

Delegation of Veterinary Tasks Policy Regulatory Policy

Effective Date: December 6, 2023

Review Date: 2026

1. Purpose:

This policy serves to provide veterinary professionals with better clarity and guidance on how tasks can be delegated.

2. Background:

This policy was adopted by the MVMA Council in anticipation of the passage of amendments to the RVT, RVT student, and AHA scope of practice at the January 26, 2024 AGM.

The by-law amendments that are proposed for the 2024 AGM are a significant departure from the current scope of practice. Rather than a positive list of veterinary tasks that can be completed by an RVT, RVT student and AHA, the by-law provides a negative list of veterinary tasks that cannot be completed by the RVT, RVT student and AHA.

With this shift in the framing of scope of practice, the MVMA Council seeks to provide guidance on how veterinary tasks can be delegated in an appropriate manner.

Membership was consulted (written and via virtual meeting) on the content in Appendix A in the spring and summer of 2023. The final document was developed by the Ad Hoc RVT Scope of Practice, Retention, and Career Advancement Committee and in consideration of the feedback of the consultation process.

3. Policy Statement:

The MVMA Council adopts this policy, including Appendix A "Delegation of Veterinary Tasks" to provide guidance on how veterinary tasks can be delegated.

4. Procedure:

N/A

Delegation of Veterinary Tasks

Veterinary care is most effectively delivered by a highly trained veterinary team working together to provide an optimum patient and client experience. A team approach recognizes the specific skills, knowledge and competencies that each member of the team brings to the provision of safe, quality care for either a specific animal or a herd. Veterinarians are encouraged to delegate to veterinary technologists to maximize job satisfaction, job retention and practice efficiency.

The Veterinary Medical Act grants exclusive scope of practice of veterinary medicine to registered veterinarians, Veterinary Corporation permit holders, veterinary technologists and those authorized to do so under the MVMA By-laws, including animal health assistants.

Purpose of Document

The utilization of Registered Veterinary Technologists (RVTs) is essential in building an efficient and healthy veterinary practice. Utilizing RVTs to their fullest extent can increase productivity, reduce RVTs leaving the profession, and increase job satisfaction and career opportunities. Utilizing RVTs can also increase overall medical care to Manitobans and increase the sustainability of the practice of veterinary medicine. However, there are barriers practices may face when looking to utilize RVTs. This guidance document will provide clarity on the scope of practice for RVTs, as well as information about liability and other barriers practices may face when looking to utilize RVTs.* Please note that the information contained in this document pertains to RVTs and Animal Health Assistants.

By-Law

The MVMA General By-Law No. 1 defines the RVT Scope of Practice as:

A Practicing Veterinary Technologist Member may practice all aspects of veterinary medicine other than

- (a) making a diagnosis
- (b) determining a course of treatment (including prescribing medications)
- (c) applying surgical techniques

Note: The RVT and Auxiliary Task lists are helpful to consult when determining appropriate tasks to delegate.

<u>Appendix 1- Delegation to a Registered Veterinary Technologist</u>

Appendix 2- Practice Expectations for Assigning Tasks to an Unregistered Auxiliary

Appropriate Delegation of Medical Tasks

Within RVT Scope of Practice?

 A veterinarian can only delegate a task that is within the RVT Scope of Practice. The RVT Scope of Practice does <u>NOT</u> include determining the course of treatment (including prescribing), diagnosing, and applying surgical techniques

Is the RVT Competent to Provide the Service?

- •The delegating veterinarian and RVT must determine if the RVT is competent to safely complete the delegated task.
- •If NO- Consider how the team can work together to increase the RVT's competence

What level of supervision is appropriate?

• Determine the appropriate level of supervision.

Is the RVT willing and able to provide the care?

•The RVT must agree to provide care for delegation to be complete.

Delegation

A veterinarian is able to delegate a medical task to an RVT so long as:

- the task is within the RVT scope of the practice;
- the RVT is competent to provide the service;
- the veterinarian will appropriately supervise; and,
- the RVT has accepted the delegation.

The decision to delegate is at the discretion of the supervising veterinarian.

Practices may wish to develop standard operating procedures (SOPs) as they develop their practice operations to clarify how tasks are delegated within the practice.

