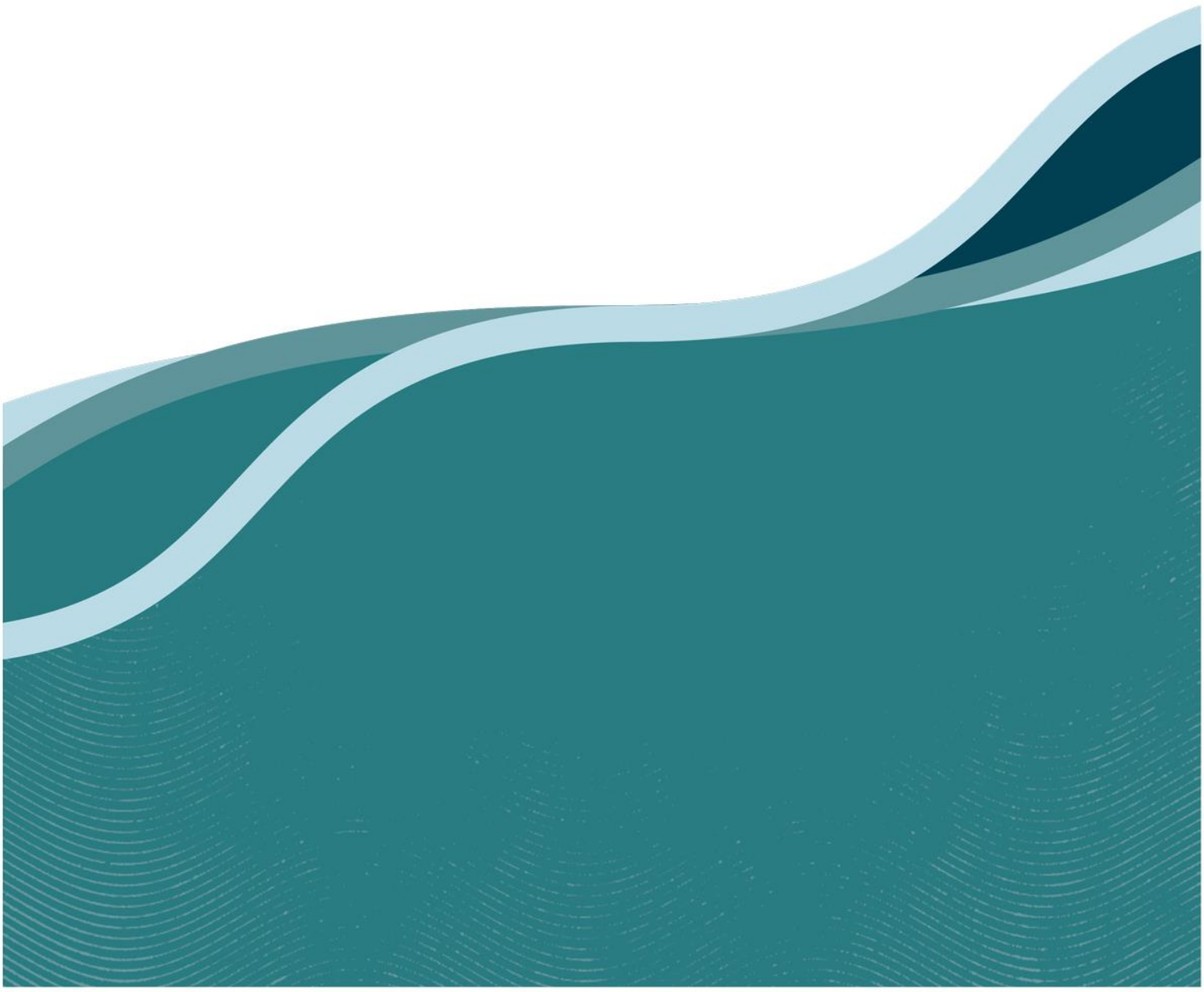
GOVERNMENT OF WESTERN AUSTRALIA
Department of
Primary Industries and
Regional Development

Protect
Grow
Innovate

Veterinary Practice Amendment Regulations

Policy considerations



Contents

Introduction 3
Topic 1: Acts of veterinary medicine 4
Topic 2: Authorised persons 6
Topic 3: Acts that are not acts of veterinary medicine 9
Policy considerations: acts that are not acts of veterinary medicine 9
Topic 4: Cattle pregnancy testing and spaying 11
Topic 5: Dentistry 13
Topic 6: Fees 14

Introduction

The *Veterinary Practice Act 2021* (VPA) and the Veterinary Practice Regulations 2022 (VP Regulations) came into effect on 18 June 2022. To enable the VPA to commence as soon as possible, the previous Minister for Agriculture and Food advised the Department of Primary Industries and Regional Development (DPIRD) to expedite development of the Veterinary Practice Regulations 2022 (VP Regulations) by implementing them in two tranches.

