A Veterinary House Call Practice offers house call veterinary services exclusively. It is prohibited to provide veterinary services as a veterinary house call practice at locations other than the client’s home.

The standards should be met by all veterinary practices which provide house calls as a service of the practice.
Applying For Approval

Registered veterinarians wishing to conduct a house call practice must address each of the standards in this application pack.

Photographs should be submitted as additional supporting information.

All acts of veterinary science must be performed under conditions where their performance could not be construed to be negligent or incompetent (professional misconduct) under Section 22F of the Veterinary Surgeons Act 1936 (the Act).

Particular note should be taken of standard number 6 – limits of practice, and standard number 12 – practices based in established veterinary premises.

The Board may by written notice require the applicant to allow a member or officer of the Board to inspect the vehicle the subject of the application and the place where instruments are sterilised and scheduled drugs are stored.

The Board may impose on an approval any reasonable condition the Board decides and amend, suspend or cancel an approval.

Offence and professional misconduct provisions apply to persons conducting a veterinary house call practice that is not approved by the Board, those not complying with a condition of an approval and those submitting false information in an application.

Forward completed form to:

The Registrar
Veterinary Surgeons Board of Queensland
GPO Box 46
BRISBANE QLD 4001

Further information on completing the submission form can be obtained by contacting the Registrar on telephone (07) 3087 8777 or email vsbqld@daf.qld.gov.au

The submission is designed to be a self assessment document to ensure planning for proposed veterinary house call practice addresses in entirety the uniform minimum standards applied across the state for the purpose of consumer and animal welfare protection.

Attachments

i) Records
ii) Storage of Restricted/Controlled Drugs

Please submit the Application form on the next page and pages 1 to 3 of the application pack for assessment by the Board.

NOTE: Detailed information must be provided for each of the standards in this application pack. A copy of the completed submission form should be retained by the applicant.
The Veterinary Surgeons Board of Queensland

Application for conducting a Veterinary House Call Practice (Small Animals)

Applicant Details  (Please Print)

Family Name: ___________________________  Given Names: ___________________________________________

Residential Address: ________________________________________________________________ Postcode: ______________

Intended Practice Name: ________________________________________________________________

Postal Address: __________________________________________ Postcode: ______________

Telephone: ______________ Facsimile: ______________ Email: __________________________________________

Proposed commencement date of practice *: _______ / _______ / _______

Intended area to be serviced: ______________________________________________________________

Base practice address (where drugs safe and records are to be kept):

I hereby declare that no owner of the practice to be conducted at these premises has been convicted of a *disqualifying offence and the information provided in this application is complete and accurate. (*Indictable offences, offences under veterinary surgeons, animal care and protection, or drugs and poisons legislation.)

Signature of Applicant:

________________________________________

Date: / /

*Practice cannot commence until approval has been granted.
GENERAL MINIMUM STANDARDS

All parts of this application must be completed in full. If the answer to any question is NO, please supply a detailed explanation as an additional inclusion to your application.

General Standards

Standard 1
Case records of veterinary examinations and procedures performed will be maintained in the format defined in Regulation 25 of the *Veterinary Surgeons Regulation 2002.*  
(Refer to Attachment 1) and the confidentiality of these records ensured.

Detail system to be used and discuss how confidentiality will be ensured: ____________________________

Standard 2
The house call practice has a permanent communication base, (which can be mobile), for clients. 
A specific non-mobile area is set aside for the storage of drugs (complying with Queensland Health requirements) and sterilisation of instruments and other items necessary for minor surgery.

Provide detail of communication base: ________________________________________________________

Provide detail of where & how instruments will be sterilised: _________________________________

Range of pharmaceuticals to be used are consistent with a good standard of practice and the range of procedures undertaken.

Cold storage facility for pharmaceuticals are independent of those for food or noxious samples.

Storage/security, labelling, recording of restricted and controlled drugs meet Queensland Health requirements.  
(Attachment 2)

Detail storage/security arrangements:

S4 (Restricted):
Location of storage: ____________________________________________________________

S8 (Controlled):
Location of storage receptacle: ____________________________________________________

Detail type of mounting: ____________________________________________________________

Show Brand/Model of Receptacle: _____________________________________________________
Standard 3
It must not be suggested in any way that it is the only practice in a given location providing such a service or seek to disadvantage other established practices which provide a similar service.