Competence

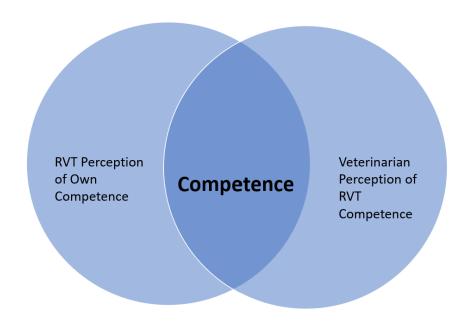
Professional competence refers to the knowledge, skills, and abilities that equip a professional for success in the workplace and lifelong career management. Competence is not a fixed state, but rather a dynamic process that changes over time. As an RVT gains experience and engages in ongoing learning, their competence grows and evolves. The development of professional competence is affected by various factors, including access to ongoing training and mentorship, exposure to new techniques, and active involvement in practice. As an RVT progresses from new graduate to expert, their competence becomes more intuitive, and they are better equipped to handle complex tasks under a lower level of supervision.

As a determination of competence relies on the supervising veterinarian determining that the RVT is competent to provide care and the RVT determining that they are personally competent to provide care, competence is the intersection of these two viewpoints.

Resources: The RVT and Auxiliary Task lists are helpful to consult when determining appropriate tasks to delegate.

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Veterinarian Role in Determining Competence

The supervising veterinarian is responsible for determining the competency of the RVT to perform allowable animal health care tasks. Here are some ways a veterinarian can determine an RVT's competence:

- 1. Ask the RVT: Ask the RVT about their experience and training in performing specific tasks or working with certain species. Basic and direct communication can help the veterinarian assess the RVT's level of competence in those areas.
- 2. Monitor performance: The veterinarian must monitor the RVT's performance on the job. If the veterinarian has seen issues with a specific task or species, they can provide additional training or supervision to help the RVT improve their skills. If an RVT has shown they are proficient in a task, the veterinarian can consider lowering the level of supervision needed for the specific task.
- 3. Onboarding: When onboarding an RVT, the veterinarian can gradually increase the level of difficulty of tasks assigned to the RVT and decrease the level of supervision required as the RVT demonstrates competence. The veterinarian can also pair the RVT with a more experienced RVT to provide guidance and support. This can help the RVT develop their skills and gain confidence in performing tasks.

Ultimately, the veterinarian is responsible for ensuring that the RVT is competent to perform the tasks assigned to them. By using a combination of these methods, the veterinarian can assess the RVT's competence and provide appropriate training and supervision as needed.

RVT Role in Determining Competence

While each Veterinary Technologist is permitted to engage in the scope of practice as is articulated in the MVMA general By-Law No. 1, each Veterinary Technologist is under a professional obligation to practice solely within their personal competence. Personal competence is not static and can change based on time, experience, level of supervision, status of patient, etc.

When engaging in practice, the following questions may be helpful in determining whether you are competent to engage in a proposed act.

1. Am I permitted to engage in the task under the MVMA General By-Law No 1?

Note that RVTs are prohibited from making a diagnosis, determining a course of treatment (including prescribing), and applying surgical techniques.

- 2. When did I last engage in the proposed act?
- 3. When did I last engage in the proposed task on the same or similar species?
- 4. Does the patient exhibit behavior (like aggression) that may require a higher level of experience?
- 5. Am I competent to engage in the proposed task on this specific patient?

Supervision

Proper supervision is essential to ensure the well-being of the patients, as well as compliance with legal and ethical standards. This section aims to assist veterinarians in determining the appropriate level of supervision for RVTs based on their skills, experience, and the specific tasks at hand.

1. Levels of Supervision:

Direct Supervision:

- RVTs work under the direct supervision of a veterinarian.
- Suitable for complex medical procedures, assisting in surgery, and tasks that require immediate decision-making.
- Veterinarian's physical presence in the facility is required.

Indirect Supervision:

- RVTs work under indirect supervision, where a veterinarian is available for consultation by phone or other means.
- Appropriate for routine medical procedures, and tasks with established protocols.
- Veterinarian must be accessible and able to respond promptly.

2. Factors Influencing Supervision Levels:

Veterinarians should consider the following factors when determining the appropriate level of supervision for RVTs:

- Experience and Competency: Evaluate the RVT's experience, skills, and competency in specific procedures.
- Task Complexity: Assess the complexity of the task or procedure and the potential risks involved.
- Patient Stability: Consider the stability of the patient, especially in emergency situations.

