Items to bring up with OMAFRA re Proposed VPA

Background:

History for those of you new to the 'goings on' in **Ontario**... and FWIW, what happens in one province affects the others. So keep reading!

The College of Veterinarians of Ontario (CVO) is moving away from their current Vet Act (which apparently affords them complete authority on all things medical on an animal - despite the definition of Veterinary Medicine being, Surgery, Prescription of Drugs, Ova & Embryo Transplant). They are moving to a 'Restricted Activities' model of regulation (much like the human health practices).

They put together their first draft in 2017. They sought consultation with the Animal Rehab Division (ARD) of the Canadian Physiotherapy Association, and there were several meetings and letters between them. In the end, they did not accept any of the suggested changes or address any of their concerns. The CVO then submitted their proposal to the Government. With expected time delays for moving legislation and then Covid, the Ministry back-burnered moving forwards with the proposal (until now).

In the meantime, the CVO went to work on creating some documents, as would be permitted within the act. First, was the 'Restricted Activity' of "Applying or ordering the application of a form of energy prescribed by the regulation under this Act." It was a disaster, and would have meant that only a veterinarian could use laser therapy, ultrasound therapy, and shockwave - all tools currently being used by physiotherapists, chiropractors, and vet techs with canine rehab training. They put it together without stakeholder consultation, and we were fortunate enough to be alerted to this by a veterinary technician. We created a MASSIVE letter writing campaign and accomplished a significant turnaround in the wording of the CVO's proposed Policy and Position Statements on the Use of Energy in Veterinary Medicine. It was not without a fight! Because of this, the Ontario Animal Owners Association was created. We have kept tabs on the CVO ever since and have additionally provided feedback on other position statements they have put forth (i.e. Non-Conventional Therapies in Veterinary Medicine).

The Ontario Animal Owners Association is encouraging a letter writing campaign to let the Ontario Ministry of Agriculture, Foods, & Rural Affairs (OMAFRA) of our concerns. We have gone through the proposed *Veterinarians Act* and have created a document that highlights the most problematic statements within it, and provided suggestions for amendments. Within the document is a link to the CVO page with the full proposal and to the OMAFRA webpage where they are seeking consultation.

We hope you will join us in this campaign.

CONSULTATION: https://www.ontario.ca/page/consultation-veterinarians-act-ontario

Send your suggestions and feedback in one of two ways:

by email: vetact.omafra@ontario.ca

by surface mail:

Comments on the Modernization of the Regulation of the Veterinary Profession Ontario Ministry of Agriculture, Food and Rural Affairs Food Safety and Environmental Policy Branch 1 Stone Road West, 2nd Floor S.W. Guelph, Ontario N1G 4Y2

** c.c. your MPP (if in Ontario) **

PROPOSED VET ACT: https://cvo.org/Public/Public-Consultations/Modernizing-the-Veterinarians-Act.aspx (pages 1 - 25 pertain to non-veterinarians)

Areas of concern within the list of Authorized Activities that only a Veterinarian is permitted to perform:

1. "Making or communicating a diagnosis, identifying a disease, disorder, dysfunction or condition as the cause of an animal's signs and presentation"

Other non-veterinarian allied animal health practitioners are doing this and are competent in doing so within their own scope of practice (i.e. physiotherapists, acupuncturists, chiropractors, etc.)

Physical therapists, are often sent veterinary referrals to 'assess and treat', or provided diagnoses that are not true diagnoses (i.e. "soft tissue injury"), or given a list of potential diagnoses, or a list of symptoms (i.e. lame left hind leg and pain with hip extension), which requires a physiotherapist to make their own diagnosis before treating. Physiotherapists with training in canine rehabilitation have become part of the animal healthcare physical diagnostic team. Vets should be allowed to delegate the making of a physical diagnosis to physical therapists trained in animal rehabilitation. Perhaps better yet, physical therapists should be exempt from this clause, since physical diagnostics are part of our scope and ability, and our diagnostic physical exam is what is being taught to veterinarians (by physical therapists) in canine physical rehabilitation training programs!

**Chiropractors often see animals that do not have a medical diagnosis. In order to treat these animals, an examination is performed. Findings include diagnoses such as spinal dysfunctions, rib dysfunctions, sacroiliac joint dysfunctions, muscle dysfunctions, etc.. Chiropractic assessment (and treatment practices) for animals have been established by chiropractors who have been the ones to teach veterinarians these skills. The chiropractic assessment and chiropractic diagnosis is part of an animal chiropractor's domain.

An acupuncturist may make a Traditional Chinese Medicine diagnosis prior to creating a treatment plan. Traditional veterinary medicine does not guide traditional Chinese Medicine planning. A whole different kind is diagnosis is needed.

Human doctors are no longer the only ones allowed to make a diagnosis. This has allowed allied health practitioners to make and communicate their own professional diagnoses. Their diagnoses often use the term 'Dysfunction' – spinal dysfunction, muscle dysfunction, joint dysfunction, etc.. If the true intent is to 'Modernize' the *Veterinarians Act* then enabling others to use their own professions skills, then to make and communicate their own diagnoses (within their respective scopes of practice) is a missing element to the proposal.