The first tranche of the VP Regulations implemented on 18 June 2022 supported the VPA's functions but did not significantly change day-to-day veterinary practice. The second tranche, the Veterinary Practice Amendment Regulations (VP Amendment Regulations) will implement modern provisions to support the modernised VPA and the operational requirements of veterinary practice.

In 2022, DPIRD undertook two consultation processes encouraging feedback on key proposals of the VP Amendment Regulations. For further information about the consultation process and results, please refer to the consultation report on the VP Amendments Regulations consultation page.

A consultation draft of the VP Amendment Regulations is now available. To assist in reviewing the draft VP Amendment Regulations, this paper has been prepared to provide further information on issues addressed in the draft VP Amendment Regulations which received diverse stakeholder feedback during consultation.

This document provides background on how these topics have been addressed within the draft VP Amendment Regulations. The position evidenced in the draft VP Amendment Regulations was informed by consultation feedback and stakeholder engagement, interjurisdictional review of Australian veterinary practice legislation, review of national policy where applicable, the legislative capacity of the *Veterinary Practice Act 2021* and alignment with relevant Western Australian legislation such as the *Medicine and Poisons Act 2014* and *Animal Welfare Act 2002*.

This paper does not address all provisions of the regulations, rather it provides additional information on specific topics that received significant engagement from stakeholders. Please read this paper in conjunction with the VP Amendment Regulations consultation report and the consultation draft of the VP Amendment Regulations.

Topic 1: Acts of veterinary medicine

Significant feedback was received during the consultation on acts of veterinary medicine that may be carried out by veterinarians and other persons.

The VPA definition of 'veterinary medicine' provides for broad categories of acts that are regarded as acts of veterinary medicine. It also provides for regulations to prescribe those acts of veterinary medicine which may be carried out by different categories of person or for prescribed acts that are *not* acts of veterinary medicine. This is prescribed within the VPA and VP Amendment Regulations by acts designated as; acts of veterinary medicine, acts of veterinary medicine – authorisations and acts that are not acts of veterinary medicine, which are further detailed below.

Section 3 of the VPA defines 'veterinary medicine' as:

veterinary medicine –

(a) includes, but is not limited to, the following –

(i) diagnosing diseases or physiological conditions in, and injuries to, animals
(ii) medical treatment of animals
(iii) performing surgical procedures on animals
(iv) administering anaesthetics to animals
(v) an act of a kind prescribed as being an act of veterinary medicine

but

(b) does not include an act of a kind prescribed as not being an act of veterinary medicine.

The VPA definition provides that veterinary medicine includes, among other things, 'an act of a kind prescribed (in regulations) as being an act of veterinary medicine'. If a particular act does not fall within, or it is not clear that it falls within, the categories in paragraphs (a)(i) – (iv) of the definition, and it requires a particular skill or level of competence to carry out the act, it may be prescribed as an act of veterinary medicine.

Schedule 1 of the draft VP Amendment Regulations details those acts prescribed as acts of veterinary medicine, to support the application of the definition within the VPA.

The VP Amendment Regulations also prescribes those acts of veterinary medicine that may only be carried out by veterinarians, veterinary nurses, veterinary students, veterinary nurse students or by authorised persons. This is detailed within the VP Amendment Regulations and the previous consultation feedback is included within the VP Amendment Regulations consultation report.

Schedule 4 now lists acts of veterinary medicine that may be performed by veterinary nurse students, veterinary nurses, and advanced veterinary nurses. Advanced veterinary nurses are a new category (prescribed class) of veterinary nurse who have the skills, training, experience and competence to carry out more advanced procedures.

The repealed Veterinary Surgeon Regulations 1979 listed 'duties' of veterinary nurses have been removed from the VP Amendment Regulations because, as duties, they are not required to be regulated and do not fall within the definition of veterinary medicine under the VPA. Veterinary nurses may continue to carry out day-to-day duties, such as isolating animals and barrier nursing without the need for the regulations to detail these.

