinary Professionals Act, 2024* creates, it is proposed that the regulatory concept related to the authorized activity model outline that a veterinary technician member is professionally responsible for only accepting the delegation of authorized activities that they are competent to perform.

No Sub-Delegation by Veterinary Technician Members

It is proposed that a regulatory concept related to the authorized activity model outlines that veterinary technician members are not permitted to sub-delegate the performance of authorized activities. For ease of reference, sub-delegation occurs when a person who accepts a delegation then delegates the act to another person. This is not allowed as the person who is sub-delegating does not have the legal authority to independently perform the activity.

A Note on Clinical Assessment

The proposed approach outlined in this cover sheet is not intended to prevent a veterinary technician member from performing a clinical assessment as this is a separate activity from making or communicating a diagnosis.

For clarity, a clinical assessment is completed by gathering information based on an animal(s) or group of animals' history, symptom presentation, and potential treatment and goals. Clinical assessments are achieved through active interview of a client regarding the animal(s) or group of animals, and objective standardized tests and measurements.

A diagnosis is achieved through confirmation of presenting criteria to determine cause. These criteria are based upon symptoms, signs, test results, and in some cases the initial result of treatment.

Discussion

Transition Council is asked to review these proposed recommendations related to delegation and the authorized activity model and to share any associated questions, comments, or concerns. To aid in this discussion, Transition Council is encouraged to consider the following questions:

- Is there anything unclear or missing in these proposed recommendations?
- Do the proposed recommendations seem logical?
- Do the proposed recommendations raise any concerns?
- Do the proposed recommendations raise any thoughts or considerations related to unintended consequences?

Delegation

Relevant Sections of Legislation, Regulation, By-Law, and Policy

Current Framework Under the Veterinarians Act

1 (1) In this Act,

"practice of veterinary medicine" includes the practice of dentistry, obstetrics including ova and embryo transfer, and surgery, in relation to an animal other than a human being; ("exercice de la médecine vétérinaire")

Regulations

7 (1) Subject to the approval of the Lieutenant Governor in Council and with prior review by the Minister, the Council may make regulations with respect to the following matters:

8. Prescribing and governing standards of practice for the profession.

Licence required

11 (1) No person shall engage in the practice of veterinary medicine or hold himself, herself or itself out as engaging in the practice of veterinary medicine unless the person is the holder of a licence. R.S.O. 1990, c. V.3, s. 11 (1).

Current Framework Under Regulation 1093

"auxiliary" means a person involved in a member's practice of veterinary medicine other than another member; ("auxiliaire")

2. In this Part,

"major surgery" means surgery,

(a) in which bone, viscera or an extensive area of subcutaneous tissue is exposed, or

(b) the failure of which would endanger the life or organ function of the animal.

19. (1) A member is responsible for the conduct of his or her auxiliaries and for the suitability and quality of the performance of their acts. R.R.O. 1990, Reg. 1093, s. 19 (1).

(2) A member is guilty of professional misconduct if an auxiliary of the member does or omits to do anything that, if done or omitted by a member, would constitute professional misconduct. R.R.O. 1990, Reg. 1093, s. 19 (2).

(3) A member shall supervise the performance of an auxiliary's task in one of the following methods, whichever is appropriate in the circumstances:

1. Immediate supervision, where the member is on the same premises as the auxiliary and can see and hear the auxiliary perform the task.

2. Direct supervision, where the member is on the same premises as the auxiliary and, although not present to see and hear the task being performed, is accessible to the auxiliary in a timely and appropriate manner.

3. Indirect supervision, where the member is not on the same premises as the auxiliary while the task is being performed but where the member,

i. communicates appropriately with the auxiliary before and after the auxiliary performs the task, and

ii. is accessible to the auxiliary in a timely and appropriate manner while the task is being performed. O. Reg. 233/15, s. 13.

(4) A member may direct an auxiliary who is suitably qualified by education or experience to perform, under the supervision of a member, the tasks traditionally assigned to auxiliaries including flushing and infusion procedures in the course of embryo transfers after appropriate assessment by a member. R.R.O. 1990, Reg. 1093, s. 19 (4).

Current Framework in College Policy

The College has an existing policy document related to delegation:

Professional Practice Standard: Delegation

Future Framework under the Veterinary Professionals Act, 2024

Authorized activities

9 (1) No person shall carry out an authorized activity described in section 1 of Schedule 1 while engaged in the practice of veterinary medicine unless the person is a member.

Limitations

(2) A member may only carry out an authorized activity while engaged in the practice of veterinary medicine and subject to any prescribed conditions or prohibitions and any terms, conditions or limitations imposed on their licence.

Authorized activities - non-members

(3) Despite subsection (1), a person who is not a member may, subject to any prescribed conditions or prohibitions, carry out an authorized activity while engaged in the practice of veterinary medicine if,

(a) the regulations permit a person who is not a member to carry out the authorized activity; and

(b) the authorized activity is delegated to that person by a member.

Authorized activities — students

(4) Despite subsections (1) and (3), a student may carry out an authorized activity if the student is doing so while fulfilling the requirements to become a member and the activity is done under the supervision or direction of a veterinarian member.

Risk of harm

11 (1) No person other than a member acting within the scope of the practice of veterinary medicine shall treat an animal, or advise an owner or their representative with respect to an animal's health, in circumstances in which it is reasonably foreseeable that serious bodily harm to an animal or a person may result from the treatment or advice or from an omission from the treatment or advice.

Exceptions

(2) Subsection (1) does not apply with respect to,

(a) any treatment by a person who is acting under the direction of or in collaboration with a member if the treatment is within the scope of the practice of veterinary medicine;

(b) an activity carried out by a person if the activity is an authorized activity that was delegated under subsection 9 (3) to the person by a member;

(c) an activity set out in section 2 of Schedule 1, if the person carrying out the activity is not otherwise prevented to do so under the Act; or

(d) any prescribed treatment, advice, authorized activity or person

93 (1) Subject to the approval of the Lieutenant Governor in Council, the Council may make regulations,

1. prescribing and governing anything in this Act that is described as being prescribed, done in accordance with the regulations, provided for in the regulations or authorized or required by the regulations, other than a matter that this Act describes as being prescribed by the Minister or Lieutenant Governor in Council or provided for in regulations made by the Minister or Lieutenant Governor in Council;

7. with respect to authorized activities,

i. prescribing authorized activities for the purposes of section 9,

ii. limiting or clarifying the authorized activities,

iii. permitting or prohibiting veterinary technician members or classes of veterinarian members from carrying out specified authorized activities and governing the circumstances in which those activities may or shall not be carried out, and

iv. permitting persons who are not members to carry out specified authorized activities and limiting and governing the carrying out of such activities;

8. prescribing exceptions for the purpose of section 10 or 11 or limiting or clarifying the exceptions set out in sections 2 and 3 of Schedule 1;

97 (1) The Council may establish,

(a) standards for veterinary facilities that must be met by an applicant for a certificate of accreditation and maintained by the holder of a certificate of accreditation or other prescribed persons; and

(b) standards for the practice of veterinary medicine that must be met and maintained by members.

Schedule 1 Authorized Activities

Authorized activities

1 The following are authorized activities for the purposes of the Act:

1. Communicating to an individual a diagnosis identifying a disease, disorder, dysfunction or condition as the cause of an animal's signs and presentation in circumstances in which it is reasonably foreseeable that the individual will rely on the diagnosis.

2. Performing a medical assessment to determine the fitness for purpose or soundness of an animal, or group of animals, on which it is reasonably foreseeable that a person or organization will rely on the assessment.

- 3. Ordering laboratory tests on an animal or on specimens taken from an animal.
- 4. Prescribing a drug.
- 5. Compounding, dispensing or selling a drug.
- 6. Performing a procedure on tissue below the dermis.
- 7. Performing a procedure below the surface of a mucous membrane.

8. Performing a procedure on or below the surfaces of the teeth, including the scaling of teeth and occlusal equilibration.

9. Performing a procedure on or below the surface of the cornea.

10. Setting, immobilizing or casting a fracture of a bone or a dislocation of a joint or a severed tendon.

11. Administering a substance by injection or inhalation, or monitoring of such injection or inhalation.

12. Moving the joints of the spine beyond the animal's usual physiological range of motion using a fast, low amplitude thrust.

- 13. Putting an instrument, arm, hand or finger,
 - i. beyond the external ear canal,
 - ii. beyond the point in the nasal passages where they normally narrow,
 - iii. beyond the larynx,
 - iv. beyond the opening of the urethra,
 - v. beyond the labia majora,
 - vi. beyond the anus or cloaca, or
 - vii. into any other natural or artificial opening into the body.
- 14. Applying or ordering the application of a prescribed form of energy.

15. Performing upon an animal any manual procedure for the diagnosis or treatment of pregnancy, sterility or infertility, inclusive of ova and embryo transfer.

- 16. Performing allergy testing.
- 17. Such other authorized activities as may be prescribed.

Exceptions

2 The following are exceptions for the purposes of sections 10 and 11 of the Act:

1. Rendering first aid or temporary assistance in an emergency without fee.

2. Treating an animal if the person is the owner of the animal, is a member of the household of the owner of the animal or is employed for general agricultural or domestic work by the owner of the animal.

3. The administration of a treatment plan by a custodian of an animal if the treatment plan is made by a veterinarian member and carried out at the direction of the owner.

- 4. Taking blood samples.
- 5. Preventing or treating fish and invertebrate diseases or pests in fish or invertebrates.
- 6. Such other exceptions as may be prescribed.

Same

3 The following are exceptions for the purposes of section 10 of the Act:

1. Collecting or using semen as part of a business that engages in the artificial insemination of livestock.

2. Implantation of embryos as part of a business that engages in the artificial insemination of livestock.

3. Confirmation of pregnancy in domesticated farm animals of the genus ovis or capra through ultrasound conducted on the surface of the skin.

4. Confirmation of pregnancy in livestock through blood or milk analysis as part of a business.

5. Administration of heat synchronisation injections to livestock as part of a business that engages in the artificial insemination of livestock.

6. Collecting or transporting ova and embryos of animals other than mammals.

7. Non-surgical insemination.

8. Artificial insemination of invertebrates.

9. Such other exceptions as may be prescribed.



AGENDA ITEM 5.3.

TOPIC: Initiation

Overview

Section 9 of the *Veterinary Professionals Act, 2024* allows for the development of regulation language that outlines the ways in which both veterinarian and veterinary technician members are permitted to perform authorized activities.

This cover sheet outlines proposed recommendations related to a veterinary technician member's ability to perform certain authorized activities through a process known as initiation for inclusion in a regulatory concept on the authorized activity model.

Relevant Sections

An overview of the relevant sections of legislation, regulation, by-law, and policy related to the practice of veterinary medicine by veterinary technicians (both current and future) has been attached to this cover sheet as Appendix "**A**".

History of College Work Related to Initiate

Current Framework

The *Veterinarians Act* and Regulation 1093 currently outline an exclusive scope of practice model for veterinary medicine. This means that unless otherwise specifically stated, veterinary medicine may only be performed by a veterinarian or an auxiliary working under a veterinarian's supervision and delegation.

The term auxiliary currently encompasses both Registered Veterinary Technicians (RVT) and other non-registered persons who are working under a veterinarian's supervision and delegation.

