

Veterinary Facility Evaluated:

Rule 27: Small Animal Hospital/Clinic

NAME OF THE FACILITY: _____

BY TICKING YES TO ANY RULE ON THIS CHECKLIST YOU AGREE THAT THE FACILITY ALREADY COMPLIES WITH THAT STANDARD.

Rules 27: Small Animal Hospital/Clinic				OFFICE USE		
				YES	NO	CATEGORY A, B or C
27.	Structural and procedural requirements for small animal hospitals					
(1)			A small animal hospital must comply with Rules 18, 19, 20, 21, 22, 23 and 24.			
(2)	A ward in which patients are kept must:					
	(a)		have a separate cage of adequate size for each patient;			
	(b)		be of such a material so as to prevent self-injury of the patient;			
	(c)		have proper means to identify each patient; and			
	(d)		be adequately ventilated and, if necessary, heated or cooled.			
(3)			Animals hospitalised overnight must be adequately monitored having due regard to the animal's condition. If such monitoring is not available, the client should be informed accordingly.			
(4)			An area in which patients can be exercised indoors or outdoors must be designed and constructed in a manner that will minimise escape and facilitate the maintenance of hygiene.			

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Rules 18 – 22: General requirements for Clinical Veterinary Facilities						OFFICE USE		
						YES	NO	CATEGORY A, B or C
Have you read what is required in terms of Rule 18 and submitted the details, where required:								
RULE 18								
	(1)			Clinical veterinary facilities , excluding the following facilities as contemplated in Rules 26, 30, 31, 32, 33, 34 and 35 : compulsory veterinary community service and regulatory service facilities, behavioural consultancy, veterinary laboratories, research animal facilities, facilities for herd health practice, facilities for industry and other consultancies and non-practising facilities, must comply with Rules 18, 19, 20, 21, 22 and 23.				
	(2)			Facilities contemplated in Rules 27, 28 and 29 for small animal hospitals/clinics, hospitals for equine and production animals must, in addition to the requirements of Rules 18, 19, 20, 21, 22 and 23, comply with those requirements for exemptions as listed under that subcategory.				
	(3)			A clinical veterinary facility must comply with Rule 24 if any invasive surgery is performed. Please refer to the definition of "invasive surgery".				
	(4)			Where prescribed minimum requirements are not met, an explanation with a motivation and a standard operating procedure (SOP) must be submitted to Council to indicate what procedures are in place to guarantee that the welfare of the patient is still accounted for. Such a standard SOP must be re-submitted every five years, and signed by all veterinarians and veterinary and para-veterinary staff members of that facility.				
	(5)			All veterinary facilities must be registered with Council. Should a clinical veterinary facility not meet the minimum standards set out in the Rules, its registration may be suspended for such a period as Council deems fit.				
RULE 19								
General structural requirements for Clinical Veterinary Facilities								
	(1)			A clinical veterinary facility at or from which a person practises a veterinary profession must:				
	(a)			be a permanent structure. (This is not intended to exclude buildings, which are factory produced and site assembled, e.g. a prefabricated building or a container as the word "permanent" relates to the materials used and not the building itself);				
	(b)			have a source of good general lighting, which is also adequate to ensure the completion of a procedure in progress;				
	(c)			have adequate ventilation;				
	(d)			have a dispensary as provided for in Rule 21(4);				
	(e)			have a fire extinguishing apparatus in accordance with the requirements of the Occupational Health and Safety Act 1993, Act 85 of 1993, which meets the requirements of the relevant local authority;				
	(f)			be so constructed as to minimise the escape of an animal and to ensure the effective, safe and comfortable confinement of animals at all times; and				
	(g)			be registered with Council.				
	(2)			Subject to any requirements of a local or other authority, a veterinary facility must consist of:				
	(a)			a reception and office area;				