Schedule 6 details the acts of veterinary medicine that may be carried out by a non-veterinarian upon authorisation by the Veterinary Practice Board (Board) to carry out that specified act. Only those acts detailed in Schedule 6 may be undertaken by a person authorised by the Board, noting that authorisation involves an active assessment by the Board of the competency of the person to carry out that specified act. Further information on the authorised person legislative mechanism and the acts of veterinary medicine that may be carried out by authorised persons approved by the Board is included in section 2 of this paper.

The VPA also enables acts to be prescribed as acts that are not acts of veterinary medicine. For an act to be prescribed as not an act of veterinary medicine, it must first meet the definition of an act of veterinary medicine. The effect of prescribing acts as not acts of veterinary medicine is to enable a person other than a veterinarian to carry out those acts, which are prescribed in Schedule 2 of the draft VP Amendment Regulations. Further information on acts that are not acts of veterinary medicine is detailed in section 3 of this paper and within the VP Amendment Regulations consultation report.

Topic 2: Authorised persons

Under the repealed *Veterinary Surgeons Act 1960* (VSA) and the Veterinary Surgeons Regulations 1979 (VS Regulations), non-veterinarians were able to apply for authorisation to perform specified veterinary services, detailed in regulation 47(2) of the VS Regulations. The following veterinary services were previously prescribed as services that may be performed by an authorised person –

(a) administering by injection –
- *(i) sedatives and*
- *(ii) tranquillisers and*
- *(iii) euthanasia agents and*
- *(iv) muscle relaxants and*
- *(v) reversal agents used in conjunction with sedatives or tranquillisers*

(b) equine dentistry
(c) embryo transplantation
(d) diagnosis of disease
(e) administering contraceptives or other medications to dogs in the pastoral region
(f) examination of cattle for pregnancy by rectal palpation or rectal probe and ovarian examination per rectum
(g) artificial insemination by surgical (laparoscopic) method
(h) transferring ova in an animal by non-surgical means.

The authority for the Board to approve appropriately skilled competent persons to carry out acts of veterinary medicine was retained in the VPA and VP Regulations, and in the draft VP Amendment Regulations.

Section 3 of the VPA defines an authorised person as:

(a) a person who is authorised by the Board, in accordance with the regulations, to carry out –
- *(i) an act of veterinary medicine or*
- *(ii) an act of a veterinary medicine of a prescribed class*

or

(b) a person of a prescribed class who is authorised by the regulations to carry out –
- *(i) an act of veterinary medicine or*
- *(ii) an act of veterinary medicine of a prescribed class.*

Section 197(2)(d) of the VPA permits regulations to be made in relation to authorised persons including applications for, and the grant of, authorisations, conditions of authorisations, as well as renewals, suspension, or cancellation of authorisations.

Following consultation, the below acts of veterinary medicine have been included in the VP Amendment Regulations as services that may be performed by an authorised person –

1. *Diagnosis of diseases or physiological conditions in, or injuries to, animals.*
2. *Giving advice or instruction in relation to the medical or surgical treatment of a particular animal or particular group of animals.*
3. *Performing any of the following procedures on an animal –*
   - *(a) ova transfer;*
   - *(b) embryo transfer;*

(c) oocyte collection.

4. *Performing laparoscopic surgery to artificially inseminate an animal.*
5. *Artificially inseminating a mare.*
6. *Performing any of the following procedures on equine teeth, other than as specified in Schedule 2 –*
   (a) removal of dental overgrowths less than 3mm high from a tooth using motorised dental instruments;
   (b) extraction of deciduous caps or loose geriatric teeth with more than 3mm movement.
7. *Performing acupuncture on an animal.*
8. *Spaying cattle using the Willis dropped-ovary technique, if performed in the pastoral region.*
9. *Spaying cattle using the webbing technique (passage approach), if performed in the pastoral region.*
10. *Rectal examination of cattle for pregnancy, if performed for payment.*

As outlined during consultation in June and July 2022 and as detailed within the VP Amendment Regulations Consultation Report, a person applying for authorisation must satisfy the Board that they have the appropriate skills, qualifications, experience or training and competence to carry out an act prescribed in Schedule 6 of the VP Amendment Regulations.