Inclusion in Legislative Reform

The College's 2018 Concept Paper entitled "Achieving a Modern Approach to the Regulation of Veterinary Medicine in Ontario" contained several specific recommendations related to the performance of authorized activities by veterinary technicians as part of its overall recommendation related to the authorized activity model. This included the ability for a



veterinary technician to practice specific authorized activities (or components of) through the initiation process.

These recommendations were made after several rounds of consideration and conversation amongst both the College's Working Groups and Legacy Council, including extensive background research and two rounds of public consultation.

The *Veterinary Professionals Act, 2024* reflects these recommendations and the Transition Council is now in the position to develop a proposed regulatory concept related to the authorized activity model that contains components pertaining to initiation.

Additional Conversation and Research

Since the *Veterinary Professional Act, 2024* received Royal Assent in June 2024, the College has undertaken additional research and outreach related to the authorized activity model to ensure currency. This has included ongoing conversations with interested parties including:

- The Ontario Association of Veterinary Technicians (OAVT);
- The Ontario Veterinary Medical Association;
- Scope of Practice Working Group 2023 version (veterinarian and RVT representation); and
- Group Discussions with large animal veterinarians.

This work has also included ongoing jurisdictional scans related to other veterinary models including those developed by the American Association of Veterinary State Boards, the Alberta Veterinary Medical Association, and the Manitoba Veterinary Medical Association, as well other models adopted in other professions such as medicine, nursing, and pharmacy.

What Would This Look Like?

Veterinary technician members would be permitted to perform certain authorized activities (or components of) through a process known as initiation if they are practising in accordance with the regulation and from an accredited facility where the Facility Director has approved initiation as a method of practice.

Veterinary technician members would be professionally responsible for their own practice when performing authorized activities through the initiation process.

Proposed Recommendations Related to Initiate

Within the regulatory concept related to the authorized activity model, it is proposed that the following five (5) recommendations pertaining to initiate be incorporated. Each of these recommendations has been developed based on extensive research and conversation including advice obtained from the College's legal team.



Definition of Initiation

It is proposed that a regulatory concept related to the authorized activity model include a definition of initiation to help illustrate the process and its intended outcomes.

Suggested Definition

Initiation: Means where a veterinary technician member is permitted to independently perform authorized activities without an order or delegation by a veterinarian member pursuant to the conditions set out in this Regulation.

Ability to Initiate Both Within and Outside of a Veterinarian-Client-Patient Relationship (VCPR)

It is proposed that a regulatory concept related to the authorized activity model include the ability for a veterinary technician member to perform specific authorized activities both within and outside of a VCPR.

For the latter, it is proposed that a veterinary technician member be able to perform the authorized activities proposed through initiation outside of a VCPR in recognition of the emergent nature in which these activities would likely be performed. The ability for a member to provide veterinary care outside of a VCPR in emergency situations is already outlined in Section 18 of Regulation 1093 and is likely to continue under the new regulatory framework. Given this, it is recommended that a regulatory concept related to the authorized activity model clearly state that the performance of authorized activities through initiation by veterinary technician members is also permissible in these circumstances.

Ongoing Expectations for Informed Client Consent

It is proposed that a regulatory concept related to the authorized activity model include confirmation that a veterinary technician member is still required to obtain informed client consent before proceeding with performing authorized activities under initiation regardless of whether a VCPR has been established.

Further Parameters Around When Veterinary Technician Members Are Permitted to Perform Authorized Activities Through Initiation

It is proposed that a regulatory concept related to the authorized activity model outline several overarching components that are required to be met for a veterinary technician member to perform authorized activities through initiation. These include:



- That the veterinary technician member has the knowledge, skills and judgement to perform the authorized activity safely, effectively and ethically;
- That the veterinary technician member determines that the animal(s) or group of animals veterinary care needs warrant the performance of the authorized activity, having considered:
 - The known risks and benefits to the animal of performing the authorized activity;
 - The predictability of the outcome of performing the authorized activity; and
 - The safeguards and resources available in the circumstances to safely manage the outcome of performing the authorized activity.
- That the veterinary technician member is accountable for determining that the animal's condition warrants performance of the authorized activity;
- That the veterinary technician member is accountable for the performance of the authorized activity; and
- The veterinary technician member coordinates care of the animal with a veterinarian member at the earliest opportunity.

These overarching components are recommended in recognition of the enhanced level of professional judgement, decision-making, and accountability that would be required of veterinary technician members in these circumstances.

Authorized Activities Permitted to be Performed by Veterinary Technician Members Through Initiation

It is proposed that a regulatory concept related to the authorized activity model outline the authorized activities (or components of) that are permitted to be performed by veterinary technician members through intitiation.

The authorized activities outlined in this cover sheet are more exhaustive than those contained in the College's 2018 Concept Paper. This shift in approach has occurred due to ongoing development of the authorized activity model since the Concept Paper was introduced and has been informed by both risk-based analysis and legal advice.

In particular, this proposed list has been informed and guided by the core competencies developed by the OAVT that outline the skills that all veterinary technicians are required to possess upon completion of their education and training. The core competencies developed by the OAVT can be found attached to this cover sheet as Appendix "**B**".

This proposed list has also been developed with the following lens:

- Facilitating timely access to needed veterinary services;
- Supporting team-based approaches to the delivery of veterinary care; and



• Encouraging full utilization of all available skillsets within the one profession, two professionals model.

At this time, the following authorized activities (or components of) are being proposed to be performed by veterinary technicians through initiation:

Authorized Activity	Reasoning
Communicating to an individual the death of an animal(s) or group of animals.	Veterinary technicians are often involved in the triaging of animals, especially in emergency situations. In these circumstances, there may arise situations where a veterinary technician member may be presented with an animal(s) or group of animals where it is clear that death has occurred. As death is considered a diagnosis, it proposed that veterinary technician members be permitted to communicate this diagnosis to assist in managing client expectations related to care options.
Ordering the following laboratory tests on an animal or on specimens taken from an animal: Preliminary Hematology Preliminary Urinalysis Preliminary Cytology Preliminary Serology Preliminary Parasitology	The gathering of information from the results of laboratory tests can play an essential role in a veterinarian member's development of a diagnosis and subsequent treatment plan. Permitting veterinary technician members to begin this process by ordering preliminary tests will help to facilitate the timely collection of this information. Veterinarian members will remain responsible for interpreting the results of these tests and for the development of a diagnosis and/or treatment plan based on the findings.
 Performing a procedure below the dermis for the purpose of: Taking a blood sample Taking a punch biopsy Taking a skin scrape Cystocentesis Fine needle aspiration 	The following list of activities has been developed to facilitate the performance of the laboratory tests mentioned above. The placing of an IV catheter has also been included to allow for a veterinary technician member to prepare an animal in advance of further examination and/or treatment by (or



Placing an IV catheter	under the order or delegation of) a
	veterinarian member.
 With respect to the care of a wound below the dermis or below a mucous membrane, any of the following procedures: Cleansing Probing Compressing Dressing Putting an instrument, arm, hand, or finger: Beyond the larynx to place esophageal or endotracheal tubing Beyond the opening of the urethra to place a urinary catheter Beyond the point of the animal's nasal passage where they normally narrow to collect a swab sample or place nasogastric tubing Beyond the labia majora to conduct a vaginal or cervical exam or collect a swab sample. Beyond the anus or cloaca to check an animal's temperature 	 This allowance has been designed to permit a veterinary technician member to begin to provide care to an animal in advance of further examination and or treatment by (or under the order or delegation of) a veterinarian member. The following lists of activities has been developed for the following reasons: To facilitate the performance of the laboratory tests mentioned above; To allow for a veterinary technician member to prepare an animal in advance of further examination and/or treatment by (or under the order or delegation of a veterinarian member); and/or To allow for a veterinary technician member to conduct a clinical assessment to assist the veterinarian member in the development of a diagnosis and/or treatment plan.
	•
Immobilizing a fracture of a bone or a dislocation of a joint or severed tendon for the purpose of temporary stabilization.	This allowance has been designed to permit a veterinary technician member to begin to provide care to an animal in advance of further examination and or treatment by (or under the order or delegation of) a veterinarian member.
Administering a substance by inhalation for	These allowances have been designed to
the purpose of administering oxygen.	permit a veterinary technician member to begin to provide care to an animal in advance
Administering a substance by injection for the	of further examination and or treatment by (or
purpose of fluid therapy as long as said	under the order or delegation of) a
substance is not a drug.	veterinarian member.



A Note on Pain Management and Euthanasia

The College also held several conversations related to whether any authorized activities (or components of) related to pain management and the performance of euthanasia could be integrated into the recommendations related to initiation. These conversations and considerations were of high importance to both the College and other interested parties in particular related to concerns around animal welfare.

Based on focused risk-based research in these areas, including overarching federal and provincial requirements related to prescribing drugs, the College has determined that the need for veterinary prescriptions to occur prior to the dispensing and/or administering of drugs necessitated the continued performance of these activities under either the order or delegation of a veterinarian member.

A Note on Clinical Assessment

The proposed approach outlined in this cover sheet is not intended to prevent a veterinary technician member from performing a clinical assessment as this is a separate activity from making or communicating a diagnosis.

For clarity, a clinical assessment is completed by gathering information based on an animal(s) or group of animals' history, symptom presentation, and potential treatment and goals. Clinical assessments are achieved through active interview of a client regarding the animal(s) or group of animals, and objective standardized tests and measurements.

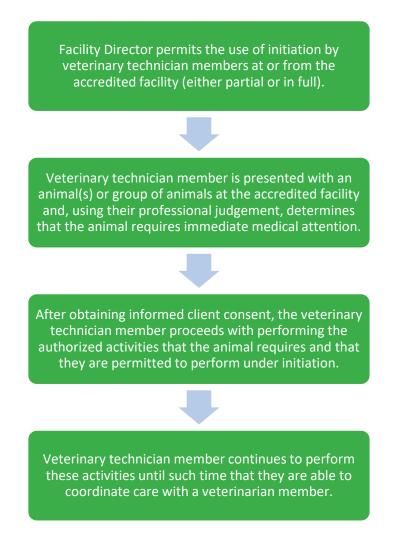
A diagnosis is achieved through confirmation of presenting criteria to determine cause. These criteria are based upon symptoms, signs, test results, and in some cases the initial result of treatment.

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Further Details and Examples on How the Initiation Process Would Work

The following flow-chart and examples have been developed to help illustrate how initiation would work:



8



Example One

Scenario

An animal arrives at an accredited facility with a suspected broken leg and several wounds after being hit by a car. The animal is displaying signs of pain and shock.

Explanation

A veterinary technician member is working from accredited facility that handles emergency cases. The accredited facility is experiencing a high case load, and the veterinary technician member is tasked with triaging new arrivals while the veterinarian members on site attend to other pressing cases.

An animal arrives that has been hit by a car. The veterinary technician member conducts a preliminary clinical assessment of the animal and notes that it is displaying signs of pain and shock. The veterinary technician member also notes several wounds on the animal and a suspected broken leg. The veterinary technician member determines that the animal requires immediate medical attention and, after obtaining informed client consent, begins to treat the animal using the following authorized activities:

- Ordering a laboratory test on an animal or on specimens from an animal to gather preliminary results;
- Performing a procedure below the dermis for the purpose of taking a blood sample and placing an IV catheter;
- Immobilizing a fracture of a bone for the purpose of temporary stabilization;
- Cleansing, probing, compressing, and dressing a wound below the dermis;
- Putting an instrument beyond the anus to check the animal's temperature;
- Administering a substance by inhalation for the purpose of administering oxygen; and
- Administering a substance by injection for the purpose of fluid therapy.