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					YES	NO	CATEGORY A, B or C
		(b)		a waiting room for clients with access to toilet facilities; and			
		(c)		one or more examination rooms.			
	(3)			The internal walls and floor surfaces, shelves and tables of a veterinary facility must be of such a nature that they can be properly cleaned and disinfected so as to maintain optimum hygienic conditions.			
	(4)			The drainage and washing water of a veterinary facility must run into an adequate sewer and/or septic tank and must comply with the requirements of local authorities.			
	(5)			The veterinary facility must have a direct public entrance unless the facility is not intended to provide services to the public but to a specific organisation or other entity.			
	(6)			Provision must be made at a veterinary facility for the storage and disposal of carcasses in a hygienic manner, which will ensure that health risks are minimised.			
	(7)			Provision must be made at a veterinary facility for a hygienic, insect and rodent free environment within the facility as well as where therapeutic and nutritional products are stored.			
	(8)			Adequate facilities must be available for the preparation of food and washing and cleaning of all equipment.			
RULE 20		General procedural requirements					
	(1)			Personnel must be trained in the basics of aseptic technique, animal handling and welfare and such training must be relevant to the scope of practise.			
	(2)			Personnel responsible for the operation of sophisticated equipment and apparatus must be adequately trained within their scopes of practise.			
	(3)			A veterinary professional must clinically examine animals accepted into a veterinary facility as and when needed, but at least daily, and appropriate records pertaining to monitoring of patients admitted in hospital should be entered into the clinical record.			
	(4)			The telephone of a veterinary facility of which the number is used in all official communication (shown in the telephone directory, signboards, advertisements and correspondence), must be answered at all times, and the use of an automatic answering service outside the normal consulting hours is permissible for this purpose, provided that it states the normal consulting hours of that practice and refers the client to another telephone number, where the veterinary professional on duty can be reached or to the address and telephone number of an after-hours veterinary facility.			
RULE 21		General requirements at clinical veterinary facilities					
	(1)		A veterinary facility must comply with the following requirements where applicable:				
		(a)		radiological services must be rendered at the facility, or be accessible;			
		(b)		have suitable equipment to determine the weight of patients accurately;			

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Rules 18 – 22: General requirements for Clinical Veterinary Facilities					OFFICE USE		
					YES	NO	CATEGORY A, B or C
		(c)		an emergency service can be rendered to stabilise patients; patients may be referred where necessary;			
		(d)		resuscitative cardiopulmonary medicines as well as intravenous fluids and administration sets must be readily available for emergencies;			
		(e)		suitable sterilising equipment, or access thereto, for the effective sterilisation of surgical packs and other equipment;			
		(f)		have adequate storage for sterilised packs and employ acceptable techniques to indicate the effectiveness and expiry of sterilisation;			
		(g)		routine laboratory equipment within the facility, including at least a microscope, centrifuge, glucometer and refractometer, or reasonable access to such a laboratory service must be available;			
		(h)		in the case of a referral veterinary facility or a veterinary facility where advanced surgical procedures are performed, have an alternate power supply to allow the veterinary facility to function in the event of a power failure and to meet the requirements of local authorities;			
		(i)		post mortem examinations must be able to be performed at the facility or reasonable access to such a service must be available, which includes referral of the client to the nearest veterinary pathology laboratory;			
		(j)		have facilities and equipment (or access thereto) for the hygienic disposal of medical and biological waste to prevent the contamination of the veterinary facility as well as the environment and/or to prevent harm to personnel or the public;			
		(k)		a dispensary as set out in Rule 21(4) should be present at the facility to enable dispensing of relevant medicines for patient treatment according to the Medicines Act and the Code of Good Pharmacy Practise;			
		(l)		the veterinary facility must be manned by a person registered to practise a veterinary profession during the consulting hours specified on a notice board, with the proviso that rural practitioners should indicate their office hours and an invitation to make an appointment, whilst not necessarily being in attendance during the indicated office hours.			
	(2)			An animal with a highly infectious disease may not be hospitalised at a veterinary facility, unless facilities for the isolation thereof exist.			
	(3)			Only minor surgical procedures , excluding intra-abdominal, musculo-skeletal, intra-cranial, cardio-vascular or intra-thoracic surgery may be performed at a consulting room . If such surgery is performed at a consulting room, the provisions of Rules 23 and 24 must be complied with .			
RULE 21 (4)		The dispensary must comply with the following, which must be read in conjunction with the Medicines Act:					
		(a)		It must be a separate room dedicated to the storage of medicines within the practice;			
		(b)		If medicine is stored in a cupboard in the consulting room, the following will apply:			

