1. FACILITY SERVICES & EQUIPMENT

Objective: The maintenance of facility services and equipment are activities which include keeping the facility and its equipment in proper operating condition in a routine, scheduled or anticipated fashion so that they can be effectively used for their intended purposes. Practices are responsible for facility maintenance including cleaning, sterilization, inspection and storage of equipment. They will ensure that the facilities are able to safely and comfortably accommodate any team member, clientele and animals that are present, and have the necessary facilities and equipment to provide the veterinary services commensurate with their scope of practice and species that receive veterinary care.
A. FACILITY STRUCTURE (applies to hospital and offices only) Requirements
1. When consultations are carried out at the practice there is a ~~self-contained~~ reception area of adequate size. The reception area cannot be within an examination room. The reception area is entered directly from outside of the facility and contains sufficient seating for the reasonably expected number of clients.
2. The practice contains a washroom that can be used by clients which is clean and orderly. The washroom sink is only used for the purpose of hand washing.
3. All areas inside and outside of the facility appear clean, orderly (uncluttered), in good repair and free of hazards to team members, clientele and patients.
4. The practice has adequate humidity and temperature control to assure the comfort of team members, clientele, and patients.
5. Lighting in all rooms (includes hallways, reception area, examination and surgical rooms) is adequate and functional for the purposes for which the room is to be used.
6. Examination surfaces are large enough for the expected size of animal and made of fluid impervious materials suitable for thorough cleaning and sanitizing.
7. Treatment/examination rooms are large enough to accommodate readily a veterinarian, an animal, a client and if necessary, at least one team member and the required equipment.
8. Each examination room has a sink located in or convenient to it, to facilitate hand washing between patients.
9. Each treatment area contains a drained sink with hot and cold running water. The sink is not to be used to clean dishes used for food for human or animal consumption.
10. There is adequate space for storage of drugs, equipment, cleaning materials, food supplies, medical records, etc., appropriate for the scope of practice and species.

5. PROFESSIONAL PRACTICE

Objective: Veterinary medicine is a provincially regulated, self-governing profession. This privilege comes with significant commitment to protecting the public interest. As members of a self-regulated profession who serve the public and society, veterinarians earn and maintain the public trust through engagement in principle-guided ethical practice. Veterinarians hold themselves, their colleagues, and their profession to a high standard of ethical conduct, reflecting the core values and principles of the profession. The College and the public have the reasonable expectation that the care and service provided by veterinarians reflects these values. Every veterinary practice is operated in accordance with the Veterinarians Act, the regulations and the facility standards established by the Council under section 8 of the Act. (O.Reg.1093 section 10(c)(i)). The role of a facility director for the purposes of facility accreditation is an important one. To assist in understanding the role and responsibilities, the Policy Statement – Facility Director - Accreditation has been developed to clarify the obligations and responsibilities of a facility director with respect to ensuring that an accredited veterinary facility is operating in accordance with the Veterinarians Act, its Regulations, and facility standards as established by the Council under section 8 of the Act.
1. The practice has, and appears to have, the practice of veterinary medicine as its primary purpose.
2. The practice is separate and distinct from any other business enterprise.
3. The name of the facility is in accordance with the College's advertising regulations. There are no facility naming rules; however, the facility name must comply with the advertising regulations.
4. Veterinarians who are ~~veterinary practice owners~~ facility directors will hold a general licence. If the ~~veterinarian owner~~facility director has a restriction on their licence, the conditions of the certificate of accreditation are consistent with the restriction, if applicable. ~~Veterinarians with a restricted licence with direct or indirect supervision are not permitted to own a practice.~~ Restricted license holder with a supervision condition is not eligible to be a facility director.
5. There is evidence that communication to the public clearly confirms the scope of services and species that are offered at the facility. Any changes to the scope of services and/or species must be reported to the College immediately.
6. The certificate of accreditation must be displayed in a location visible to the public within the ~~practice~~facility. ~~The name of the facility director and their contact information are clearly and publicly displayed at the veterinary facility.~~
7. The name of the facility director and their contact information are clearly and publicly displayed at the veterinary facility.

8. There is evidence of an arrangement for clients to receive medically necessary services in a prompt fashion outside of regular hours (otherwise known as after-hours care) and that clients are informed of this arrangement.

6. PHARMACEUTICAL MANAGEMENT

Objective: Veterinarians are authorized to prescribe, dispense, and administer pharmaceutical products, including medication and drugs. These products must be handled responsibly and in compliance with provincial and federal legislation. It is essential that such products are safe, effective, and are prescribed and used rationally.

Veterinarians are authorized to prescribe, dispense and administer controlled drugs and narcotics. With that authority comes the responsibility to mitigate the risk of inappropriate or illegal access to controlled drugs. This responsibility includes the overall management of any controlled drugs used in a veterinary practice, including disposal.

The College's Professional Practice Standard: Management and Disposal of Controlled Drugs applies to all veterinarians who prescribe, dispense or administer controlled drugs.

1. Access to pharmaceuticals is restricted to authorized individuals. If controlled substances are used, reasonable or necessary steps are taken to keep controlled substances secure. Access is restricted in a manner that prevents theft or misuse.