The veterinary technician member continues to provide this treatment until they can connect with a veterinarian member to coordinate the animal's care. At that time, the veterinary technician member provides the veterinarian member with their clinical assessment, the lab results, and a summary of treatment provided thus far to help facilitate the veterinarian member's continued management of the case.



Example Two

Scenario

A veterinary technician member arrives on farm to provide core vaccines to a herd of cattle. Upon arrival, the client asks the veterinary technician member to assist with a concern they have with a horse on farm.

Explanation

A veterinary technician member is working from an accredited veterinary mobile and is handling herd health appointments for the clinic's regular clients.

In the midst of administering core vaccines to the herd of cattle, the veterinary technician member is approached by the client who asks them to take a look at a concern they have with the skin on their horse's leg. The veterinary technician member agrees and, upon assessment, notes that the animal has signs of severe irritation on two of its legs. The veterinary technician member on staff today will not be available until later that afternoon and determines that the animal requires immediate medical attention to facilitate potential further diagnosis and/or treatment and, after obtaining informed client consent, begins to treat the animal using the following authorized activities:

- Ordering a laboratory test on an animal or on specimens from an animal to gather preliminary results; and
- Performing a procedure below the dermis for the purpose of taking a skin scrape.

The veterinary technician member informs the client that they will be providing a summary of these procedures and findings to the veterinarian member who will follow-up with them once they have had a chance to review the results and determine any further treatment required.

The veterinary technician member then finishes providing the vaccines to the herd of cattle and returns to the accredited veterinary facility to connect further with the veterinarian member.

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Additional Questions

In recognition of the complexity and intricacy of this emerging approach the following additional questions and answers have also been provided to help inform Transition Council's conversation and consideration:

1. What if a Facility Director does not permit for initiation to occur within their Accredited Facility?

Facility Directors would remain able to independently make decisions related to how the practice of veterinary medicine occurs at their accredited facility. If a Facility Director made the decision to not incorporate the initiation process within their accredited facility, then the veterinary technician members at that facility would not be permitted to perform authorized activities in this manner.

2. What if a veterinary technician member initiates the performance of an authorized activity that is outside of the listed allowances in regulation?

This would be outside of the permissions outlined in regulation, and the veterinary technician member would be professionally accountable for their actions and decision-making in that circumstance.

3. What if a veterinary technician member initiates the performance of an authorized activity outside of the allowances put in place by the Facility Director at the veterinary facility they are working at or from?

If a veterinary technician acts beyond the policies put in place by the Facility Director, then the veterinary technician member would be professionally accountable for their actions and decision-making in that circumstance.



4. Would a veterinary technician member be required to perform authorized activities through initiation under the supervision of a veterinarian member?

No, a veterinary technician member would not be required to be under any level of supervision by a veterinarian member when performing authorized activities through the initiation process. However, a veterinary technician member would still be required to coordinate care of the animal with a veterinarian member as soon as possible and the Facility Director at the accredited facility would be responsible for ensuring that there are reasonable processes in place to facilitate this coordination.

Discussion

Transition Council is asked to review these proposed recommendations related to initiate and the authorized activity model and to share any associated questions, comments, or concerns. To aid in this discussion, Transition Council is encouraged to consider the following questions:

- Is there anything unclear or missing in these proposed recommendations?
- Do the proposed recommendations seem logical?
- Do the proposed recommendations raise any concerns?
- Do the proposed recommendations raise any thoughts or considerations related to unintended consequences?

Initiation

Relevant Sections of Legislation, Regulation, By-Law, and Policy

Current Framework Under Regulation 1093

18. (1) A member shall comply with the standards of practice of the profession in the performance of veterinary services. O. Reg. 233/15, s. 12.

(2) A member shall not provide veterinary services in respect of an animal unless the member has,

(a) been retained by the owner of the animal, an authorized representative of the owner or an individual who the member reasonably determines is acting in the interest of the animal;

(b) advised the client that the member will only provide services in accordance with the standards of practice of the profession;

(c) reached an agreement with the client as to the scope of the services to be provided by the member; and

(d) obtained the consent of the client for each service to be provided. O. Reg. 233/15, s. 12.

(3) Subsection (2) does not apply if,

(a) a member, acting reasonably, determines that it is an emergency and that the animal requires immediate veterinary services;

(b) a member is an employee or contractor of the Crown in right of Canada or the Crown in right of Ontario and is providing veterinary services as part of that employment or contractual relationship;

(c) a member is providing veterinary services in or from a temporary facility;

(d) a member is providing veterinary services that are permitted or required under the *Dog Owners' Liability Act*, the *Animals for Research Act*, the *Provincial Animal Welfare Services Act, 2019*, the *Animal Health Act, 2009* or under any other Act except for the *Veterinarians Act*; or

(e) a member is retained or employed by a person other than an animal's owner to conduct an independent examination of the animal and report on the animal's health to that person. O. Reg. 233/15, s. 12; O. Reg. 260/22, s. 3.

Future Framework under the Veterinary Professionals Act, 2024

Authorized activities

9 (1) No person shall carry out an authorized activity described in section 1 of Schedule 1 while engaged in the practice of veterinary medicine unless the person is a member.

Limitations

(2) A member may only carry out an authorized activity while engaged in the practice of veterinary medicine and subject to any prescribed conditions or prohibitions and any terms, conditions or limitations imposed on their licence.

Authorized activities - non-members

(3) Despite subsection (1), a person who is not a member may, subject to any prescribed conditions or prohibitions, carry out an authorized activity while engaged in the practice of veterinary medicine if,

(a) the regulations permit a person who is not a member to carry out the authorized activity; and

(b) the authorized activity is delegated to that person by a member.

Authorized activities — students

(4) Despite subsections (1) and (3), a student may carry out an authorized activity if the student is doing so while fulfilling the requirements to become a member and the activity is done under the supervision or direction of a veterinarian member.

Risk of harm

11 (1) No person other than a member acting within the scope of the practice of veterinary medicine shall treat an animal, or advise an owner or their representative with respect to an animal's health, in circumstances in which it is reasonably foreseeable that serious bodily harm to an animal or a person may result from the treatment or advice or from an omission from the treatment or advice.

Exceptions

(2) Subsection (1) does not apply with respect to,

(a) any treatment by a person who is acting under the direction of or in collaboration with a member if the treatment is within the scope of the practice of veterinary medicine;

(b) an activity carried out by a person if the activity is an authorized activity that was delegated under subsection 9 (3) to the person by a member;

(c) an activity set out in section 2 of Schedule 1, if the person carrying out the activity is not otherwise prevented to do so under the Act; or

(d) any prescribed treatment, advice, authorized activity or person

Restricted titles

Veterinarian members

12 (1) Unless otherwise permitted by the regulations, no person other than a veterinarian member shall use the title "veterinarian", "veterinary surgeon" or "doctor" or variations,

abbreviations, abbreviations of variations or equivalents in another language, while engaged in the practice of veterinary medicine.

Veterinary technician members

(2) Unless otherwise permitted by the regulations, no person other than a veterinary technician member shall use the title "Registered veterinary technician" or "Registered veterinary technologist" or variations, abbreviations, abbreviations of variations or equivalents in another language, while engaged in the practice of veterinary medicine.

93 (1) Subject to the approval of the Lieutenant Governor in Council, the Council may make regulations,

1. prescribing and governing anything in this Act that is described as being prescribed, done in accordance with the regulations, provided for in the regulations or authorized or required by the regulations, other than a matter that this Act describes as being prescribed by the Minister or Lieutenant Governor in Council or provided for in regulations made by the Minister or Lieutenant Governor in Council;

7. with respect to authorized activities,

i. prescribing authorized activities for the purposes of section 9,

ii. limiting or clarifying the authorized activities,

iii. permitting or prohibiting veterinary technician members or classes of veterinarian members from carrying out specified authorized activities and governing the circumstances in which those activities may or shall not be carried out, and

iv. permitting persons who are not members to carry out specified authorized activities and limiting and governing the carrying out of such activities;

8. prescribing exceptions for the purpose of section 10 or 11 or limiting or clarifying the exceptions set out in sections 2 and 3 of Schedule 1;

97 (1) The Council may establish,

(a) standards for veterinary facilities that must be met by an applicant for a certificate of accreditation and maintained by the holder of a certificate of accreditation or other prescribed persons; and

(b) standards for the practice of veterinary medicine that must be met and maintained by members.

Schedule 1 Authorized Activities

Authorized activities

1 The following are authorized activities for the purposes of the Act:

1. Communicating to an individual a diagnosis identifying a disease, disorder, dysfunction or condition as the cause of an animal's signs and presentation in circumstances in which it is reasonably foreseeable that the individual will rely on the diagnosis.

2. Performing a medical assessment to determine the fitness for purpose or soundness of an animal, or group of animals, on which it is reasonably foreseeable that a person or organization will rely on the assessment.

3. Ordering laboratory tests on an animal or on specimens taken from an animal.

4. Prescribing a drug.

5. Compounding, dispensing or selling a drug.

6. Performing a procedure on tissue below the dermis.

7. Performing a procedure below the surface of a mucous membrane.

8. Performing a procedure on or below the surfaces of the teeth, including the scaling of teeth and occlusal equilibration.

9. Performing a procedure on or below the surface of the cornea.

10. Setting, immobilizing or casting a fracture of a bone or a dislocation of a joint or a severed tendon.

11. Administering a substance by injection or inhalation, or monitoring of such injection or inhalation.

12. Moving the joints of the spine beyond the animal's usual physiological range of motion using a fast, low amplitude thrust.

13. Putting an instrument, arm, hand or finger,

i. beyond the external ear canal,

ii. beyond the point in the nasal passages where they normally narrow,

iii. beyond the larynx,

iv. beyond the opening of the urethra,

v. beyond the labia majora,

vi. beyond the anus or cloaca, or

vii. into any other natural or artificial opening into the body.

14. Applying or ordering the application of a prescribed form of energy.

15. Performing upon an animal any manual procedure for the diagnosis or treatment of pregnancy, sterility or infertility, inclusive of ova and embryo transfer.

16. Performing allergy testing.

17. Such other authorized activities as may be prescribed.

Exceptions

2 The following are exceptions for the purposes of sections 10 and 11 of the Act:

1. Rendering first aid or temporary assistance in an emergency without fee.

2. Treating an animal if the person is the owner of the animal, is a member of the household of the owner of the animal or is employed for general agricultural or domestic work by the owner of the animal.

3. The administration of a treatment plan by a custodian of an animal if the treatment plan is made by a veterinarian member and carried out at the direction of the owner.

4. Taking blood samples.

5. Preventing or treating fish and invertebrate diseases or pests in fish or invertebrates.

6. Such other exceptions as may be prescribed.

Same

3 The following are exceptions for the purposes of section 10 of the Act:

1. Collecting or using semen as part of a business that engages in the artificial insemination of livestock.

2. Implantation of embryos as part of a business that engages in the artificial insemination of livestock.

3. Confirmation of pregnancy in domesticated farm animals of the genus ovis or capra through ultrasound conducted on the surface of the skin.

4. Confirmation of pregnancy in livestock through blood or milk analysis as part of a business.

5. Administration of heat synchronisation injections to livestock as part of a business that engages in the artificial insemination of livestock.