Discuss: 

______________________________________________________________________________

______________________________________________________________________________

Standard 4
In accordance with acceptable veterinary practice it is essential when called to give a second opinion, to consult with the original veterinarian before undertaking the case. On completion of this consultation, the client will be referred back to the original veterinarian.

Discuss: 

______________________________________________________________________________

______________________________________________________________________________

Practice Standards

Standard 5
Instrumentation required for a competent clinical examination and the performance of minor surgery is available.

Detail equipment: 

______________________________________________________________________________

______________________________________________________________________________

Veterinary Scales are included.

Yes  No

Standard 6
Practice undertaken at the animal owner’s premises will be limited to medical examinations and local anaesthetic or sedation procedures.

Yes  No

Standard 7
A House call practice will have access to Board approved premises of a standard where cases requiring hospitalisation and/or procedures requiring general anaesthetic or intensive care can be treated. A letter from the owner of this practice confirming this arrangement is required to be submitted with your application.

Yes  No
Standard 8
Initial information to clients will include details of out-of-ours services and how they can be obtained.

Detail: ________________________________________________________________

Vehicle Standards

Standard 9
Vehicle used for house calls meets any government and local authority requirements which may apply.

Standard 10
Vehicle used for house calls will be clean and hygienic at all times and have secure drug storage capability.

Detail how drugs will be secured in vehicle: ____________________________________

Identification Standards

Standard 11
If a business name is to be used to identify the practice, it must first be considered by the Board. If it is not, or does not include the name of the principal veterinarian, the client’s ability to identify the bona fides of the person entering their dwelling or with whom they are dealing is demonstrable.

Detail: ________________________________________________________________

Standard 12
Practices based in veterinary premises which offer house call services to clients will not represent their house call service under any name but the base practice name.

Is the practice based in existing veterinary premises?

If yes, provide name of veterinary premises _____________________________________
VETERINARY SURGEONS BOARD OF QUEENSLAND
VETERINARY SURGEONS REGULATION 2002

Regulation 25. Record of treatment of animals

1) A veterinary surgeon must, for each animal treated by the veterinary surgeon, keep a record including -

(a) the animal's identifying details; and
(b) the following information for each consultation about the animal -
   i) details of any condition or injury of the animal;
   ii) any provisional or definitive diagnosis;
   iii) full details, including the date, of any examination, procedure or test performed;
   iv) full details of any treatment given, including details of any drugs administered or dispensed;
   v) results of any treatment given;
   vi) details of any instructions given when the animal is discharged.

2) The veterinary surgeon must keep the record for three (3) years from the day the last information about the animal is included in the record.

As an extension of the Regulation the Board has nominated the components of model clinical records as:

- Identity of the veterinarian creating the record
- Date of record
- Patient and client ID
- Presenting clinical signs
- Record of examinations including history, vital signs and weight
- Provisional diagnosis and rule outs
- Treatment plan
- Diagnostic examination results
- Chronological list of treatments
- Hospital admission form and/or general anaesthetic consent form
- Surgery/anaesthetic log
- Referral detail and reports
- Discharge instructions
- Client communication record
- Billing record
HEALTH (DRUGS AND POISONS) REGULATION 1996

STORAGE OF RESTRICTED DRUGS (S4)

Section 211.

1. A veterinary surgeon in possession of a restricted drug at a place must keep the drug in a cupboard, dispensary, drawer, storeroom or other part of the place to which the public does not have access.

2. A veterinary surgeon may possess a restricted drug at a place other than the place where the person practises his or her profession.

3. The veterinary surgeon must keep the drug in a secure place under his or her personal control.

STORAGE OF CONTROLLED DRUGS (S8)

Section 119.

1. A veterinary surgeon in possession of a controlled drug must keep the drug -
   a) in a receptacle that complies with Appendix 6* of the Regulation; or
   b) in another place (a secure place) an inspector who inspects the place is reasonably satisfied is at least as secure as a receptacle mentioned in paragraph (a)

2. The veterinary surgeon must -
   a) always keep the receptacle or place locked (other than when a controlled drug is being put into or taken out of the receptacle or place); and
   b) personally possess the key or combination to the receptacle or place.

3. A veterinary surgeon may possess a controlled drug at a place other than the place where the person practises his or her profession.