2. Maintains a record keeping system for inventory management of ~~all medication that includes regular audits~~controlled drugs. If controlled drugs are used, proper logs and inventory management is expected to follow provincial and federal legislation. A current verifiable monthly inventory of controlled drugs is required (a controlled drug audit is performed every 21 - 31 days).

3. Maintains a record keeping system for inventory management that includes regular audits of non-controlled drugs.

4. The medication storage system ensures that all medications are easily located and properly identified at all times.

5. Proper storage and handling of medication is evident to ensure the integrity and efficacy of the medication and adheres to the manufacturer's recommendations.

6. When drugs are shipped or mailed to clients, there is a delivery method that allows tracking and gets a signature from the person receiving the drug.

7. There is a system in place to maintain drug integrity and safety during shipping or mailing drugs to clients, including appropriate packaging and temperature control where required.

8. Handling, administering and dispensing of medications ensures cross-contamination or adulteration is prevented and ensures the safety of the team member handling or administering the medication if applicable.
9. There is evidence of access to at least one (1) current written or electronic veterinary pharmaceutical reference that is specific to the species and the scope of practice.
10. Expired, damaged or contaminated drugs are identified and kept separate from regular inventory until safely disposed of.
11. Safe disposal of expired, unusable, damaged or contaminated drugs is expected to be done in accordance with federal regulations and any environmental requirements set out by federal, provincial and/or municipal jurisdictions.
12. The facility has a written policy on antimicrobial stewardship that demonstrates commitment to and accountability for prescribing antimicrobials responsibly. The policy includes prescribing of medically important antimicrobials.

14. SURGERY

Objective: Safety of patients and workers requires that surgery take place in a manner that is aseptic and reduces the risk of nosocomial infections in patients.

Major surgical procedures performed on companion animals may only be performed in a surgical suite in a hospital. An exception is a practice that is accredited to perform certain major surgical procedures (e.g., spays and neuters) on companion animals through a Surgical Mobile for Companion Animals. See C. Surgical Mobile for Companion Animals.

Certain major surgical procedures on large animals are performed at the location where the animal is kept. It is also recognized that certain major surgical procedures on large animals performed in a hospital may not always be performed in a surgical suite (e.g., bovine caesarian section or equine castration). B. Mobile for Large Animal Ambulatory Surgery applies.

It is recognized that barriers to access to veterinary care exist, including remote locations in the province and animal owners with low-income. Access to veterinary care in these circumstances is in the interest of animal welfare and public health.

A Surgical Mobile for Companion Animals has a base unit, a mobile unit, and a remote unit. The remote unit is a stationary element that is used for performing certain major surgical procedures with anesthesia (spay, neuter) on multiple companion animals in the same space and it can change locations to provide services in different communities in the province.

This ASPS recognizes the practical challenges for veterinarians carrying out aseptic surgical procedures (e.g., spay, neuter) for companion animals outside of the traditional in-facility surgical suite. Necessary steps must be taken to reduce the risk of infections. As appropriate and practical for the specific surgical procedure and conditions, the highest level of aseptic technique possible is performed for all surgical procedures.

1. If performing surgery on multiple animals in the same place, the member shall undertake to ensure that there are proper accommodations, such as adequate lighting, ventilation, heating/cooling, cleanliness and animal housing. Any building that is used for this purpose is accessible and the appropriate size for the number of animals and type of procedures performed. There should not be overcrowding of animals.
2. The surgical area must be visibly identified and separated by enough distance from non-surgical activities to avoid contamination. ~~recovery, admission, surgical and instrument preparation area to avoid contamination.~~

3. Equipment utilized in the surgical suite is properly cleaned, in good repair, and sufficient in number and variety to match the requirements of the species treated and the surgical case load.
4. A surgery table or surface is provided and made of smooth nonporous material that can be readily sanitized. Wooden tables are not permitted.
5. Surgical lighting suitable for the accurate illumination of surgical sites on the patient is available. A surgical light is intended to assist the veterinarian and team member during a surgical procedure by illumination of a local area or cavity of the patient.
6. A standard accepted procedure is used to prepare the patient for surgery. All team members involved in the pre-surgical preparation of patients understand the risk and sources of bacterial contamination.
7. Supplies to perform hand and arm scrub are present including an appropriate surgical scrub agent.
8. There is a range of suitable sterile surgical instruments, supplies, consumables and suture materials for the work undertaken.
9. Surgical instrumentation and reusable supplies must be properly cleaned, sterilized and in good repair. Cold sterile is not an acceptable sterilization method for surgical instruments to be used for major surgery.
10. Autoclaves and other sterilization equipment are maintained and serviced in accordance with the manufacturer's instructions. A steam sterilizer of sufficient size to sterilize the quantity of surgical packs necessary for the expected case load is present outside of the surgical suite.
11. Separate sterilized surgical packs are used for each major surgical procedure. A means to confirm sterilization is used.
12. Proper surgical attire is worn during aseptic procedures
13. Informed client consent for surgery is documented in the record.
14. Medical record-keeping systems are in place that include surgical treatment details and all team members involved in the surgery. Surgical Logs are maintained separately or in combination with Anesthetic Logs. The surgical log enables auditing of surgical outcomes.