6. Collecting or transporting ova and embryos of animals other than mammals.

7. Non-surgical insemination.

8. Artificial insemination of invertebrates.

9. Such other exceptions as may be prescribed.

Veterinary Technician Entry to Practice Standards

ANATOMY AND PHYSIOLOGY

Knowledge and identification of the unique anatomical and physiological characteristics between species and breeds.

Knowledge of common diseases and their effects on various body systems.

Knowledge of the principles of genetics, genes and their crosses, inheritance, chromosomal abnormalities, types and lethal genes, genetic engineering.

Knowledge of euthanasia methods and techniques, confirmation of life/death

ANESTHESIA AND ANALGESIA

Knowledge of the indications, advantages, disadvantages, effects on the body and the associated adverse side effects of the commonly used peri-anesthetics and anesthetic agents

Identify and observe the stages and planes of general anesthesia and the parameters used for monitoring during anesthesia

Knowledge of the use and function of parts of a gas (inhalant) anesthetic machine, including precision vaporizers and the indications, advantages and disadvantages of re-breathing and non-re-breathing anesthetic circuits

Maintain and troubleshoot performance issues with anesthetic and monitoring equipment

Induce, monitor, maintain and support sedated, anesthetized and recovering animals safely and accurately using clinical signs and monitoring equipment

Knowledge of assisted and controlled ventilation, anesthetic ventilators, blood pressure support, fluid therapy and monitoring acid-base balance and oxygenation

Recognize and respond to anesthetic emergencies, including performing cardiopulmonary resuscitation

Calculate and administer peri-anesthetic and anesthetic agents to the animal

Recognize the indications for endotracheal intubation and successfully intubate and extubate animals

Identify and assess the presence of pain by utilizing a validated pain scoring system

Recognize the indications for regional and local anesthesia, be familiar with the anatomy, equipment and techniques required to perform various regional and local anesthetic blocks

ANIMAL BEHAVIOUR AND WELFARE

Knowledge of the chronological order of behavioural development and social behaviour

Recognize normal and abnormal behaviour patterns, including reading and observing behavioural feedback signs

Understand the physical and psychological requirements of animals, animal welfare, standards of care, and social license to operate

Understand and apply methods of identifying, preventing, eliminating and/or reducing stress response of the animal

BREEDING, REPRODUCTION, AND NEONATAL CARE

Understand the basic reproductive characteristics, techniques, and neonatal requirements including sexual maturity estrus cycles, semen evaluation, gestation/parturition, pregnancy detection and neonatal care

Knowledge of embryo transfer, artificial insemination and common reproductive technologies

Recognize and understand reproductive emergencies

<u>CLINICAL PATHOLOGY (includes parasitology, immunology, virology, urinalysis, hematology, cytology)</u>

Order laboratory tests on an animal or on specimens taken from an animal

Collect and prepare samples for in-clinic and external laboratory diagnostic tests

Understand and perform common diagnostic and laboratory tests

Understand how to interpret test results

Be familiar with coagulation and serological tests

Use and maintain point of care (POC) equipment

List the scientific and common names of parasites and understand their life cycles

Be familiar with the clinical sign of infection, treatment and control of parasite infestations

Perform laboratory techniques and identify common internal, external and blood parasites

Perform fecal analysis

Understand the immune response in the body, including: the difference between bacterial, fungal, and viral infections, antibody classes, (+/- adaptive responses, hypersensitivities and immunodeficiencies)

Describe the types of production and use of vaccines

Know the composition of a virus, the process of replication, classification, and identification of common viruses

Describe sample collection techniques of specimens and submission of samples

Understand and perform the practical and theoretical aspects of sample collection and analysis, staining and interpretation of cytology samples

Determine proper maintenance and quality control of laboratory instruments and equipment.

Perform manual CBC (and using a POC machine)

Perform microscopic examination of blood film to determine cellular morphology, cell number estimates and hematologic indices

Perform urinalysis (sediment, physical, and test chemical properties)

Collect, prepare and evaluate ear cytology

Perform fine needle tissue aspirates, impression smears and bone marrow aspirate/biopsy evaluation

DENTISTRY

Recognize normal and abnormal dental structures, conditions and lesions, causes and stages of gingivitis and periodontitis, and dental related pathologies

Understand the principles of dental radiography and acquire diagnostic quality radiographs

Perform complete oral health care assessment and treatment (COHAT), (including dental charting).

Performing dental prophylaxis inclusive of scaling/polishing and occlusal equilibration

Maintain and use ultrasonic scaler and polisher

Maintenance and use of dental hand instruments

Develop a home care program including client education

Perform dental nerve blocks

DIAGNOSTIC IMAGING

Understand the principles of radiography

Apply knowledge of the radiography machine (digital and analog), radiation safety, radiographic positioning and restraint, radiographic quality, radiographic logs, technique charts, and contrast media and studies

Use hands-free techniques to acquire radiographs

Understand the principles of ultrasonography

Understand the basic physics of ultrasound, the ultrasound machine, the concepts of the final image and artifacts

Safely and effectively produce diagnostic radiographs of various positions

Understand the basic physics of and safety requirements for using MRI, CT, fluoroscopy, and nuclear scintigraphy

EMERGENCY AND CRITICAL CARE

Perform triage, assess, monitor, and initiate urgent treatment to stabilize the emergent animal

Initiate prescribed treatment of the emergent animal including critical nursing care

Recognize when Cardiopulmonary Resuscitation is indicated

Initiate Cardiopulmonary Resuscitation

ETHICS AND JURISPRUDENCE

Knowledge of the applicable laws and regulations of veterinary medicine and veterinary technology

Understand the role of the registered veterinary technician in veterinary medicine and as a member of the veterinary medical team

Knowledge of moral and ethical dilemmas faced by veterinary professionals and animal owners

Adhere to the OAVT Code of Ethics

EXOTIC, LABORATORY and NON-DOMESTIC ANIMAL MEDICINE

Understand and apply optimum housing and husbandry, animal care, behaviour knowledge, restraint and handling, emergency and critical care, anesthesia, surgical techniques and nutritional requirements

Describe non-infectious and infectious pathogens

INTEGRATIVE MEDICINE

Understand treatment and therapeutic modalities including efficacy, safety, and contraindications

Be familiar with nutraceuticals, and other holistic medications and their use per applicable laws and regulations

Physical therapy for hospitalized and non-hospitalized animals

Application of non-conventional therapies

MEDICAL TERMINOLOGY

Understand and apply medical terms, abbreviations, prefixed, suffixes and combining forms

Maintain medical records and documentation

NURSING

Understand the practical and theoretical aspects of:

physical examination and normal and abnormal findings,

common diseases and illnesses,

peri-operative care,

techniques and routes of drug administration

husbandry,

bandaging/splinting,

wound management,

nutritional requirements,

fluid therapy administration,

blood collection and transfusion medicine,

electrocardiogram,

blood pressure monitoring,

anal sac expression, enemas,

- permanent identification,
- preventative medicine,
- adjunctive therapy,
- euthanasia and necropsy techniques.

urinary catheterization and maintenance, cystocentesis, and free-catch urine collection

Follow critical care and emergency protocols

NUTRITION

Understand the importance of and explain the role of nutrients in supporting life

Knowledge of nutrition principles in feeding animals, the basic requirements in various life stages, activity levels and the effects that the environment has on nutritional requirements

Understand and calculate an animal's maintenance energy requirements based on its particular life stage and metabolic requirements, why different nutrient levels change with each life stage and what effects excesses or deficiencies may have

Assist in the prevention of diet-related illnesses and conditions

Be familiar with ingredients, deficiencies and additives that can cause adverse effects

PERSONAL AND PROFESSIONAL MANAGEMENT

Develop and demonstrate competencies in critical thinking, communication, professional deportment and collaboration

Have an understanding of veterinary office management and business practices

Acquire proficiency in computer use, practice management software and telemedicine platforms

Understand clinical governance and the role of the registered veterinary technician, team care provision within the applicable legislation and regulation

Contribute to client education to ensure the health and safety of the animal, client, compliance and efficacy of the care or service being provided

PHARMACEUTICAL MATH

Perform unit conversions

Accurately and efficiently calculate drug dosages, and dilutions, and adjust concentrations of solutions

Understand the principles behind performing boluses and Continuous Rates of Infusion (CRIs) of medications

PHARMACOLOGY

Understand pharmacological terminology, pharmacokinetics, pharmacodynamics, and the basic classifications and general characteristics of drugs

Knowledge of safe and effective administration of drugs to animals by understanding withdrawal times and problems with incorrect administration

Compliance with and knowledge of regulatory guidelines and legal requirements regarding handling, storage, disposal and record keeping of controlled drugs

Knowledge of and adherence to all relevant provincial and/or federal legislation and regulations related to reporting, storage, handling and disposal of drugs

Have a basic understanding of common drugs used, their major effects and contraindications Be able to efficiently source drug interactions

Read and fill prescriptions. Accurately dispense prescribed drugs

Perform inventory control

Reconstitute and prepare drugs

Understand the difference between generic and trade names

<u>RESEARCH</u>

Knowledge of handling and breeding techniques, signs of illness, pain and distress, health of animals and housing conditions within the research environment

Knowledge of and adherence to all relevant provincial and/or federal legislation and regulations

RESTRAINT AND HANDLING

Select and apply handling and restraint that is safe for both the animal and the handler

Understand and apply low stress and humane handling techniques

Understand common behavioural and anatomical characteristics that impact the application of handling and restraint techniques

Handle and restrain animals in various positions for examination and treatment

Show proper use of equipment

SANITATION, STERILIZATION AND DISINFECTION

Understand the principles and different methods of sanitation, sterilization and disinfection, and how and where to use the different methods

Clean and disinfect cages and kennels and establish and maintain appropriate sanitation and nosocomial protocols

Clean instruments, wrap, pack, label and autoclave surgical packs and supplies

Safely operate and maintain autoclave, gas sterilization unit, and cold sterile solutions

Perform proper instrument care and surgical pack preparation for sterilization

SURGICAL NURSING

Monitor animals during surgical procedures

Perform appropriate surgical scrubbing, positioning and operating room conduct. Use aseptic techniques for surgical preparation of animals and surgical sites

Provide postoperative care and post-surgical clean-up

Recognize, and identify surgical instruments, needles, suture material, and their intended use in common surgical procedures

Suturing, stapling, and gluing of an existing skin incision application and removal

ZOONOSES, ONE HEALTH and SAFETY

Understand bacterial, viral, parasitic, and fungal zoonotic pathogens and their etiology, symptoms (human and animal), transmission, treatment, prevention and control

Knowledge of occupational health and safety and standards per applicable legislation and regulation

Knowledge of and adherence to all relevant provincial and/or federal legislation and regulations related to reporting, storage, handling and disposal of hazardous materials

Ensure animal and human safety in all areas of the facility.

Knowledge of One Health principles and their application to veterinary medicine.



AGENDA ITEM 5.4.

TOPIC: Order

Overview

Section 9 of the *Veterinary Professionals Act, 2024* allows for the development of regulation language that outlines the ways in which both veterinarian and veterinary technician members are permitted to perform authorized activities.

This cover sheet outlines proposed recommendations related to a veterinary technician member's ability to perform certain authorized activities under the order of a veterinarian member for inclusion in a regulatory concept on the authorized activity model.