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						YES	NO	CATEGORY A, B or C
			(i)	all reference to temperature, climate control and practicality in Rules (c) to (m) below will equally apply to the room in which the cupboard is located;				
			(ii)	the cupboard must be locked at all times when a veterinarian is not present;				
			(iii)	only schedule 2-4 medicines may be stored in this cupboard. Schedule 5 and higher medicines must be locked in a safe as prescribed by the Medicines Control Act.				
			(iv)	the amount of medicine stored must be limited to two containers each of a maximum of fifty medicines.				
		(c)		light conditions, temperature and humidity within the dispensary or medicine room must comply with the requirements for the storage of medicine, other pharmaceutical products, and packaging materials;				
		(d)		the working surface area in a dispensary must be sufficient to accommodate the volume of prescriptions dispensed;				
		(e)		all medicines must be stored at the prescribed temperature;				
		(f)		a wash hand basin must be accessible, which may be in another room;				
		(g)		no medicines may be stored on the floor;				
		(h)		schedule 5 and higher scheduled medicines must at all times be under direct supervision of veterinary professionals and locked away in a safe when a veterinarian is not on the premises;				
		(i)		storage areas must be large enough to allow orderly arrangement of stock and proper stock rotation;				
		(j)		a suitable means of counting tablets and capsules. This equipment must be cleaned regularly so that cross-contamination between products is avoided;				
		(k)		refrigerator must be accessible (even in another room): must be equipped with a suitable thermometer and capable of storing medicines at temperatures between 2°C and 8°C. The refrigerator must be cleaned, defrosted and checked regularly to ensure efficient running. This refrigerator must be used only for storing pharmaceutical products;				
		(l)		a suitable range of dispensing containers for medicine;				
		(m)		dispensed medicines must be sold, and correctly labelled in a package—containing the following information:				
			(i)	the proprietary name, approved name, or the name of each active ingredient of the medicine, where applicable, or constituent medicine;				
			(ii)	the name of the owner, as well as the name of the patient, if available, for whose treatment such medicine is sold;				
			(iii)	the directions for the use of such medicine;				
			(iv)	the name and business address of the dispensing veterinarian; and				
			(v)	date of dispensing.				

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		(n)		empty, time expired/or broken containers of medicines must be disposed of as legislated for dangerous substances in legislation controlling these substances.				
		(o)		records of medicines purchased need to be kept for a period of 5 years				
		(p)		the receipt of medication for restocking of the dispensary is the responsibility of the veterinarian , and not the responsibility of lay persons at the practice.				
		(q)		have access to the pharmacological reference sources, and in the case of compounding, access to protocols for the compounding of medication.				
RULE 22		Diagnostic Images						
	(1)			Imaging facilities, suitable and adequate for the needs of the type of practice or veterinary facility (or access thereto), must be provided and be readily available within a reasonable time. Operation and maintenance of diagnostic imaging facilities and equipment must comply with the manufacturer's requirements.				
	(2)			Suitable facilities for the processing, recording and viewing of diagnostic images, including but not limited to radiographs or ultrasound must be available, as well as for the filing and storage of radiographic images.				
	(3)			Structural requirements for facilities where radiation equipment is installed, as well as user safety precautions for the use of this equipment must comply with the relevant legislation.				
	(4)			When portable x-ray machines are used, specific precautions need to be taken to protect, staff, bystanders, other animals and the environment, from the detrimental effects of accidental exposure to irradiation.				
	(5)			An imaging logbook must be kept listing the identity of animal and owner, by numerical number or chronological order, exposure figures and anatomical position. A logbook is not required should the veterinarian have an electronic data system, which is backed up regularly on an alternate system. Any diagnosis made must be recorded in the patient records.				
	(6)			Each radiograph must have a permanent identification legibly exposed in the film emulsion (or printed on the exposure by the computer software programme) and must include the identity of the animal and the owner, practice identity, date, and positioning indication.				
	(7)			The use of self-adhesive labels for the identification of radiographs is not permissible.				
	(8)			In the absence of a special agreement between the radiographer (veterinary professional) and client, a diagnostic image remains the property of the veterinary professional or the veterinary facility where the image was taken.				