4. The veterinary surgeon must keep the drug in a secure place under his or her personal control.

* Details attached
APPENDIX 6

MINIMUM REQUIREMENTS FOR CONTROLLED DRUG RECEPTACLES

Sections 118 (1)(a) and 119 (1)(a)

PART 1 – CABINETS

Body requirements

1. (1) The body of a cabinet must be constructed of a single layer of mild steel plate at least 10 mm thick and with continuous welding of all joints.

(2) The cabinet body must-

   (a) incorporate

      (i) a full length steel lock keeper bar welded to the inside of the cabinet on the lock side; and

      (ii) a full length steel bar welded to the inside of the cabinet on the hinge side that acts as a tamper-proof recess for a dog bar; and

   (b) have, for installation-

      (i) 4 suitably sized holes in the back plate; or

      (ii) 2 suitably sized holes in the back plate and 2 suitably sized holes in the base of the cabinet.

Door requirements

2. (1) The door of a cabinet must be constructed of mild steel plate at least 10 mm thick.

   (2) When the cabinet door is closed, the door must-

      (a) fit flush with the body of the cabinet; and

      (b) have a clearance around the door of not more than 1.5 mm.

   (3) The cabinet door must incorporate-

      (a) hardened steel plate, at the site of attachment of the lock, of an area that protects all parts of the lock from drilling; and

      (b) a solid, full length dog bar, down the inside of the door on the hinge side, that recesses behind the bar mentioned in section 1(2)(a)(ii).
Lock requirements

3. (1) A cabinet lock must be-
   (a) a 6-lever pick-proof lock; or
   (b) a lock mechanism of a level of security equal to, or greater than a 6-lever pick-proof lock; or
   (c) a tamper-proof combination lock of, or at least equivalent to, the ‘Sergeant & Greenleaf’ type.

(2) The cabinet lock must-
   (a) be continuous welded to the inside face of the door; and
   (b) incorporate a steel saddle around the lock, welded to the inside face of the door; and
   (c) be fitted with a steel guard around the bolt of the lock, welded to the inside face of the door.

Hinge requirements

4. The hinges on the door of a cabinet must be-
   (a) constructed of heavy duty steel; and
   (b) continuous welded to the door and the body of the receptacle; and
   (c) tamper-proof; and
   (d) concealed on the inside of the cabinet if possible.

Mounting requirements

5. (1) The cabinet must be mounted by 1 of the methods mentioned in sections 6, 7, 8 and 9.

(2) The methods are called, in order, type 1, 2, 3 and 4 mountings.

(3) The chief health officer may approve another way of mounting that is of equal or greater security.
Type 1 mounting

6. (1) For type 1 mounting, a cabinet must be mounted to a concrete, brick or timber wall by 4 bolts made from heavy duty galvanised steel or equivalent quality bolts, of at least 12.7 mm diameter, that are passed through the wall and fastened inside the rear of the cabinet by steel ‘cyclone’ type washers and suitable nuts.

(2) However, for a timber wall, the bolts must pass through studs or noggings in the wall.

Type 2 mounting

7. (1) If type 1 mounting is not appropriate, a cabinet must be fixed to a concrete or brick wall by 4 dynabolts or other similar expanding type bolts.

(2) The bolts must-

(a) be heavy duty galvanised steel bolts, or an equivalent quality bolt, of at least 12.7 mm diameter; and

(b) be fixed as far into the concrete or brickwork as is practicable.

Type 3 mounting

8. (1) If the wall is of timber construction but the floor is of brick or concrete, the cabinet must, if possible, be mounted-

(a) to the floor - by 2 dynabolts or other similar expanding type bolts; and

(b) to the wall - by 4 coach screws into the studs or noggings in the wall.

(2) The bolts and screws must be of at least 12.7 mm diameter.

Type 4 mounting

9. (1) If there is no brick or concrete floor or wall to which a cabinet may be mounted-

(a) but there is a wall and a floor to which the cabinet may be mounted-the cabinet must be mounted by 4 coach screws into the studs or noggings of 1 wall and 2 coach screws through the base of the cabinet into the framework of the floor; or

(b) but there are 2 walls to which the cabinet may be mounted-the cabinet must be mounted by 4 coach screws into the studs or noggings of the rear wall and 2 coach screws through the side of the cabinet into the studs or noggings of the second wall.

(2) The screws must be of at least 12.7 mm diameter.