Relevant Sections

An overview of the relevant sections of legislation, regulation, by-law, and policy related to the practice of veterinary medicine by veterinary technicians (both current and future) has been attached to this cover sheet as Appendix "**A**."

History of the College's Work Related to Order

Current Framework

The *Veterinarians Act* and Regulation 1093 currently outline an exclusive scope of practice model for veterinary medicine. This means that unless otherwise specifically stated, veterinary medicine may only be performed by a veterinarian or auxiliary working under a veterinarian's supervision and delegation.

The term auxiliary currently encompasses both Registered Veterinary Technicians (RVT) and other non-members who are working under a veterinarian's supervision and delegation.

Inclusion in Legislative Reform

The College's 2018 Concept Paper entitled "Achieving a Modern Approach to the Regulation of Veterinary Medicine in Ontario" contained several specific recommendations related to the performance of authorized activities by veterinary technicians as part of its overall proposal related to the authorized activity model. This included the ability for a veterinary technician to practice specific authorized activities (or components of) pursuant to orders.



These recommendations were made after several rounds of consideration and conversation amongst both the College's Working Groups and Legacy Council, including extensive background research and two rounds of public consultation.

The *Veterinary Professionals Act, 2024* reflects these recommendations and Transition Council is now in the position to develop a proposed regulatory concept related to the authorized activity model that contains components pertaining to orders.

Additional Conversation and Research

Since the *Veterinary Professionals Act, 2024* received Royal Assent in June 2024, the College has undertaken additional research and outreach related to the authorized activity model to ensure currency. This has included ongoing conversations with interested parties including:

- The Ontario Association of Veterinary Technicians;
- The Ontario Veterinary Medical Association;
- Scope of Practice Working Group 2023 version (Veterinarian and RVT representation); and
- Group discussions with large animal veterinarians.

This work has also included ongoing jurisdictional scans related to other veterinary models including those developed by the American Association of Veterinary State Boards, the Alberta Veterinary Medical Association, and the Manitoba Veterinary Medical Association, as well other models adopted in other professions such as medicine, nursing, and pharmacy.

What Would This Look Like?

Veterinary technician members would be permitted to perform certain authorized activities (or components of) pursuant to an order of a veterinarian member if they are practising in accordance with the regulation and from an accredited facility where the Facility Director has approved the use of orders as a method of practice. Veterinarian members would be professionally responsible for the development and oversight of the orders. Veterinary technician members would be professionally responsible for adherence to their orders and their own practice.

Proposed Recommendations Related to Order

Within the regulatory concept related to the authorized activity model, it is proposed that the following five (5) recommendations pertaining to orders be incorporated. Each of these recommendations has been developed based on extensive research and conversation including advice obtained from the College's legal team.



Definition of Order

It is proposed that a regulatory concept related to the authorized activity model include a definition of order to help illustrate the process and its intended incomes.

Suggested Definition

Order: Means the process whereby a veterinarian member may direct a veterinary technician member to perform an authorized activity pursuant to the conditions set out in this Regulation.

Ability to Order Both Within and Outside of a Veterinarian-Client-Patient Relationship (VCPR)

It is proposed that a regulatory concept related to the authorized activity model include the ability for orders to be developed and utilized for the performance of authorized activities by veterinary technician members both within and outside of a VCPR.

For the latter, it is proposed that veterinarian members be permitted to develop orders for use by veterinary technician members outside of a VCPR in recognition of the emergent nature in which authorized activities may need to be performed. The ability for a member to provide veterinary care to an animal outside of a VCPR in emergency situations is already outlined in Section 18 of Regulation 1093 and is likely to continue under the new regulatory framework. Given this, it is recommended that a regulatory concept related to the authorized activity model clearly state that the performance of authorized activities by a veterinary technician under the order of a veterinarian member is also permissible in these circumstances.

Ongoing Expectations for Informed Client Consent

It is proposed that a regulatory concept related to the authorized activity model include confirmation that a veterinary technician member is required to obtain informed client consent prior to proceeding with performing authorized activities pursuant to the order of a veterinarian member regardless of whether a VCPR has been established.

Further Parameters Around When Orders can be Developed and Utilized

It is proposed that a regulatory concept related to the authorized activity model outline several overarching components that are required to be met by either a veterinarian or veterinary technician member before an order can be developed or utilized. These include:



	<u> </u>
Veterinarian Member	Veterinary Technician Member
 Required to develop orders in writing. Can only develop orders for authorized activities that they are competent to perform. Must be assured that the veterinary technician members working under their order are competent to perform the authorized activities. Remains responsible for the proper development and oversight of orders. Must remain readily available to provide treatment if required or requested. 	 Required to only perform authorized activities that they are competent to perform. Remains able to refuse to perform authorized activities that they are not competent or comfortable to perform. Remains responsible for the decision to carry out the order and for their performance of the authorized activities. Remains responsible for ensuring adherence to the order as written. Remains responsible for seeking a veterinarian member when care falls outside of the parameters of an order.

These overarching components are recommended in recognition of the enhanced level of professional judgement, decision-making, and co-accountability that will be required of both veterinarian and veterinary technician members in these circumstances.

Authorized Activities Permitted to be Performed by Veterinary Technician Members Pursuant to the Order of a Veterinarian Member

It is proposed that a regulatory concept related to the authorized activity model outline the authorized activities (or components of) that are permitted to be performed by a veterinary technician member pursuant to the order of a veterinarian member.

The approach outlined to authorized activities permitted to be performed pursuant to an order in this cover sheet marks a distinct shift from the original vision first outlined by the College in its 2018 Concept Paper. At that time, the College has suggested that regulation language needed to be prescriptive (in the form of a specific list) related to the types of authorized activities that would be permissible under order. While this approach remains beneficial when it comes to the process for initiation since initiation allows for circumstances in which a veterinary technician member may be solely responsible for the care provided to an animal(s) or group of animals, this same level of approach has proven through both additional risk-based analysis and legal advice to be overly onerous when it comes to orders.

Instead, it is proposed that the regulatory concept related to the authorized activity model outline that all delegable authorized activities be permitted to be incorporated within a veterinarian member's order for performance by a veterinary technician member. This approach allows for increased flexibility and agility for veterinary teams to develop orders that suit the particular skillsets and competencies that exist within their workplaces and allows for the use of



professional judgement for determining what may be appropriate within different practice settings.

A Note on a Veterinarian Member's Ability to Prescribe Pursuant to an Order

Through this proposed approach, veterinarian members would be permitted to provide a standing prescription through the development of an order. Veterinary technician members would then be able to administer or dispense a drug to an animal(s) or group of animals based upon these prescriptions. Additional information and guidance related to the development and use of prescriptions pursuant to orders would be provided through College Policy.

A Note Related to Orders and Supervision Requirements

Through this proposed approach, veterinarian members would be permitted to develop orders that outline the ways in which veterinary technician members can perform authorized activities. In this, a veterinarian member could decide to include requirements related to supervision but could also allow for a veterinary technician member to independently perform authorized activities if they adhere to the requirements of the order.

A Note on Clinical Assessment

The proposed approach outlined in this cover sheet is not intended to prevent a veterinary technician member from performing a clinical assessment as this is a separate activity from making or communicating a diagnosis.

For clarity, a clinical assessment is completed by gathering information based on an animal(s) or group of animals' history, symptom presentation, and potential treatment and goals. Clinical assessments are achieved through active interview of a client regarding the animal(s) or group of animals, and objective standardized tests and measurements.

A diagnosis is achieved through confirmation of presenting criteria to determine cause. These

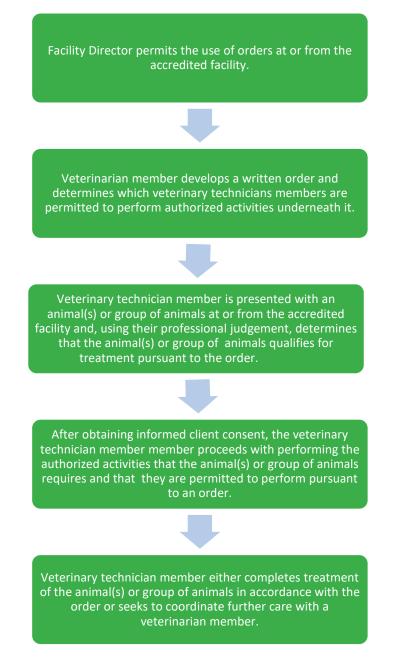
criteria are based upon symptoms, signs, test results, and in some cases the initial result of treatment.

(continued on next page)



Further Details and Examples Related to How Orders Would Work

The following flow-chart and examples have been developed to help illustrate how orders would work:





Example One

Scenario

A veterinary technician member arrives on farm to perform a herd health appointment.

Explanation

A large animal veterinary practice with several veterinarian members has developed a series of orders that outline how herd health appointments may be carried out by veterinary technician members from the practice's accredited mobiles. These orders include allowances related to core vaccination, disbudding, and minor wound management.

The veterinary technician member arrives on farm and, after obtaining informed client consent, begins to perform the various authorized activities associated with the written orders based on their assessment of the herd and its presenting conditions.

In carrying out these authorized activities, the veterinary technician member notes that one of the animal's presented for disbudding appears to be outside of the age range for animals contained in the written order. Given this, the veterinary technician member informs the client that they will not be able to perform disbudding on this animal and will instead connect further with the veterinarian member on staff to determine potential next steps.

The veterinary technician member then finishes the rest of the herd health appointment in accordance with the orders.

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Example Two – Part One

Scenario

An animal arrives at an accredited veterinary facility to receive dental prophylaxis.

Explanation

A small animal practice with several veterinarian members has developed an order that allows for veterinary technician members to perform dental prophylaxis. This order relates to sedation of the animal and scaling of teeth.

An animal that has previously been seen by and scheduled for dental prophylaxis by a veterinarian member arrives at the facility for their appointment. The veterinary technician member conducts a clinical assessment to ensure that the animal's condition has not changed since it was last seen by the veterinarian member and, after obtaining informed client consent, begins to perform the various authorized activities associated with the written order.

The procedure goes as predicted and the animal comes out of sedation without issue. The veterinary technician member contacts the client and informs them that procedure went well and the animal is ready to go home.

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Example Two – Part Two

Scenario

An animal arrives at an accredited veterinary facility to receive dental prophylaxis.

Explanation

A small animal practice with several veterinarian members has developed an order that allows for veterinary technician members to perform dental prophylaxis. This order relates to sedation and scaling of teeth.

An animal that has previously been seen by and scheduled for dental prophylaxis by a veterinarian member arrives at the facility for their appointment. The veterinary technician member conducts a clinical assessment to ensure that the animal's condition has not changed since it was last seen by the veterinarian member and, after obtaining informed client consent, begins to perform the various authorized activities associated with the written order.

In carrying out these authorized activities, the veterinary technician member notes that the animal has a tooth that appears infected and may require extraction, which is outside of the order. The veterinary technician member pauses the procedure and connects with the veterinarian member on staff to determine next steps.

Additional Questions

In recognition of the complexity and intricacy of this emerging approach, the following additional questions and answers have also been provided to help inform Transition Council's conversation and consideration:

1. What if a Facility Director does not permit the use of orders within their accredited facility?

Facility Directors would remain able to independently make decisions related to how the practice of veterinary medicine occurs at their accredited facility. If a Facility Director made the decision not to incorporate the order process within their accredited facility, then the veterinary technician members at that facility would not be permitted to perform authorized activities in this manner. Veterinarian members working at or from these accredited facilities would not be permitted to develop orders for authorized activities.