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(9)			A copy of the diagnostic image must be released as soon as possible upon the request of another veterinary professional, provided he/she has been instructed by the owner to make such a request and furthermore that the expenses incurred in producing the diagnostic images are settled.			
(10)			If an original image was handed to the requesting veterinary professional, a receipt of the transfer may be insisted on and such image must be returned to the original veterinary professional as soon as possible.			
(11)			The client or the owner of an animal is entitled to a copy of the image and a written report.			

RULE 23		General requirements for anaesthesia			OFFICE USE		
					YES	NO	CATEGORY A, B or C
(1)			All animals must undergo a pre-anaesthetic clinical examination, with the exception of wildlife. If it is not possible to perform a pre-anaesthetic clinical examination, the wildlife should preferably be observed prior to anaesthesia , if possible.				
(2)			Adequate facilities must be provided for the safe induction and recovery from anaesthesia.				
(3)			All persons administering anaesthesia must be qualified or authorised by Council to do so and be competent in the efficient use of all anaesthetic facilities and equipment, provided that a veterinary para-veterinary professional, within his/her scope of practice may administer anaesthesia on the instructions of a veterinarian, with the exception of wildlife, which only a veterinarian personally may anaesthetise in accordance with Rule 10.				
(4)			The monitoring, maintenance and recovery from anaesthesia must be effected under the direct supervision of a veterinary professional or veterinary para-veterinary professional, within his/her scope of practice who must be on the premises .				
(5)			The same person may not do surgery, monitoring and maintenance of general anaesthesia, unless circumstances dictate otherwise and unless monitoring equipment is available.				
(6)			Equipment for anaesthesia, either inhalation or parenteral, and facilities adequate and appropriate for the needs of the relevant practice and veterinary facility must be provided at all times.				
(7)			An appropriate range of clean, functional endotracheal tubes must be available.				
(8)			Medical oxygen must be available at all times for inhalation anaesthesia maintenance as well as to meet any other emergency situation.				

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RULE 23		General requirements for anaesthesia			OFFICE USE	
				YES	NO	CATEGORY A, B or C
	(9)			Storage for all explosives, such as gas or oxygen, must be provided for in accordance with the relevant legislation.		
	(10)			A means to provide artificial ventilation must be available.		
	(11)			Lock-up facilities must be available for scheduled medicines in accordance with the relevant laws.		
	(12)			Where applicable, equipment for the control of body temperature must be provided.		
	(13)			Anaesthetic equipment must be adaptable for the variation in body weight and the species range in which it is intended for use.		
	(14)			Active or passive anaesthetic gas scavenging equipment must be in use according to relevant legislation, if applicable.		
	(15)			All anaesthetic equipment must be properly maintained and serviced at regular intervals.		
	(16)			All animals must be monitored after surgery and may only be discharged once adequately recovered from anaesthesia , i.e. all animals must be fully conscious and ambulatory, unless otherwise discussed and agreed to with the client. (Not applicable to wildlife)		

RULE 24		Requirements for Invasive Surgical Procedures, if applicable			OFFICE USE	
				YES	NO	CATEGORY A, B or C
	(1)			The facility must comply with the following:		
		(a)		one or more rooms for the treatment and pre-operative preparation of patients, which must be conveniently close to the operating room;		
		(b)		a separate room which is equipped as an operating room and has:		
			(i)	adequate general lighting, as well as an adequate light source for procedures;		
			(ii)	a surgical table with an impervious operating surface that can be easily cleansed and disinfected;		
			(iii)	an adequate supply of oxygen;		
			(iv)	a gas anaesthetic apparatus or a means of effectively administering oxygen through an endotracheal tube, ambubag or mask;		
			(v)	a means of viewing radiographs; and		
			(vi)	adequate ventilation.		
	(2)			The operating room must be of adequate size and there must be an adequate supply of equipment, drapes and instruments at all times.		
	(3)			There may be no thoroughfare through an operating room.		

