



# College of Veterinarians of British Columbia

## *Policy: Committee Directed Practice Facility Inspections and Inspection Outcome*

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### **Preamble:**

An inspection of a practice facility may be conducted pursuant to the following provisions of Part 3 of the CVBC Bylaws:

- section 3.11 – during the initial accreditation process;
- sub-section 3.4(4) – on a schedule established by the registrar (“Scheduled Inspection”); or
- sub-section 3.18(1) - as directed by the Practice Facility Accreditation Committee (PFAC) at any time (“Committee Directed Inspection”).

With respect to Committee Directed Inspections, sub-section 3.18(1) of the Bylaws sets out the following:

The committee may direct that the practice or facility be inspected by an inspector to ascertain if it meets the accreditation standards.

One of the circumstances from which a Committee Directed Inspection may arise is following notice provided under sub-section 3.6(9) of the Bylaws, which sets out the following:

In addition to any other duty set out in the bylaws, the designated registrant has the following responsibilities:

...

- 9) to promptly inform the registrar, who will convey to the committee any of the following respecting a practice or facility:
  - (a) a substantial change in scope of practice,
  - (b) a significant or material renovation,
  - (c) a change of mailing address or location,
  - (d) a change in the designated registrant,
  - (e) a closure,
  - (f) a loss of a significant amount of a controlled drug or a loss of records,  
and
  - (g) a change in ownership.

...

The term “**inspection**” is given the following meaning at sub-section 3.1(7) of the Bylaws: “includes a physical inspection of a facility by a practice facility inspector”

The “**accreditation standards**” are set out in Schedule “D” of the Bylaws.

### **Objective:**

The objective of this policy is to provide guidance with respect to Committee Directed Inspections, and in particular to:

- 1) provide direction to designated registrants and to the registrar in the interpretation of the following terms or concepts in sub-section 3.6(9):
  - (a) a substantial change in scope of practice,
  - (b) a significant or material renovation,
  - ...
  - (f) a loss of a significant amount of a controlled drug...; and
- 2) clarify the scope and process of a Committee Directed Inspection.

### **Policy:**

1. **Appendix A** provides direction to designated registrants and to the registrar and their delegate in the interpretation of various terms in sub-section 3.6(9).
2. A Committee Directed Inspection may, at PFAC’s discretion, be conducted in person or virtually and be an exhaustive inspection of the practice facility or be limited to one or more components of an inspection, such as the inspection of medical records or specific equipment.
3. When the inspection is complete, the inspector will submit their inspection report to the registrar to provide to the PFAC as required by sub-section 3.18(5).
4. Notwithstanding sub-section 3.18(4), which provides the designated registrant with an opportunity to correct deficiencies identified by the inspector in the outcome form contemplated at sub-section 3.18(3), if deficiencies that are high-risk to the public are identified by the inspector at any point during the course of the inspection, the inspector will submit without delay an inspection report detailing the deficiencies to the registrar to provide to the PFAC.

## 5. A “completed inspection”

- a. The extensions of time contemplated in paragraph 3.18(4)(c) may be granted by the PFAC in its sole discretion where it is satisfied that:
  - i. the delay is reasonable;
  - ii. the designated registrant is diligently resolving the deficiencies identified in the outcome form; and
  - iii. the deficiencies are not high-risk to the public.
- b. If the outcome form contemplated in sub-section 3.18(3) discloses any deficiencies, the designated registrant may correct the deficiencies and deliver up to one submission in response evidencing the correction of the deficiencies, provided it is delivered within the time provided to the designated registrant to do so under paragraphs 3.18(4)(b) and (c).
- c. An inspection is complete upon the earlier of:
  - i. when the inspector is of the view that the accreditation standards are met;
  - ii. upon receipt of the submission contemplated in paragraph b of this section 5; or
  - iii. expiry of the time provided to the designated registrant pursuant to paragraphs 3.18(4)(b) and (c) to correct deficiencies identified in the outcome form.
- d. Nothing in section 3.18 acts to derogate from an accredited practice facility’s requirement to be compliant at all times with the accreditation standards. For the avoidance of doubt, it is neither the College’s nor an inspector’s role or obligation to assist a practice facility or designated registrant to become or remain compliant with the accreditation standards. The College or an inspector may provide resources or feedback, but the designated registrant remains exclusively responsible to ensure that the accreditation standards are met at all times.

## **Appendix A**

### **Interpretation of terms in sub-section 3.6(9)**

#### **3.6(9)(a) a substantial change in scope of practice**

*For designated registrants:*

A substantial change in scope of practice is one that leads to additional accreditation standards. This includes, but is not limited to, the addition of veterinary service categories as per Standard 1; the request to order controlled drugs when not previously accredited for such; the addition of a new species group to the services offered; or the addition of major imaging equipment (other than endoscopy and ultrasound). If in doubt, it is recommended that the designated registrant provide notification in accordance with sub-section 3.6(9) of the Bylaws.

*For registrar to convey to PFAC:*

The registrar must refer to the PFAC for consideration when the Facilities Director is of the view that the applicable accreditation standards may not be met or the Facilities Director cannot determine if the applicable accreditation standards are met; if there are multiple or complex scopes of practice being added; or location is changed within the facility.

#### **3.6(9)(b) a significant or material renovation**

*For designated registrants:*

A significant or material renovation includes: significant repair or remediation (e.g., following a flood or fire); structural alterations that change the existing floor plan or expand the space, with or without a change to scope of practice (e.g. additions or subtractions of walls; add-on structure to an existing facility; addition of a fixed facility to previously mobile only facility.) Painting and changes to wall fixtures would generally not be considered significant. If in doubt, it is recommended that the designated registrant provide notification in accordance with sub-section 3.6(9) of the Bylaws.

*For registrar to convey to PFAC:*

The registrar must refer to the PFAC for consideration when the Facilities Director determines that there is involvement of high-risk SOPs, such as surgery, radiology, or pharmacy, or more than three other scopes of practices involved, or when the Facilities Director is of the view that the applicable accreditation standards may not be met or the Facilities Director cannot determine if the applicable accreditation standards are met.

**3.6(9)(f) a loss of a significant amount of a controlled drug...**

*For designated registrants:*

Any loss or theft of controlled drugs that is reportable pursuant to Health Canada's ***Guidance on reporting loss or theft of controlled substances and precursors (CS-GD-005): Reporting guidelines and process***, as amended, revised, or replaced from time to time.

*For registrar to convey to PFAC:*

The registrar must convey to PFAC all notices received pursuant to paragraph 3.6(9)(f) of the Bylaws.