2. What if a veterinary technician member performs an authorized activity that is outside of the order?

This would be outside of the permissions outlined in regulation, and the veterinary technician member would be professionally accountable for their actions and decision-making in that circumstance.

3. Who is responsible for care delivered under an order?

The veterinarian member who developed the order would be professionally responsible for the content and oversight of the order, and the veterinary technician member delivering care under an order would be professionally responsible for adherence to the order and their own practice.

Discussion

Transition Council is asked to review these proposed recommendations related to order and the authorized activity model and to share any associated questions, comments, or concerns. To aid in this discussion, Transition Council is encouraged to consider the following questions:

- Is there anything unclear or missing in these proposed recommendations?
- Do the proposed recommendations seem logical?
- Do the proposed recommendations raise any concerns?
- Do the proposed recommendations raise any thoughts or considerations related to unintended consequences?

Orders

Relevant Sections of Legislation, Regulation, By-Law, and Policy

Current Framework Under Regulation 1093

18. (1) A member shall comply with the standards of practice of the profession in the performance of veterinary services. O. Reg. 233/15, s. 12.

(2) A member shall not provide veterinary services in respect of an animal unless the member has,

(a) been retained by the owner of the animal, an authorized representative of the owner or an individual who the member reasonably determines is acting in the interest of the animal;

(b) advised the client that the member will only provide services in accordance with the standards of practice of the profession;

(c) reached an agreement with the client as to the scope of the services to be provided by the member; and

(d) obtained the consent of the client for each service to be provided. O. Reg. 233/15, s. 12.

(3) Subsection (2) does not apply if,

(a) a member, acting reasonably, determines that it is an emergency and that the animal requires immediate veterinary services;

(b) a member is an employee or contractor of the Crown in right of Canada or the Crown in right of Ontario and is providing veterinary services as part of that employment or contractual relationship;

(c) a member is providing veterinary services in or from a temporary facility;

(d) a member is providing veterinary services that are permitted or required under the *Dog Owners' Liability Act*, the *Animals for Research Act*, the *Provincial Animal Welfare Services Act, 2019*, the *Animal Health Act, 2009* or under any other Act except for the *Veterinarians Act*; or

(e) a member is retained or employed by a person other than an animal's owner to conduct an independent examination of the animal and report on the animal's health to that person. O. Reg. 233/15, s. 12; O. Reg. 260/22, s. 3.

Future Framework under the Veterinary Professionals Act, 2024

Authorized activities

9 (1) No person shall carry out an authorized activity described in section 1 of Schedule 1 while engaged in the practice of veterinary medicine unless the person is a member.

Limitations

(2) A member may only carry out an authorized activity while engaged in the practice of veterinary medicine and subject to any prescribed conditions or prohibitions and any terms, conditions or limitations imposed on their licence.

Authorized activities - non-members

(3) Despite subsection (1), a person who is not a member may, subject to any prescribed conditions or prohibitions, carry out an authorized activity while engaged in the practice of veterinary medicine if,

(a) the regulations permit a person who is not a member to carry out the authorized activity; and

(b) the authorized activity is delegated to that person by a member.

Authorized activities — students

(4) Despite subsections (1) and (3), a student may carry out an authorized activity if the student is doing so while fulfilling the requirements to become a member and the activity is done under the supervision or direction of a veterinarian member.

Risk of harm

11 (1) No person other than a member acting within the scope of the practice of veterinary medicine shall treat an animal, or advise an owner or their representative with respect to an animal's health, in circumstances in which it is reasonably foreseeable that serious bodily harm to an animal or a person may result from the treatment or advice or from an omission from the treatment or advice.

Exceptions

(2) Subsection (1) does not apply with respect to,

(a) any treatment by a person who is acting under the direction of or in collaboration with a member if the treatment is within the scope of the practice of veterinary medicine;

(b) an activity carried out by a person if the activity is an authorized activity that was delegated under subsection 9 (3) to the person by a member;

(c) an activity set out in section 2 of Schedule 1, if the person carrying out the activity is not otherwise prevented to do so under the Act; or

(d) any prescribed treatment, advice, authorized activity or person

Restricted titles

Veterinarian members

12 (1) Unless otherwise permitted by the regulations, no person other than a veterinarian member shall use the title "veterinarian", "veterinary surgeon" or "doctor" or variations,

abbreviations, abbreviations of variations or equivalents in another language, while engaged in the practice of veterinary medicine.

Veterinary technician members

(2) Unless otherwise permitted by the regulations, no person other than a veterinary technician member shall use the title "Registered veterinary technician" or "Registered veterinary technologist" or variations, abbreviations, abbreviations of variations or equivalents in another language, while engaged in the practice of veterinary medicine.

93 (1) Subject to the approval of the Lieutenant Governor in Council, the Council may make regulations,

1. prescribing and governing anything in this Act that is described as being prescribed, done in accordance with the regulations, provided for in the regulations or authorized or required by the regulations, other than a matter that this Act describes as being prescribed by the Minister or Lieutenant Governor in Council or provided for in regulations made by the Minister or Lieutenant Governor in Council;

7. with respect to authorized activities,

i. prescribing authorized activities for the purposes of section 9,

ii. limiting or clarifying the authorized activities,

iii. permitting or prohibiting veterinary technician members or classes of veterinarian members from carrying out specified authorized activities and governing the circumstances in which those activities may or shall not be carried out, and

iv. permitting persons who are not members to carry out specified authorized activities and limiting and governing the carrying out of such activities;

8. prescribing exceptions for the purpose of section 10 or 11 or limiting or clarifying the exceptions set out in sections 2 and 3 of Schedule 1;

97 (1) The Council may establish,

(a) standards for veterinary facilities that must be met by an applicant for a certificate of accreditation and maintained by the holder of a certificate of accreditation or other prescribed persons; and

(b) standards for the practice of veterinary medicine that must be met and maintained by members.

Schedule 1 Authorized Activities

Authorized activities

1 The following are authorized activities for the purposes of the Act:

1. Communicating to an individual a diagnosis identifying a disease, disorder, dysfunction or condition as the cause of an animal's signs and presentation in circumstances in which it is reasonably foreseeable that the individual will rely on the diagnosis.

2. Performing a medical assessment to determine the fitness for purpose or soundness of an animal, or group of animals, on which it is reasonably foreseeable that a person or organization will rely on the assessment.

3. Ordering laboratory tests on an animal or on specimens taken from an animal.

4. Prescribing a drug.

5. Compounding, dispensing or selling a drug.

6. Performing a procedure on tissue below the dermis.

7. Performing a procedure below the surface of a mucous membrane.

8. Performing a procedure on or below the surfaces of the teeth, including the scaling of teeth and occlusal equilibration.

9. Performing a procedure on or below the surface of the cornea.

10. Setting, immobilizing or casting a fracture of a bone or a dislocation of a joint or a severed tendon.

11. Administering a substance by injection or inhalation, or monitoring of such injection or inhalation.

12. Moving the joints of the spine beyond the animal's usual physiological range of motion using a fast, low amplitude thrust.

13. Putting an instrument, arm, hand or finger,

i. beyond the external ear canal,

ii. beyond the point in the nasal passages where they normally narrow,

iii. beyond the larynx,

iv. beyond the opening of the urethra,

v. beyond the labia majora,

vi. beyond the anus or cloaca, or

vii. into any other natural or artificial opening into the body.

14. Applying or ordering the application of a prescribed form of energy.

15. Performing upon an animal any manual procedure for the diagnosis or treatment of pregnancy, sterility or infertility, inclusive of ova and embryo transfer.

16. Performing allergy testing.

17. Such other authorized activities as may be prescribed.

Exceptions

2 The following are exceptions for the purposes of sections 10 and 11 of the Act:

1. Rendering first aid or temporary assistance in an emergency without fee.

2. Treating an animal if the person is the owner of the animal, is a member of the household of the owner of the animal or is employed for general agricultural or domestic work by the owner of the animal.

3. The administration of a treatment plan by a custodian of an animal if the treatment plan is made by a veterinarian member and carried out at the direction of the owner.

- 4. Taking blood samples.
- 5. Preventing or treating fish and invertebrate diseases or pests in fish or invertebrates.
- 6. Such other exceptions as may be prescribed.

Same

3 The following are exceptions for the purposes of section 10 of the Act:

1. Collecting or using semen as part of a business that engages in the artificial insemination of livestock.

2. Implantation of embryos as part of a business that engages in the artificial insemination of livestock.

3. Confirmation of pregnancy in domesticated farm animals of the genus ovis or capra through ultrasound conducted on the surface of the skin.

4. Confirmation of pregnancy in livestock through blood or milk analysis as part of a business.

5. Administration of heat synchronisation injections to livestock as part of a business that engages in the artificial insemination of livestock.

6. Collecting or transporting ova and embryos of animals other than mammals.

7. Non-surgical insemination.

8. Artificial insemination of invertebrates.

9. Such other exceptions as may be prescribed.



AGENDA ITEM 5.5.

TOPIC: Presentation of Related Concept Language

Concept

Based on the topics presented within this package, a partial draft concept has been developed to support Transition Council in outlining its recommendations for the Ministry of Food, Agriculture and Agri-Business (OMAFA) for inclusion in a regulatory concept on the authorized activity model. (attached to this cover sheet as Appendix "**A**".)

Discussion

This draft is now being presented to Transition Council for its review and discussion related to next steps.

Options

Following discussion, Transition Council may elect to:

- 1. Direct that the draft concept be approved for public consultation as presented or amended;
- 2. Direct that the draft concept be returned to College Staff for further review and development; or
- 3. Other.

Attachments

1. Appendix A – Partial Draft Concept – Authorized Activities



Authorized Activities Concept Chart

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Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes
This column outlines the specific section of regulation.	This column provides an overview of the College's main objectives for the section of regulation.	This column provides a more in- depth description of the objectives sought and the associated reasoning.	This column provides any additional specific information required to ensure clarity.	This column highlights any relevant transition matters requiring consideration.	This column outlines the College's intended outcomes for the specific section.
Authorized Activities – General	Development of a clear and consistent authorized activity model for the practice of veterinary medicine in Ontario.	General The College is proposing the development of regulation language related to the authorized activity model as permitted by Section 9 and Schedule One of the Veterinary Professionals Act, 2024. Purpose Section 9 of the Veterinary Professionals Act, 2024 establishes the legislative authority for the development of an authorized activity model for the practice of veterinary medicine in Ontario. This framework is further supported by Schedule One of the Act, where a list of seventeen (17) authorized activities is outlined. While the Act and Schedule One create the basis for this model, most of the additional detail required for implementation is left to regulation development.	The practice of veterinary medicine will continue to be regulated by the College under the <i>Veterinary</i> <i>Professionals Act, 2024</i> . Both veterinarians and veterinary technicians will become licensed members under the one profession, two professionals model. The Act contains a definition of the practice of veterinary medicine. The model of practicing veterinary medicine will no longer be exclusive in nature and will serve as an overarching illustration of the types of activities that constitute the practice of veterinary medicine. The list of authorized activities outlined in Schedule One will define what activities can only be performed by members unless otherwise specifically stated. This means that there will be certain lower-risk aspects of veterinary medicine that will exist in the public domain (such as massage therapy). This also means that both members and non-members of the College (such as auxiliaries and other non- veterinary animal care providers) will be required to adhere to the Act and its associated Regulation if they seek to perform authorized activities.	The Veterinarians Act and Regulation 1093 currently outline an exclusive scope of practice model for veterinary medicine in Ontario. This means that unless otherwise specifically stated, veterinary medicine may only be performed by a licensed veterinarian or an auxiliary working under a veterinarian's supervision and delegation. The Veterinarians Act does not contain a definition of the practice of veterinary medicine, and clarity on this has been established by the definition in the Veterinary Professionals Act. The current framework has served both the people and animals of Ontario well for many years but has not kept pace with the changing realities of animal care within the province. The transition to an authorized activity model under the Veterinary Professionals Act, 2024 will allow for an updated approach designed to facilitate safe and accountable oversight of veterinary medicine and animal care in Ontario moving forward.	Clear and consistent expectations for the practice of veterinary medicine focused on public access and risk mitigation.

Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes
Authorized Activities – Accredited Facilities	Ensure public safety by requiring authorized activities to be practised from accredited veterinary facilities.	General The College is proposing the development of regulation language related to the practice of authorized activities from an accredited veterinary facility as permitted by Section 9 (2) of the Veterinary Professionals Act, 2024. Purpose The public expects that the College will oversee the practice of veterinary medicine and the performance of activities that pose a risk of harm or potential harm to an animal(s) or group of animals and/or people. The authorized activities listed in Schedule One of the Act pose the highest risk of harm or potential harm and, therefore, require additional safeguards and accountability surrounding their performance. Authorized Activities to be Practised from an Accredited Veterinary Facility The College is proposing that all members (both veterinarians and veterinary technicians) be required to practice authorized activities in or from an accredited veterinary facility unless otherwise specifically exempted. This requirement reflects the fundamental importance of the College's accreditation model in serving and protecting the public interest. It is also supported by the definition of accredited facility in the Veterinary Professionals Act, 2024 which states: "veterinary facility" means a building, a vehicle or land, or any combination of them, used or intended to be used as a place in or from which a member carries out authorized activities in the practice of veterinary medicine.	Under the Veterinary Professionals Act, 2024 veterinarian members would continue to be primarily responsible for the practice of veterinary medicine (including the authorized activities) at accredited facilities through their role as Facility Directors. Veterinary technician members would not be permitted to be Facility Directors, but would be required to associate with at least one accredited facility if offering authorized activities to the public.	The College has a longstanding accreditation program under the Veterinarians Act and Regulation 1093 that has required veterinarians to practice veterinary medicine from accredited veterinary facilities. This program has proved vital to public protection and is well understood and embraced by both the public and the profession. The program was also recently updated in preparation for legislative reform and has been designed to be flexible and innovative in enhancing accountability and supporting delivery of high-quality care. Requiring both veterinarian and veterinary technician members to practice authorized activities in or from an accredited facility under the new model would be a continuation of the current approach and reflect the College's ongoing commitment to risk mitigation and management.	Equal adherence by all members to the accreditation model to ensure public safety and ongoing risk mitigation and management.

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Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended
Authorized	Ensure consistent	General	This recommendation is designed to reflect a	Under the <i>Veterinarians Act</i> and Regulation 1093, Facility	Outcomes Equal adherence by
Activities – Facility Policies	consistent oversight of the practice of authorized activities by requiring facility-wide adherence.	The College is proposing the development of regulation language related to the practice of authorized activities in accordance with accredited facility policies set by the Facility Director as permitted by Section 9 (2) of the Veterinary Professionals Act, 2024. Purpose The public expects that the College will oversee the performance of activities that pose a risk of harm or potential harm to an animal(s) or group of animals and/or people. The authorized activities listed in Schedule One of the Act pose the highest risk of harm or potential harm and, therefore, require additional safeguards and accountability surrounding their performance.	Gesigned to reflect a Facility Director's ultimate oversight of the practice of veterinary medicine within their accredited facility and to allow for flexibility and professional judgement to be used in the development of individual approaches to practice. If a Facility Director determines not to pursue initiation or	and Regulation 1093, Facility Directors are already responsible for the oversight of the practice of veterinary medicine within their accredited veterinary facilities. Requiring all members to adhere to the policies set by the Facility Director related to the practice of authorized activities within or from the accredited facility cements this oversight and ensures consistent application.	adherence by all members to the accreditation model to ensure public safety and ongoing risk mitigation and management.
		Adherence with Facility Policies The College is proposing that all members (veterinarians and veterinary technicians) be required to adhere will all facility policies established by the Facility Director in their performance of authorized activities. For clarity, this means that a Facility Director would be able to determine what aspects of the authorized activity model they wish to employ within their accredited facility including whether veterinary technician members are permitted to work under either initiation or pursuant to a veterinarian's order.	orders as methods of practice within their accredited facility, then all members at that facility would be required to adhere by these policies.		

Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes
Authorized Activities – Competency Requirements	Clear expectations for all members to practise within areas of competence.	General The College is proposing the development of regulatory language related to the competent practice of authorized activities by members in accordance with as permitted by Section 9 (2) of the Veterinary Professionals Act, 2024. Purpose The public expects that the College will take measures to ensure the delivery of safe and quality veterinary care by its members and that only those who have the skills, knowledge, and training to provide a service are permitted to perform these activities on animals. Expectations for Competent Practice The College is proposing that all members (veterinarians and veterinary technicians) be required to practice only within their sphere of competence and in accordance with any terms, conditions, and limitations on their licence. This recommendation would apply to both individual practice as well as delegation (if applicable) and is designed to codify the need for professionals to reflect on their own skills, knowledge, and judgement in the delivery of veterinary services and to ensure that members are only performing activities when they are confident that they can do so as safely as possible.	Both veterinarian and veterinary technician members would be required to self-reflect on their own skills, knowledge, and training to determine whether they are competent to perform a particular activity and/or service. Members would also be offered opportunities and resources to reflect on these competencies, including through the College's quality assurance program.	College policy developed under the Veterinarians Act and Regulation 1093 already requires a veterinarian to reflect on their own competencies prior to practising. The proposed inclusion of requirements related to competency into Regulation language builds on this framework while also providing a stronger base upon which to develop further expectations, guidance, and resources for all members.	Equal expectations for all members designed to ensure the delivery of safe, quality, and accountable veterinary care.

Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes
Authorized Activities – Delegation	 List which authorized activities are non- delegable. Outline how veterinarian members are permitted to delegate. Outline how veterinary technicians are permitted to work under delegation. Provide clarity around sub- delegation. 	General The College is proposing the development of regulation language related to the authorized activity model and delegation as permitted by Section 9 (2) and (3) of the Veterinary Professionals Act, 2024. Purpose The public expects that the College will take measures to ensure the delivery of safe and quality veterinary care by its members including within the dynamics of veterinary teams where there may be different providers and methods of service delivery being utilized. Non-Delegable Activities The College is proposing that regulation language be developed that outlines which authorized activities possess a high enough level of associated risk of harm or potential harm to animals and/or people that they should not be permitted to be delegated and therefore, would only be able to be practiced by a veterinarian member. This includes: • Communicating to an individual a diagnosis identifying a disease, disorder, dysfunction or condition as the cause of an animal's signs and presentation in circumstances in which it is reasonably foreseeable that the individual will rely on the diagnosis except when, • A veterinary technician member is providing confirmation of the death of an animal or group of animals to an individual; • A veterinarian's diagnosis to an individual based on the veterinarian's diagnosis to an individual based on the veterinarian's delegation and the veterinarian member remains readily available to communicate with the individual;	Information The list of proposed non-delegable activities has been developed based on extensive research and risk analysis completed by the College. The proposed carve-outs for veterinary technician members related to diagnosis have been developed in recognition of the role that they play in triaging animals in emergency situations, the performance of euthanasia, and already existing allowances related to pregnancy confirmation in food-producing animals. Inclusion of additional requirements for both veterinarian and veterinary technician	College policy developed under the <i>Veterinarians Act</i> and Regulation 1093 already provides several expectations and areas of guidance related to delegation and supervision. This includes the definitions of immediate, direct, and indirect supervision which the College proposes continue as currently written under the new regulatory framework. The proposed inclusion of requirements related to delegation into Regulation language builds on this framework while also providing a stronger base upon which to develop further expectations, guidance, and resources for all members.	Outcomes Clear expectations for both members and non- members that ensure safe, consistent, and accountable delivery of veterinary services.

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Section	Main Objectives	Primary Concepts	Additional	Transition Comments	Intended
			Information		Outcomes
			delegation have		
		 A veterinary technician member is providing confirmation of 	been designed to		
		pregnancy in a food producing animal following the	reflect the		
		application of transabdominal diagnostic ultrasound;	importance of		
			professional		
		 Performing a medical assessment to determine the fitness for 	judgement within		
		purpose or soundness of an animal, or group of animals, on which it	practice.		
		is reasonably foreseeable that a person or organization will rely on			
		the assessment;	The proposed		
			disallowance		
		Prescribing a drug; and	related to sub-		
			delegation has		
		Performing major surgery.	been developed for		
			two reasons:		
		Delegation by Veterinarian Members			
			1. To reflect the		
		The College is proposing that regulation language be developed to outline	ongoing		
		the circumstances in veterinarian members would be permitted to delegate	relationship that		
		authorized activities to ensure consistency and accountability in approach.	already exists		
			between		
		This includes:	veterinarians		
			and non-		
		That a veterinarian member is permitted to delegate authorized	members; and		
		activities to either a veterinary technician member or another non-	2. To reflect that		
		member (auxiliaries) under either immediate, direct, or indirect	specific		
		supervision;	allowances		
			relate to		
		That a veterinarian member remains professionally responsible for	veterinary		
		their decision to delegate and the level of supervision provided;	technician		
			members		
		That a victoria price member approve the machine that the victoria and	practising under		
		• That a veterinarian member assures themselves that the veterinary	either initiation		
		technician member or non-member to whom they are delegating	or pursuant to a		
		can perform the task competently and safely;	veterinarian		
			member's order		
		That a veterinarian member only delegates the performance of	do not extend		
		authorized activities that they themselves are also able to perform			
		competently and safely; and			

Section	Main Objectives	Primary Concepts	Additional	Transition Comments	Intended
			Information		Outcomes
		That a vatavination member remains professionally responsible for	past individual		
		 That a veterinarian member remains professionally responsible for the conduct of the veterinary technician member or non-member to 	practice.		
		whom they have delegated and for the suitability and quality of the			
		performance of said activities.			
		Veterinary Technicians Working Under a Veterinarian Member's			
		Delegation			
		The College is proposing that regulation language be developed to outline			
		that veterinary technician members would only be permitted to accept the			
		delegation of the performance of an authorized activity from a veterinarian			
		member if they are competent to perform it. The veterinary technician			
		member would also need to accept professional responsibility for their performance in recognition of their status as a licensed member and their			
		ongoing obligations to use their professional judgement in their practice.			
		Sub Delegation Not Dermitted			
		Sub-Delegation Not Permitted			
		The College is proposing that regulation language be developed to outline			
		that sub-delegation by veterinary technician is not permitted. For ease of			
		reference, sub-delegation occurs when an individual who accepts a			
		delegation then delegates the act to another person.			