3. Regular Assessment and Training:

- Conduct regular assessments of RVTs' skills and knowledge.
- Provide ongoing training to enhance their capabilities and keep them updated with the latest developments in veterinary medicine.

4. Communication and Documentation:

- Maintain clear communication channels between veterinarians and RVTs regarding task assignments and expectations.
- Document tasks performed by RVTs, including patient information, procedures, and outcomes, for legal and reference purposes.

Determining the appropriate level of supervision for RVTs is essential for the efficient and safe operation of a veterinary practice. By considering the RVT's skills, experience, task complexity, and other relevant factors, veterinarians can ensure that RVTs contribute effectively to the overall healthcare team while upholding the highest standards of patient care.

Special Topics

How to Increase Competence

As a Registered Veterinary Technologist (RVT), it is expected that you will learn and grow as a professional over the course of your career. Here are some ways to increase your competence:

- 1. Pursue Additional Education and Training
- Consider attending a workshop or a conference or taking courses or pursuing a degree in a specialized area of veterinary medicine to expand your knowledge and skills. Don't forget to share your new skills with colleagues.
- A practice can also bring this in house by having a staff CE lunch or CE day.
- A Veterinary Technologist Specialist (VTS) is a designation that recognizes a technologist's advanced knowledge and skills in a specific area of veterinary medicine. Pursuing a VTS can help you gain new skills and increase your earning potential.

2. Informal in Practice Training

There are several ways to learn new skills within your practice, including:

- Watching a veterinarian or more advanced RVT perform the technique
- Using a good patient to practice the technique on

There are many ways to increase your competence as an RVT, including gaining new skills, pursuing VTS, attending conferences and workshops. By continuing to learn and grow as a professional, you can increase your earning potential, job satisfaction, and contribute to an environment of mutual trust and collaboration.

Accountability/liability of the Veterinarian and RVT in delegation

The veterinarian is responsible to / liable for:

- Ensuring an RVT is competent to complete a delegated task.
- Ensuring that an RVT has the appropriate level of supervision when completing the delegated task.
- Ensuring clear communication when a task is delegated and that the RVT has accepted the delegated task.
- Addressing near misses and adverse outcomes to ensure that an RVT remains competent to perform specific tasks

The RVT is responsible to / liable for:

- Only accepting delegated tasks when they are competent to complete them.
- Continuously assessing personal competence
- Completing delegated tasks competently
- Asking the supervising veterinarian for assistance, clarification and support when needed.

Civil Liability vs Professional Liability

Civil liability and professional (regulatory) liability are two different legal processes that can be taken against a veterinary professional. The main differences between these two processes are: **Civil Liability**

- A civil action is a lawsuit or arbitration that is filed by an individual or organization against another individual or organization.
- Civil actions are "civil" in nature and do not involve any prospect of imprisonment.
- Civil actions can be initiated by a client or a third party who has suffered harm or loss due to the veterinary professional's actions or inactions.
- The purpose of a civil action is to seek compensation for damages or losses incurred by the plaintiff.
- Civil proceedings can NOT result in limitations, suspensions and cancellations of a members registration and/or licence, as this is purview of the regulatory body (the MVMA).

Professional (Regulatory) Liability

- Regulatory proceedings are administrative actions taken by a regulatory body (the MVMA), against a registered professional (veterinarian or veterinary technologist) (*please note that Animal Health Assistants are not veterinary professionals and not subject to regulatory proceedings. The supervising veterinarian is solely liable for the conduct of an Animal Health Assistant.)
- Regulatory proceedings are initiated when a complaint is filed against the veterinary professional.
- The purpose of regulatory proceedings is to investigate and adjudicate complaints filed against the veterinary professional and to take disciplinary action if necessary.

- TIP- documents supporting appropriate delegation of tasks are helpful in demonstrating that the veterinarian appropriately delegated a task to an RVT.
 - See 2023 AAHA Technician Utilization Guidelines for examples and tips (https://www.aaha.org/aaha-guidelines/2023-aaha-technician-utilization-guidelines/home/).
- Regulatory proceedings can result in limitations, suspensions and cancellations of a members registration and/or licence.

In summary, civil action is a legal process initiated by an individual or organization seeking compensation for damages or losses incurred, while regulatory proceedings are administrative actions taken by a regulatory agency to investigate and adjudicate complaints filed against a licensed professional.