The VP Regulations set out the procedure for a person seeking to be authorised or to renew an authorisation to perform a specified act of veterinary medicine. The person must:

- *provide an application to the Board in an approved form*
- *provide the prescribed fee*
- *ensure the application is accompanied by evidence as required by the Board of the person's skill, qualifications, experience or training*
- *specify within the application the act(s) of veterinary medicine, from those specified in schedule 6, the person seeks to be authorised to perform.*

If the Board considers that a person has the appropriate skills, qualifications or knowledge and experience and that they are competent to carry out the specified act of veterinary medicine, the Board may grant that person approval as an authorised person. The Board has published a series of documents on their website detailing the guidelines and competencies required for authorisations. These documents are available via Guidelines (vsbwa.org.au).

The Board may cancel or suspend the authorisation if there are grounds to suspect the person is no longer competent to perform the act(s) they are authorised for, or if they contravene any of the conditions of their authorisation. Additionally, the Board may place restrictions or conditions on an individual's authorisation to perform a specified act.

Schedule 6 of the draft VP Amendment Regulations and the Consultation Report include further detail on the consultation process and outcome on acts of veterinary medicine: authorised persons.

It is also intended to include in Schedule 6 (Acts of veterinary medicine: authorisations), the administering by injection any of the following: local anaesthetic, non-steroidal anti-inflammatory drugs, sedatives, tranquillisers, euthanasia agents, muscle relaxants and reversal agents used in conjunction with sedatives or tranquillisers.

These are largely as contained in the preceding VS Regulations and current VP Regulations. Non-steroidal anti-inflammatory drugs (NSAIDs) and local anaesthetics are proposed to be added to the list that may be administered by authorised persons to ensure that animal welfare outcomes are achieved.

The Board is working with the Western Australian Department of Health on an amendment to the Medicines and Poisons Regulations 2016 with regard to authorisation to administer these injectable scheduled drugs, which will commence at the same time as the VP Amendment regulations. The intention is that the VP Amendment regulations will include reference to this act of veterinary medicine by authorised persons on completion of that activity. It is also anticipated that the Board will establish guidelines in consultation with stakeholders on the implementation of the authorisation of non-veterinarians to administer these drugs, ensuring clarity to all relevant parties.

Topic 3: Acts that are not acts of veterinary medicine

As discussed in section 1 of this paper, the VPA also enables acts to be prescribed as acts that are not to be regarded as acts of veterinary medicine and are therefore excluded from the definition in section 3(1) of the VPA. (For an act to be prescribed as not an act of veterinary medicine, it must first meet the definition of an act of veterinary medicine.)

The effect of prescribing acts as not acts of veterinary medicine is to clarify that a person other than a veterinarian can carry out those acts. Acts that are prescribed as 'not acts of veterinary medicine' are specified in Schedule 2 of the draft VP Amendment Regulations, with further information included within the consultation report.

It is necessary to prescribe specified acts as acts that are not acts of veterinary medicine to allow for non-veterinarians to perform basic husbandry practices and minimally invasive procedures on animals. Many of the activities prescribed in Schedule 2 of the draft VP Amendment Regulations have been previously determined in animal welfare legislation and national animal welfare standards and guidelines as not required to be undertaken by a veterinarian.

Policy considerations: acts that are not acts of veterinary medicine

Policy considerations regarding what is prescribed in Schedule 2 of the VP Amendment Regulations as an act that is not to be regarded as an act of veterinary medicine included:

- alignment with relevant WA legislation which permits laypersons to carry out certain acts including the *Animal Welfare Act 2002*, *Medicine and Positions Act 2014, Veterinary Chemical Control and Animal Feeding Stuffs Act1976* and subsidiary legislation; and
- alignment with other Australian jurisdiction's legislation and nationally agreed standards and guidelines for animal welfare; and
- consideration as to whether the acts (that would normally fall within the definition of veterinary medicine) meet the following conditions:
    - (i) has been/is performed by non-veterinarians as a husbandry practice or other industry best practice; and/or
    - (ii) presents limited risk for adverse animal health and welfare outcomes; and/or
    - (iii) is considered as an act of low complexity; and/or,
    - (iv) is supported by stakeholder feedback as an act that should not be an act of veterinary medicine.