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Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes
Authorized Activities – Initiation	 Provide a definition of initiation. Provide clarity around the veterinarian-client-patient relationship and informed client consent. Outline how veterinary technician members are permitted to perform authorized activities through initiation. Outline which authorized activities are permitted to be performed through initiation. 	General The College is proposing the development of regulation language related to the authorized activity model and delegation as permitted by Section 9 (2) of the Veterinary Professionals Act, 2024. Purpose The one profession, two professionals model enables the development of new approaches to practice that seek to fully utilize the skillset possessed by veterinary technician members to assist with public access to veterinary care. In developing these new methods, the public expects that the College will take measures to ensure the delivery of safe and quality veterinary care by its members including within the dynamics of veterinary teams where they may be different providers and methods of service delivery being utilized. Definition of Initiation The College is proposing that regulation language be developed to include a definition of initiation. The proposed definition is: Initiation means where a veterinary technician member is permitted to independently perform authorized activities without an order or delegation by a veterinarian member pursuant to the conditions set out in this Regulation. This definition is designed to provide context to the process of initiation and a framework upon which further detail can be developed. Initiation and the Veterinarian-Client-Patient Relationship (VCPR) The College is proposing that regulation language be developed that would permit veterinary technician members to perform specific authorized activities both within and outside of a VCPR in recognition of the emergent nature in which these activities would likely be performed.	The overarching recommendations related to circumstances in which veterinary technician members can practice through initiation have been developed in recognition of the enhanced level of professional judgement, decision- making, and accountability that would be required of veterinary technician members in these cases. The proposed list of authorized activities (or components of) for veterinary technician members to perform through initiation has been developed based on extensive research and risk analysis completed by the College. The proposed list has also been informed and guided by the core competencies developed by the	The ability for a veterinarian to provide veterinary care outside of a VCPR in emergency situations is already outlined in Section 18 of Regulation 1093 under the <i>Veterinarians Act</i> and the College is seeking an extension of this allowance for veterinary technician members. The <i>Veterinarians</i> <i>Act</i> and Regulation 1093 already permit auxiliaries (such as veterinary technicians) to participate in the collection of informed client consent.	Creation of a new method of veterinary service delivery for veterinary technician members that facilitates full utilization of their skillsets while continuing to ensure risk-based public protection.

Section	Main Objectives	Primary Concepts	Additional	Transition	Intended
			Information	Comments	Outcomes
		Initiation and Informed Client Consent	Ontario Association of Veterinary		
		The College is proposing that regulation language be developed to include an	Technicians that		
		ongoing requirement for veterinary technician members to obtain informed	outline the skills that		
		client consent before proceeding with performing authorized activities through	all veterinary		
		initiation regardless of whether a VCPR has been established.	technicians should		
			possess upon		
		Veterinary Technician Members Performing Authorized Activities	completion of their		
		Through Initiation	education and		
		The College is preparing that regulation language he developed to outline the	training.		
		The College is proposing that regulation language be developed to outline the circumstances in which veterinary technician members would be permitted to	The proposed list has		
		perform authorized activities through initiation.	also been developed		
			with the following		
		This includes:	lens:		
		• That the veterinary technician member has the knowledge, skills, and	 Facilitating timely 		
		judgement to perform the authorized activity safely, effectively, and	access to needed		
		ethically;	veterinary		
		• That the veterinary technician determines that the animal(s) or group of	services;		
		animals veterinary care needs warrant the performance of the authorized	 Supporting team- 		
		activity, having considered:	based		
			approaches to		
		 The known risks and benefits to the animal(s) or group of animals 	the delivery of		
		of performing the authorized activity;	veterinary care; and		
		 The predictability of the outcome of performing the authorized 	 Encouraging full 		
		activity; and	• Encouraging full utilization of all		
			available skillsets		
		 The safeguards and resources available in the circumstances to 	within the one		
		safely manage the outcome of performing the authorized activity;	profession, two		
			professionals		
		• That the veterinary technician member is accountable for determining that	model.		
		the animal's condition warrants performance of the authorized activity;			
			The College also		
		• That the veterinary technician member is accountable for the performance	held several		
		of the authorized activity; and	conversations related		

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Section Main Objective	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes	
	 The veterinary technician member coordinates care of the animal with a veterinarian member at the earliest opportunity. Authorized Activities Permitted to be Performed by Veterinary Technician Members Through Initiation The College is proposing the development of regulation language that outlines the authorized activities (or components of) that are permitted to be performed by veterinary technician members through initiation. This includes: Communicating to an individual the death of an animal or group of animals; Ordering the following laboratory tests on an animal or on specimens 	to whether any authorized activities (or components of) related to pain management and the performance of euthanasia could be integrated into the recommendations related to initiation. These conversations and considerations were of high importance to both the College and other interested parties in particular related to			
	 bitsening intertaining intertaining	concerns around animal welfare. Based on focused risk-based research in these areas, including overarching federal and provincial requirements related to prescribing drugs, the College has determined that the need for veterinary prescriptions to occur prior to the dispensing and/or administering of drugs necessitated the continued performance of these			

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Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes
		 Cleansing Probing Compressing Dressing; 	activities under either the order or delegation of a veterinarian member.		
	• Put	 ting an instrument, arm, hand, or finger: Beyond the larynx to place esophageal or endotracheal tubing Beyond the opening of the urethra to place a urinary catheter Beyond the point of the animal's nasal passage where they normally narrow to collect a swab sample or place nasogastric tubing Beyond the labia majora to conduct a vaginal or cervical exam or collect a swab sample. Beyond the anus or cloaca to check an animal's temperature; 	This proposed approach to initiation is not intended to prevent a veterinary technician member from performing a clinical assessment as this is a separate activity from making or communicating a diagnosis.		
		nobilizing a fracture of a bone or a dislocation of a joint or severed don for the purpose of temporary stabilization;	J		
		ministering a substance by inhalation for the purpose of administering gen; and			
		ninistering a substance by injection for the purpose of fluid therapy as g as said substance is not a drug.			

Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes
Authorized Activities – Order	 Provide a definition of order. Provide clarity around the veterinarian- client- patient relationship and informed client consent. Outline parameters around when orders can be developed and utilized. Outline which authorized activities are permitted to be performed pursuant to orders. 	General The College is proposing the development of regulation language related to the authorized activity model and orders as permitted by Section 9 (2) of the Veterinary Professionals Act, 2024. Purpose The one profession, two professionals model enables the development of new approaches to practice that seek to fully utilize the skillset possessed by veterinary technicians to assist with public access to veterinary care. In developing these new methods, the public expects that the College will take measures to ensure the delivery of safe and quality veterinary care by its members including within the dynamics of teams where they may be different providers and methods of service delivery being utilized. Definition of Order The College is proposing that regulation language be developed to include a definition of order. The proposed definition is: Order means the process whereby a veterinarian member may direct a veterinary technician member to perform an authorized activity pursuant to the conditions set out in this Regulation. This definition is designed to provide context related to the development and use of orders and a framework upon which further detail can be developed. Order and the Veterinarian-Client-Patient Relationship (VCPR) The College is proposing that regulation language be developed that would permit orders to be established and used both within and outside of VCPR in recognition of the emergent nature in which these activities may be performed. Initiation and Informed Client Consent	The overarching recommendations related to circumstances in which veterinarian and veterinary technician members can employ orders have been developed in recognition of the enhanced level of professional judgement, decision-making, and accountability that would be required of both professionals in these cases. The proposed approach for all delegable authorized activities to be permitted to be employed through orders has been developed based on extensive research and risk analysis completed by the College. The	The ability for a veterinarian to provide veterinary care outside of a VCPR in emergency situations is already outlined in Section 18 of Regulation 1093 under the Veterinarians Act and the College is seeking an extension of this allowance for veterinary technicians. The Veterinarians Act and Regulation 1093 already permit auxiliaries (such as veterinary technicians) to participate in the collection of informed client consent.	Creation of a new method of veterinary service delivery for veterinarian and veterinary technician members that facilitates full utilization of skillsets while continuing to ensure risk- based public protection.

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Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes
Section	Main Objectives	 The College is proposing that regulation language be developed to confirm that a veterinary technician member is still required to obtain informed client consent before proceeding with performing authorized activities under a veterinarian's order regardless of whether a VCPR has been established. Further Parameters Around When Orders Can Be Developed and Utilized The College is proposing that regulation language be developed to outline the circumstances in which veterinarian members would be permitted to develop and veterinary technician members would be permitted to develop and veterinary technician members would be permitted to perform authorized activities under a veterinarian member's order. This includes, Veterinarian Members Required to develop orders in writing; Could only develop orders for authorized activities that they are competent to perform; Must be assured that the veterinary technician members working pursuant to their order are competent to perform the authorized activities; Remain responsible for the proper development and oversight of orders; and Must remain readily available to provide treatment if required or requested. 	Information proposed approach has also been informed and guided by the core competencies developed by the Ontario Association of Veterinary Technicians that outline the skills that all veterinary technicians should possess upon completion of their education and training. This proposed approach has also been developed to allow for increased flexibility and agility for	Transition Comments	
		 Required to only perform authorized activities that they are competent to perform; Remain able to refuse to perform authorized activities that they are not 	agility for veterinary teams to develop and		
		 Remain responsible for the decision to carry out the order and for their performance of the authorized activities contained in order; Remain responsible for ensuring adherence to the order as written; and 	use orders that suit the particular skillsets and competencies		
		 Remain responsible for ensuring adherence to the order as written, and Remain responsible seeking a veterinarian member when care falls outside of the parameters of the order. 	that exist within their workplaces and allows for the		

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Section	Main Objectives	Primary Concepts	Additional	Transition Comments	Intended
			Information		Outcomes
			use of		
		Authorized Activities Permitted for Use in Orders	professional		
			judgement in		
		The College is proposing the development of regulation language that outlines	determining what		
		that all delegable authorized activities are permitted for use in orders.	may be		
			appropriate within		
			different practice		
			settings.		
			Through this		
			proposed		
			approach,		
			veterinarian		
			members would		
			be permitted to		
			provide a		
			standing		
			prescription		
			through the		
			development of		
			an order.		
			Veterinary		
			technician		
			members would		
			then be able to		
			administer or		
			dispense a drug		
			to an animal(s) or		
			group of animals		
			based upon these		
			prescriptions.		
			Additional		
			information and		
			guidance related		
			to the		
			development and		
			use of		

Section	Main Objectives	Primary Concepts	Additional	Transition Comments	Intended
000001			Information		Outcomes
	+ + + + + + + + + + + + + + + + + + + +		prescriptions		Catoonioo
			pursuant to		
			orders would be		
			provided through		
			College Policy.		
			College Folicy.		
			Veterinarian		
			members would		
			also be permitted		
			to develop orders		
			that outline the		
			ways in which		
			veterinary		
			technician		
			members can		
			perform		
			authorized		
			activities. In this,		
			a veterinarian		
			member could		
			decide to include		
			requirements related to		
			supervision but		
			could also allow		
			for a veterinary		
			technician		
			member to		
			independently		
			perform		
			authorized		
			activities if they		
			adhere to the		
			requirements of		
			the order.		

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Section	Main Objectives	Primary Concepts	Additional	Transition Comments	Intended
			Information		Outcomes
			This proposed		
			approach is not		
			intended to		
			prevent a		
			veterinary		
			technician		
			member from		
			performing a		
			clinical		
			assessment as		
			this is a separate		
			activity from		
			making or		
			communicating a		
			diagnosis.		