What is an Animal Health Assistant (AHA)?

- AHAs are a group of persons that received on the job training and were grandfathered to perform tasks of an RVT.
- This is a closed category, meaning that new Animal Health Assistant permits are not issued (and have not been issued for over a decade).
- All AHAs are required to maintain a permit with the MVMA.
- AHAs have the same scope of practice as a veterinary technologist.
- There are roughly 7 AHAs in Manitoba.
- A listing of AHAs can be found on the MVMA website at https://www.mvma.ca/animal health assistants/

How to Reassess Competence After a Near Miss Experience in Veterinary Medicine

Experiencing a near miss can be a traumatic event that can affect a veterinary professional's competence and confidence. It is important to reassess competence after a near miss experience to ensure that the veterinary professional is able to function effectively in all important aspects of veterinary medicine. Here are some steps that can be taken to reassess competence after a near miss experience in veterinary medicine:

- 1. Provide support: After a near miss experience, it is important to provide support to the veterinary professional. This can include psychological first aid, debriefing, and follow-up support. Support can include short-term counseling or referral to an appropriate service for additional support. Members are able to access Homewood Health for mental health services.
- 2. Identify needs: Identify the veterinary professional's current needs and concerns. Encourage the veterinary professional to talk about what happened and clarify any questions or concerns they may have.
- 3. Assess competence: Assess the veterinary professional's competence in all important aspects of veterinary medicine. One way to open a conversation about competence is to ask a simple question about the need for a sense of self-efficacy or their preference for what is most helpful to regain a sense of self-efficacy.
- 4. Develop a plan: Develop a comprehensive professional development plan that covers needed training topics. The plan should provide information on the topic title and brief description, audience, training delivery method, and intended learning outcomes that indicate participant mastery and/or application of the training.
- 5. Provide training: Provide training to the veterinary professional to build competence and confidence.
- 6. Monitor progress: Monitor the veterinary professional's progress and adjust the plan as needed. Check in with the veterinary professional regularly to see how they are doing and if they need any additional support.

By following these steps, veterinary professional's can reassess their competence after a near miss experience and build the skills and confidence needed to function effectively in all important aspects of veterinary medicine.

Resources

2023 AAHA Technician Utilization Guidelines

- https://www.aaha.org/aaha-guidelines/2023-aaha-technician-utilization-guidelines/home/

MVMA General By-Law No 1.

Appendix 1

Delegation to a Registered Veterinary Technologist and Animal Health Assistant

Below is a comprehensive (but not exhaustive) list of skills that can be delegated to an RVT or AHA.

The following skills are medical in nature, constitute the practice of veterinary medicine, pose a risk to the patient and the public, and can only be delegated to a registered veterinary technologist or grandfathered animal health assistant.

Client Relations/Practice Management

Administer and maintain Infection Prevention and Control and biosecurity protocols and staff education with a focus on limiting hospital-acquired infection, recognition of potentially infectious patients, isolation protocols

Develop and provide client education on topics including, but not limited to, clinical nutrition, tube feeding care, diabetes management, behaviour, post chemotherapy care

Communication of medical instructions for medical/surgical patients

Respond to medical/surgical questions

Participate in the development, implementation and review of medical policies, protocols and procedures

Pharmacy

Perform final check of pharmaceuticals

Prepare and administer medications i.e. calculate, dilute oral and parental, IV fluid rates, constant rate infusions

Educate clients regarding prescribed drugs i.e., indications and contraindications, handling, storage, administration, side-effects, drug interactions, safety for patient and humans

Handle, measure and administer controlled substances

Maintain controlled substance acquisition and usage logs

Nursing Procedures

Perform a comprehensive physical examination including assessments and documentation of findings including mentation, heart rate, pulse rate, respiratory rate, heart/lung sounds, body condition score, pain score, hydration

Perform venipuncture for treatment, diagnostic, or blood sampling including identifying appropriate and inappropriate sites and blood volumes

Administer oral and parenteral medications

Administer biologicals (including rabies)

Internally express anal sacs

Perform fluorescein staining, Schirmer tear test and tonometry

Establish and manage intravenous access sites as determined by the patient conditions and therapy required

Administer and maintain fluid therapy

Assess volume status and administer crystalloid and colloids via infusion pump or drip set. Assess response to fluid therapy plan