DPIRD's review of WA's and other jurisdictions' animal welfare legislation, codes of practice and nationally agreed standards and guidelines for animal welfare revealed a range of husbandry procedures which meet the definition of veterinary medicine as prescribed by the VPA. These were not referenced within the VS Regulations given the VS Regulations predated national consideration of these issues. Many of these procedures are an important part of husbandry/management and are performed by non-veterinarians in accordance with jurisdiction's animal welfare legislation, based on nationally agreed animal welfare standards and guidelines.

Schedule 2 of the draft VP Amendment Regulations has therefore been updated to ensure alignment with WA's animal welfare legislation and nationally agreed animal welfare standards and guidelines.

DPIRD has also included amendments to those acts that were previously included in Schedule 2 of the VS Regulations and the current VP Regulations. This is based on a DPIRD review of animal health and welfare considerations, stakeholder feedback and a comprehensive review of both WA's welfare legislation and that of other states/territories.

The outcome includes some amendments to the age limit of animals and/or methodology for non-veterinarians to be eligible to perform husbandry procedures on livestock species listed in Schedule 2 of the draft VP Amendment Regulations as an act that is not an act of veterinary medicine. An example of an amendment is that castration has been defined in the VP Amendment Regulations by age and livestock species (cattle, sheep, pigs, goats, camels and buffalos), compared to the VS Regulations, which did not include detail of species and applied a single age requirement for all animals.

If an act is to be undertaken on livestock older, or by different methodology, than that referenced in Schedule 2 of the draft VP Amendment Regulations, the act becomes an act of veterinary medicine and therefore cannot be undertaken by any person other than a veterinarian.

Topic 4: Cattle pregnancy testing and spaying

The initial consultation in 2022 on the regulatory approach to cattle pregnancy testing and spaying raised significant and divergent stakeholder views. The regulatory approach for cattle pregnancy testing and spaying was developed during further consultation in 2022 with stakeholders and, for cattle pregnancy testing, allows for pregnancy testing by veterinarians, authorised persons or any person, each in prescribed circumstances. These have been developed with the following considerations:

- the necessary knowledge and skills required for pregnancy testing and potential adverse impacts of incorrect technique or results; and
- access to pregnancy testing service providers, particularly in regional/remote locations of Western Australia; and
- community and stakeholder feedback on the regulation of these activities, the practicality of regulation and the availability of registered training organisations; and
- Australian jurisdictional legislative approaches; and
- the preferences of stakeholders who preferred reduced or de-regulation but acknowledged that certification of pregnancy testing should be undertaken by veterinarians.

The regulatory approach for cattle pregnancy testing prescribed in the draft VP Amendment Regulations is implemented as follows:

- Rectal examination of cattle for pregnancy, if performed for payment, is an act of veterinary medicine and is listed in both Schedule 1 (Acts that are acts of veterinary medicine) and Schedule 6 (Acts of veterinary medicine: authorisations).
- Rectal examination of cattle for pregnancy, except as specified in Schedule 1, is not an act of veterinary medicine and is listed in Schedule 2 (Acts that are not acts of veterinary medicine).

Certification of the pregnancy status of an animal, including for example for the purposes of export certification, is an act of veterinary medicine that can only be performed by veterinarians.

Cattle spaying

Cattle spaying is a surgical procedure and, as such, is considered an act of veterinary medicine, as defined under section 3 of the VPA. However, cattle spaying may be performed by non-veterinarians under certain circumstances, when performed in accordance with the terms and provisions of the Regulations.

The regulatory approach for cattle spaying was developed with the following considerations:

- the necessary knowledge and skills to undertake the procedure in a manner that minimises risk to cattle health and welfare, with the ability to appropriately manage adverse outcomes that may arise; and
- animal health and welfare issues regarding the different methods used for spaying of cattle, considering the age of animals when spayed and appropriate pain management; and
- the use of spaying as a means of livestock management; and

- a review of relevant legislative requirements; and
- the availability of appropriate/adequate training for those who spay cattle; and
- access to cattle spaying providers in regional/remote areas of Western Australia; and
- Australian jurisdictional legislative approaches

The regulatory approach for spaying contained in the draft VP Amendment Regulations is implemented by establishing a prescribed class of authorised person for spaying of cattle, and by restricting this act to when undertaken in the Pastoral Region and by the Willis dropped ovary technique (WDOT).

This prescribed class of authorised person mechanism includes conditions in the regulations that need to be met in order for the person to be able/eligible to undertake the act. As an example, training undertaken with a registered training organisation for spaying by the Willis dropped ovary technique (WDOT) is prescribed in the VP Amendment Regulations as one of the criteria for this class of authorised person.