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RULE 24		Requirements for Invasive Surgical Procedures, if applicable			OFFICE USE	
				YES	NO	CATEGORY A, B or C
	(4)			The operating room may not be used as a storage room.		
	(5)			Patients should be prepared in a separate room convenient to the theatre (operating room) but not in the same place as where surgery takes place.		
	(6)			Only final preparation of the patient may be done in the operating room.		
	(7)			Aseptic conditions must be maintained in the operating room.		
	(8)			There must be appropriate autoclave equipment or other suitable sterilising equipment, or access thereto, for the effective sterilisation of surgical packs and other equipment and have adequate storage for sterilised packs and employ acceptable techniques to indicate the effectiveness and expiry of sterilisation.		
	(9)			Suitable scrubbing up facilities must be available.		

Rule 6		Records at Veterinary Facilities			OFFICE USE	
				YES	NO	CATEGORY A, B or C
	(1)			The attending veterinary professional (must) maintains records, including the records required in terms of the Medicines Act, for each animal or group of animals which are legible, accurate and permit prompt retrieval of information.		
	(2)			Records must contain the following information for individual animals as applicable:		
		(a)		the date or period of the examination or consultation;		
		(b)		name of the veterinarian who treated the patient;		
		(c)		client's identification;		
		(d)		patient name, other forms of identification, as well as the species, breed, gender and age;		
		(e)		clinical information for the purposes of continuous care and assessment;		
		(f)		vaccination record;		
		(g)		special procedures;		
		(h)		diagnosis;		
		(i)		treatment and scripts issued; and		
		(j)		discharge instructions.		
	(3)			Records must contain the following information for production animals, including wildlife, as applicable:		
		(a)		the date or period of the examination or consultation;		
		(b)		client's identification;		

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Rule 6		Records at Veterinary Facilities			OFFICE USE		
					YES	NO	CATEGORY A, B or C
		(c)		species & breed; for wildlife species and sex, age group and/or colour if relevant;			
		(d)		procedures or treatment performed. For groups of animals a general description of the type of herd-work and bulk use of medicine is acceptable, but the use of schedule 5 and 6 wildlife capture medicines, must be recorded with care; and			
		(e)		instructions to client in general, if applicable and abnormal observations.			
	(4)			All records referred to in Rule 6(2), radiological images and the interpretation thereof, laboratory and pathology results must be retained by the principal of the veterinary facility for a period of five years from the patient's last visit, with the exception of ultrasound images where only the findings must be recorded.			
	(5)	Records must contain the following information for diagnostic laboratory work (if) applicable:					
		(a)		date sample was collected, date received, date completed, and date of release of results;			
		(b)		client information and geographical information;			
		(c)		animal identification as submitted, including species, breed, gender and age;			
		(d)		clinical history;			
		(e)		tests performed;			
		(f)		personnel doing the preparation and analysis;			
		(g)		method followed, deviations if any, reasons for deviation and reasons why results can still be accepted;			
		(h)		consumables and reagents including name, batch number, and expiry date;			
		(i)		results of quality control samples;			
		(j)		environmental conditions, if abnormal, or other critical information required by the standard operational procedure;			
		(k)		original findings; and			
		(l)		reports.			
	(6)			Records referred to in Rule 6(4) relating to a complaint, charge or allegation lodged with Council in terms of section 31(1) of the Act must be presented to Council within seventy two (72) hours of being requested to submit such records, or as otherwise arranged with Council.			
	(7)			Proper security arrangements must be made to protect medical and other clinical records from loss, fire, alterations, additions, supplements or unauthorised use; electronic records must be backed up on a daily basis and electronic backups should be stored off-site.			

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Rule 6		Records at Veterinary Facilities			OFFICE USE		
					YES	NO	CATEGORY A, B or C
	(8)			Any alterations, additions and/or supplements to any records, clinical or otherwise, must be entered as a supplement to said record and must be clearly defined as such.			
	(9)	(a)		The principal of a veterinary facility will be responsible for confirming the identity of the attending veterinary professional to Council, where a complaint is lodged against his/her veterinary facility.			
		(b)		The principal of a veterinary facility will be responsible for providing the records referred to in Rule 6(5), should a complaint be lodged against a veterinarian no longer in the employ of the principal of the facility, subsequent to the date on which the complaint originated.			
		(c)		Should the principal of a facility fail to comply with the provisions of Rule 6(9)(a) he/she will be held accountable for any unprofessional conduct arising from such a complaint.			

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