Collect and administer blood and blood products, monitor administration and adjust administration as required

Place and maintain of advanced catheters such as PICC lines, intraosseous, arterial, central, catheters

Perform and evaluate invasive (pressure transducer or aneroid manometer) and non-invasive blood pressure measurement. (oscillometric, Doppler, etc)

Perform thoracocentesis and non-surgical chest tube placement

Maintain chest, tracheotomy, pharyngostomy, nasogastric, esophagostomy tubes

Place and care for urinary catheters

Collect urine samples including by cystocentesis with or without ultrasound guidance (excluding collection by free catch * please note free catch can be done by auxiliary staff))

Setup and evaluate normal vs abnormal ECG

Apply established emergency protocols for CPR e.g. RECOVER CPR Algorithm

Perform appropriate wound care

Administer enemas

Perform tattoo

Insert microchip

Trim hooves

Clean sheath

Calculate and administer nutritional support using a variety of techniques (esophagostomy, nasogastric, parenteral)

Perform nasogastric intubation

Use esophageal feeder

Apply bandages and splints

Remove sutures or staples

Remove casts

Perform rehabilitation techniques including, but not limited to, massage therapy, cryo/heat therapy, range of motion, low level laser therapy, shockwave therapy

Explain timing and types of pregnancy testing

Semen collection

Perform artificial insemination

Assist and prepare for large animal reproductive procedures including embryo flush, oocyte aspirations, endometrial biopsies etc

Assist with birthing, both routine and dystocia

Avian beak and feather trimming

Peri and IntraOperative Procedures *Direct supervision is required when assisting with surgery (for example handling tissue)

Review pre-operative evaluation, evaluate current patient status, organize and implement anesthesia

Perform a surgical clip and aseptic prep application

Perform set-up, maintenance, troubleshooting and operation of surgical equipment including, but not limited to suction, cautery, laser and fiberoptic equipment

Aseptically handle tissues, instruments and supplies during surgery

Administer post-operative care including hydrotherapy, orthopedic, and neurological care

Perform the role of laser safety officer

Dental Prophylaxis

Perform scaling and polishing, subgingival scaling, root planing and curettage- this does NOT include dental extractions

Probe, measure, and chart pockets with a periodontal probe; grade periodontal disease; complete dental chart

Obtain diagnostic images using intraoral radiology positioning

Perform dental anesthesia blocks

Perform flotation of equid teeth

Anesthesia

*Direct supervision is required when a patient is under anesthesia

Review patient history, PE and diagnostic results in collaboration with a veterinarian to assign patient anesthetic status score (ASA)

Document- Delegation of Veterinary Tasks Current as of December 6, 2023 Assign appropriate numerical pain score after reviewing patient history and physical examination in conjunction with evaluation of any prescribed analgesic plans to provide effective pain management

Set up, test, and/or troubleshoot anesthesia machines and breathing circuits

Develop patient-specific anesthetic protocols for veterinarian review and implementation to provide effective pain management and optimal anesthetic

Calculate dosages for and administer injectable analgesics and anesthetics as prescribed by the veterinarian

Perform regional nerve blocks i.e. dental, biopsy site, testicular, linea, distal limb

Perform epidural anesthesia

Utilize ECG, capnography, pulse oximetry, blood pressure monitors and thermometers to assess patient status and anesthetic depth

Use clinical signs and monitoring equipment to monitor patient status in all stages of anesthesia

Record and maintain anesthesia and operative medical records

Evaluate the effects of common pre-anesthetic, induction, and maintenance drugs, recognize and respond to adverse reactions, complications or emergencies

Use and assess peripheral nerve simulation

Monitor and evaluate appropriate extubation time, anesthetic recovery, postoperative care and pain management during the recovery period

Diagnostic Procedures

Perform urinalysis

Perform CBC

Identify blood, external and internal parasites

Perform blood chemistry tests

Perform serologic tests

Perform bacteriologic procedures

Examine canine vaginal smears

Assist in collecting, preparing and appropriately evaluating transudate, exudates & cytologic specimens e.g. joint, cerebrospinal, airway and body cavity

Perform and evaluate fine needle tissue aspirates and impression smears

Perform point of care tests e.g. lactate, blood glucose, ketostix

Collect and evaluate skin scrapings

Perform blood type and cross match, and evaluate results

Prepare and stain bone marrow specimens

Examine semen

Evaluate blood gases

Perform California mastitis test

Perform necropsy procedures including collecting photographs, videos and tissue samples