Suggest that Veterinarians be the only ones allowed to make a MEDICAL diagnosis, and allow others to make and communicate their own diagnoses (Physical diagnosis, Rehab diagnosis, Chiropractic diagnosis, Traditional Chinese Medicine diagnosis, etc.)

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

Again, many other people in the animal health industry are currently engaged in this practice. E.g. Physical therapists, chiropractors, massage therapists, etc. with 'animal specific' training. They perform these assessments to help decide if an animal is fit to compete in an event, progress an exercise program, or return to normal activities.

A non-veterinarian assessment is different than a veterinary assessment. They evaluate things that a traditional veterinary examination does not. Will the proposed *Act* hinder the ability of non-veterinarians allied animal health practitioners to continue to function as they have been?

Physical therapists, chiropractors, and other allied animal health practitioners should be given further exemptions to perform an assessment to determine the fitness or soundness of an animal or group of animals. This falls within the scope of what we/they know and do as well.

If you have examples of when you have provided an assessment to determine the fitness / soundness of an animal that an owner relied upon OR are an owner that utilized a Non-Vet to provide this service – please provide an example / opinion.

3. "Performing a procedure below the dermis."

Non-veterinarians are performing acupuncture and dry needling. Animal physiotherapists, animal chiropractors, and animal acupuncturists, are able to safely transfer the skill of acupuncture / dry needling to an animal patient.

The consequence of restricting this activity, without providing further exemptions, limits non-veterinarian allied animal health practitioners to fully help their animal patients by restricting the tools they would typically utilize in their practice. Furthermore, it would limit an animal owner from accessing acupuncture or dry needling services at a time when access to veterinary services is strained, both now and into the foreseeable future.

If the intent is to ensure that only Veterinarians do <u>Surgery</u>, then please amend this item to clearly state 'Surgery' so that access to acupuncture or dry needing by trained and qualified non-veterinarians is not hindered.

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

Since MOST veterinarians are not trained to perform this skill, it is questionable as to whether this activity should even be an authorized activity. Manipulation (low amplitude, high velocity thrust) is <u>not</u> part of a veterinarian's core competency. Additionally, physical therapists are also trained in manipulation, so it is not appropriate for this task to be so exclusionary.

5. "Applying or ordering the application of a form of energy prescribed by the regulation under this Act."

This sentence is far too all encompassing. It would include all forms of physical therapeutics utilized by physical therapists (e.g. laser, ultrasound, shockwave, pulsed electromagnetic field, electrical stimulation, etc.).

- The public already witnessed what the College of Veterinarians of Ontario felt to be appropriate in regards to the regulation of Forms of Energy in the first few drafts of their Policy and Position Statements on Forms of Energy. There was no consultation prior to the creation of the first iteration presented to the CVO council, and only after huge public outcry were amendments made.
- It is concerning that 'therapeutic forms of energy' are even included as Authorized
 Activities, as electrotherapeutic modalities are not protected under the Regulated
 Health Professions Act (RHPA) for human health care. This restriction further hinders
 non-veterinarian animal health practitioners, that are trained in the use of therapeutic
 forms of energy, from using the tools at their disposal to fully rehabilitate their animal
 patients.
- 6. "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"
 - There are other scenarios when a non-veterinarian might perform one of these acts.
 - Animal breeders may have a friend or mentor who would help them whelp/birth their animal(s). This could encompass putting a finger beyond the labia majora.
 - A dog groomer may need to express anal glands or clean the ears.
 - A horse groom might need to clean the penis sheath of a horse as part of routine equine husbandry.
 - A non-employee (i.e. a neighbour or friend) might be called to help birth a calf, foal, lamb, or kid, and as such might put an arm beyond the anus or labia majora.
- 7. "Performing a procedure on or below the surfaces of the teeth, including the scaling of teeth and occlusal equilibration"

Equine Dentists have been performing techniques such as these for over 2 decades. As well, pet groomers and others are currently performing non-sedation teeth scaling in small animals. It should be an option for animal owners. Animal owners should have the right to

choose to acquire these services for their animals from non-veterinarians who practice these techniques

Other items to bring forth if you choose:

- Concern that the proposed model will have significant deleterious implications for animal owners to be able to access services currently provided by non-veterinarians. If non-veterinarian allied animal health practitioners are already practicing in areas set to be restricted by the proposed Act then further exemptions need to be considered to account for these different practice groups.
- Has the CVO provided 'evidence of harm' as a justification to restrict public access to services impacted by the proposed Act that are currently being rendered by nonveterinarians?
- Concern that due to the shortage of veterinarians province-wide that more effort should be made to enable qualified non-veterinarian allied animal health practitioners to provide services to animals. Was a viability study conducted to ensure that there are enough veterinarians with appropriate skills to cover the services currently being offered by non-veterinarians should this *Act* restrict access to those individuals?
- Without amendments to the Restricted Activities list, there is a concern that non-veterinarian allied animal health practitioners will suffer a loss of income that prohibits business continuity. Might this constitute a contravention of the *Canadian Competition Act*?
- Since animals are legally considered to be 'property', do the proposed amendments to the *Veterinarians Act* contravene existing property laws in regards to what individuals are allowed to do with their property?