

**Recommendation on Proposed Regulatory Amendments to CCR, Title 16, Sections 2032.1, 2034, and 2036 SUBJECT Regarding Veterinarian-Client-Patient Relationship, Animal Health Care Tasks Definitions, and Animal Health Care Tasks for R.V.T.**

**Background**

During the public comment portion of the Access to Veterinary Care Task Force report at the October 2022 meeting of the Veterinary Medical Board (Board), the California Veterinary Medical Association (CVMA) reported on the progress made by their Access to Care Task Force. CVMA's Access to Care Task Force, along with its R.V.T. committee, conducted an analysis of the R.V.T. profession and found that there may be an opportunity to increase access for low-income individuals by increasing the scope of what R.V.T.s can do under the direct supervision of a veterinarian in an animal hospital setting.

CVMA stated that they intended to submit a letter and some proposed regulations to the Board's Executive Officer in hopes that those would be considered during the next MDC meeting. CVMA was invited to provide a presentation to the MDC at the January 2023 meeting, which would include a letter explaining their conclusions and their proposed regulatory amendments.

**Update**

In October 2022, CVMA sent the attached letter and regulatory proposal to the Board's Executive Officer, which was then forwarded to all MDC members in preparation for the January 2023 MDC meeting.

CVMA's letter states, in part, the following:

“After much research and dialogue, the CVMA has concluded that RVTs possess the knowledge, skills, training, and ability to act as an agent of the supervising veterinarian to establish a Veterinarian-Client-Patient Relationship (VCPR) for the purposes of administering vaccinations and performing preventative procedures for parasitic control. Important support for this conclusion is found both in existing California regulations (most notably 16 CCR, sections 2030.3 and 2069) and others currently under review (including the VMB's proposed regulations for minimum standards in animal shelters).

By enlisting RVTs to perform vaccinations and parasite control, the veterinary profession can better serve consumers by lowering costs and increasing availability of licensed professionals with requisite knowledge and skills. In turn, this will better serve California's animals and improve public health.”

To streamline the process, MDC leadership decided to work with Board staff and legal counsel to evaluate the proposal prior to the January meeting and be ready with recommendations to the MDC.

Over the last few months, MDC leadership met multiple times with Board staff, legal counsel, regulations legal counsel, and CVMA to discuss what could be done through regulations to safely increase access to veterinary care while maintaining adequate consumer and patient protection. Specifically, MDC leadership focused on how R.V.T.s could safely perform vaccination and parasite control under the direct supervision of a veterinarian without requiring a veterinarian to physically examine each patient prior to R.V.T.s rendering services.

## **Proposed Amendments**

Attached hereto is the MDC leadership's regulatory proposal regarding the VCPR, Animal Health Care Tasks Definitions, and Animal Health Care Tasks for R.V.T.s. The proposal includes the amendment for rabies vaccinations previously approved by the Board at the July 2022 Board meeting and the informed consent amendment previously approved by the Board at the January 2020 Board meeting.

CCR § 2032.1 (VCPR). This proposal creates a way for a veterinarian to establish a VCPR for the purpose of permitting an R.V.T. to administer preventive or prophylactic vaccinations or medications for the control or eradication of apparent or anticipated internal or external parasites (referred to as "vaccinations/ medications") if certain conditions are met. These revisions are discussed below.

Subsection (a). This amendment for [rabies vaccinations](#) was approved by the Board during the July 2022 meeting.

Subsection (b). This amendment provides an exception to a veterinarian establishing a VCPR under circumstances set forth in new subsection (e). In addition, subsection (b)(3) reflects amendments approved by the Board during the January 2020 Board meeting regarding ["Informed Consent of a Client."](#)

Subsection (e). This amendment specifies that a veterinarian can establish a VCPR for the purpose of permitting an R.V.T. to administer vaccines/medications as long as the following conditions are met:

- The vaccines/medications are administered in a hospital setting under direct supervision of a licensed veterinarian. (Subsection (e)(1).)
- The R.V.T. examines the animal patient and administers the vaccines/medications according to written protocols and procedures established by the supervisor. Those protocols and procedures are required to include, at minimum:

- o Patient history and data is collected to ensure administration of the vaccines/medications is possible. (Subsection (e)(2)(A-B).)
  - o Information that would preclude a patient from receiving the vaccines/medications and the criteria that would disqualify the patient. (Subsection (e)(2)(C-D).)
  - o Vaccination protocols and preventative procedures to ensure proper handling and administration of vaccination/medications in accordance with manufacturer label recommendations and what to do in the event of an adverse reaction or other emergency. (Subsection (e)(2)(E)-(F).)
  - o Documentation requirements. (Subsection (e)(2)(G).)
- The supervisor and R.V.T. sign and date a statement indicating the following:
    - o The supervisor assumes responsibility for all acts of the R.V.T. related to examining the animal patient and administering the vaccines/medications. (Subsection (e)(3)(A).)
    - o The R.V.T. is only authorized to act as the agent of the supervisor to establish the veterinarian-client-patient relationship for purposes of administering the vaccines/medications when acting in compliance with the protocols and procedures, and only until the date the supervisor terminates supervision or authorization for the R.V.T. to act as the agent of the supervisor. (Subsection (e)(3)(B).)
  - Prior to examining or administering the vaccines/medications, the R.V.T. discloses that the R.V.T. is acting as the agent of the supervisor for purposes of administering to the vaccines/medications and provides the supervisor's name and license number to the client. The R.V.T. would then be required to obtain client authorization to proceed and document such authorization in the medical record. (Subsection (e)(4).)
  - The supervisor reviews the required documentation prior to prescribing or dispensing vaccines/medications. (Subsection (e)(5).)

Subsection (f). This amendment requires the supervisor to retain the protocols, procedures, and statement for the duration of the R.V.T.'s supervision and until three (3) years from the date of the termination of the supervisorial relationship with the R.V.T.

CCR § 2034 (Animal Health Care Tasks Definitions). This amendment adds to the "Direct Supervision" definition so that an R.V.T. can examine the animal as the agent of the veterinarian for the purposes of administering the vaccines/medications in accordance with

CCR § 2032.1, subsection (e), under the direct supervision of the supervisor. (Subsection (e)(2).)

CCR § 2036 (Animal Health Care Tasks for R.V.T). This amendment specifies that an R.V.T. can administer the vaccines/medications, in accordance with 16 CCR § 2032.1, subsection (e), under the direct supervision of a licensed veterinarian. (Subsection (b)(6).)

### **Action Requested**

Please review and discuss the attached regulatory proposal. If the Board agrees with the MDC's recommendations, please entertain a motion to approve the proposed regulatory changes, direct the Executive Officer to take all steps necessary to initiate the rulemaking process, authorize the Executive Officer to make any technical or non-substantive changes to the rulemaking package, notice the proposed text for a 45-day comment period and, if no adverse comments are received during the 45-day comment period and no hearing is requested, adopt the proposed regulatory changes.

**[Click link for regulatory proposal packet](#) including:**

1. CVMA Letter and Proposed Regulatory Amendments, October 13, 2022
2. Regulatory Proposal to Amend CCR, Title 16, Sections 2032.1, 2034, and 2036