Prepare samples for analyses and submission

Perform the role of lab quality assurance officer

Diagnostic Imaging

Operate and maintain xray, CT and MRI machines to produce diagnostic images

Calculate and administer contrast media via different routes for contrast studies

Maintain and utilize ultrasound to obtain diagnostic images

Perform the role of radiation quality assurance officer

Euthanasia

Discuss quality of life assessments with client

Administer premedication and euthanasia solution with or without client present

Confirm patient is deceased

Appendix 2

Practice Expectations for Assigning Tasks to an Unregistered Auxiliary

An unregistered auxiliary is any person working within a PIPS inspected practice who is not a registered veterinary technologist (RVT) or registered veterinarian and who is assigned to do tasks within the veterinary practice. This includes receptionists, assistants and other lay personnel, whether formally or on-job trained.

Veterinarians and technologists from non-accredited veterinary colleges who are not registered with the MVMA fall into this category.

Tasks that are generally not considered to be medical procedures can be performed by an unregistered auxiliary. Examples of these include:

Client Relations

Provide predetermined client education, developed by a veterinary professional

Communicate predetermined plans for medical instructions for medical/surgical patients

Participate in the development, implementation and review of practice policies, protocols and procedures

Make appointments

Communicate with clients, including responding appropriately to emergency situations

Check in an appointment

Check out medical/surgical case where the patient has been released by the veterinarian/RVT

Discharge medical/surgical patients with communication of medical instructions where veterinarian/RVT has already spoken with client

Medical and Surgical admission of a patient. Medical questions would need to be handled by a veterinary professional

Maintain records, and prepare appropriate certificates for signature

Perform basic filing of medical records, radiographs, lab reports, etc.

Maintain x-ray, surgery, anesthesia, and laboratory logs

Recognize and respond appropriately to veterinary medical emergencies (triage client communications)

Maintain basic cleanliness and orderliness of a veterinary facility (including hospital, clinic, practice, or laboratory)

Perform basic veterinary medical record keeping procedures using electronic or paper-based record systems.

Scribe/transcription of medical records dictated (live or recorded) by vet or RVT i.e. dental charts

Maintain biosecurity protocols of the veterinary practice entity

Communicate basic nutritional information including life-stage counselling

Pharmacy

Reconstitute medications

Educate clients, using information prewritten by a veterinary professional, regarding prescribed drugs i.e., indications and contraindications, handling, storage, administration, side-effects, drug interactions, safety for patient and humans

Use and explain the 5 rights of pharmaceuticals and biologics (the right patient, the right drug, the right time, the right dose, and the right route)

Perform logistical services in relation to dispensing, including inventory management, counting pills, and preparing labels, completing the sale- excluding performing the final check of pharmaceuticals.

Manage biomedical and hazardous waste, including storage, handling and disposal

Handle and dispose of biomedical sharps

Perform inventory management, including receiving, storage and handling

Hospital Support

Read common animal identification methods i.e. read tattoo, scan microchip, ear tag, RFID

Place in, and remove animals from cages/kennels/stalls

Restrain animals including the use of restraint equipment

Prepare surgical equipment/supplies

Sterilize instruments & supplies using appropriate methods

Prepare gowns, masks, gloves and drapes

Operate & maintain autoclave

Provide operating room sanitation & care

Position patients (common procedures)

Open sterile pack and gown for surgery

Perform post-surgical clean-up of equipment, patient and surgical suite

Perform therapeutic bathing, basic grooming, and dipping of animals

Provide routine record-keeping, husbandry, and observation of hospitalized patients

Feed routine and prescription diets to hospitalized animals

Clean & disinfect cages, kennels and stalls

Trim nails on companion animals

Remove bandages and splints

Apply non-therapeutic equine leg & tail wraps

Collect voided urine and fecal samples

Maintain emergency medical supplies

Follow recommended radiation safety measures

Assist in positioning patients for radiology, ultrasound

Label, file and store diagnostic images

Complete radiographic logs, reports, files and records

Package lab sample for shipment

Routine start up, shut down and maintenance of lab equipment

Handle disposal of dead animals

Assist CPR team by recordkeeping (and chest compressions, if formally trained such as through the RECOVER program)