It is an offence for a person to claim to be a person of a prescribed class of authorised person if they do not satisfy the criteria for the class. Further to this, if a person within the prescribed class authorised to undertake spaying of cattle by the WDOT does not carry out their activities with an appropriate level of competence, diligence, care and safety, the Board may impose specified conditions on the person's authorisation or prohibit the person from carrying out the act.

If a non-veterinarian seeks to spay cattle in the Pastoral Region by the webbing technique, rather than by the WDOT, they are required to apply for authorisation as an authorised person and will be assessed on a case-by-case basis by the Board. Similarly, if a person does not satisfy the requirements of the prescribed class, as detailed in the VP Amendment Regulations, but seeks to perform spaying of cattle by the WDOT in the Pastoral Region, they too are required to apply for authorisation as an authorised person and will be assessed on a case-by-case basis by the Board. Spaying of cattle by non-veterinarians is not permitted outside of the Pastoral Region, irrespective of method.

Topic 5: Dentistry

Key issues considered during previous consultation included whether dentistry activities should be acts of veterinary medicine, or excluded from the definition, or whether some acts might be undertaken by authorised persons.

The outcome of these considerations is reflected in the draft VP Amendment Regulations in Schedules 1, 2, 4 and 6. The overarching dentistry provisions are similar to those set out in the repealed VSA and VS Regulations and the current VP Regulations.

- All small animal dentistry (excluding tooth brushing and flossing) is an act of veterinary medicine.
- Equine dentistry is an act of veterinary medicine and has also been designated as an act of veterinary medicine which may be carried out by authorised persons.
- A discrete selection of equine dental activities have been specified as acts that are not acts of veterinary medicine and may be carried out by any person.

The regulatory approach for dentistry and the outcome of defining dentistry as an act of veterinary medicine considered the requirement to diagnose disease, which is an act of veterinary medicine (and an act of veterinary medicine which may be carried out by an authorised person) and which is an important component of dentistry.

Diagnosis and treatment of dental disease may require specialised equipment, provision of anaesthesia and/or pain relief where relevant, and a high level of knowledge and skills achieved through necessary training.

Differentiation of equine dentistry from small animal dentistry considered many of the same factors reflected in the aforementioned pregnancy testing and cattle spaying section of this paper. Further to this, the designation of equine dentistry as an act of veterinary medicine that may be carried out by authorised persons reflects that there are identifiable training and reference organisations including, but not limited to, the International Association of Equine Dentistry (IAED) and Diplomas of Equine Allied Health (Equine Dental Technician).

The requirements noted above necessitate assessment by the Board of a non-veterinarian's skills, training, qualifications and experience before approval may be given to authorise a person to carry out dentistry acts in equine species. The availability of identifiable equine dentistry training courses can be considered by the Board when assessing whether a person has the pre-requisite skills and knowledge to be approved as an authorised person to undertake specified equine dentistry activities.

This legislative approach of designating some activities as acts of veterinary medicine undertaken by an authorised person is intended to be outcome based and provides a transparent process by which an individual can apply and attempt to demonstrate to the Board that they have the required skills and knowledge to undertake specified acts of equine dentistry.

Individuals will only be approved where the Board is satisfied of the persons competence and that the act/activity will be undertaken to the required standard which includes upholding the same standard undertaken by others performing equine dentistry and that expected by consumers.

Topic 6: Fees

DPIRD engaged an external consultant to undertake a review of the Veterinary Practice Board's fees and charges to ensure the Board operates consistently with a cost-recovery policy in accordance with the WA Government Costing and Pricing Government Services Guidelines.

In accordance with the Department of Treasury Better Regulation Program Guidelines, fees/charges will be amended in line with a standard index, namely, the Consumer Price Index and/or which maintain cost recovery and do not require a regulatory impact statement.

DPIRD will be recommending a further external review of the Board's fees and charges years following the implementation of the new fees. This is in recognition there have been amendments to the fee structure arising from the implementation of the VPA.

Important Disclaimer

The Chief Executive Officer of the Department of Primary Industries and Regional Development and the State of Western Australia accept no liability whatsoever by reason of negligence or otherwise arising from the use or release of this information or any part of it.

Copyright © State of Western Australia (Department of Primary Industries and Regional Development), 2025.