

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY . GOVERNOR EDMUND G. BROWN JR.

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#### MEETING MINUTES MULTIDISCIPLINARY ADVISORY COMMITTEE

**January 17, 2017** 1747 N. Market Blvd. – 1<sup>st</sup> Floor Hearing room Sacramento, California

# 10:00 a.m. Tuesday, January 17, 2017

## 1. Call to Order- Establishment of a Quorum

Multidisciplinary Advisory Committee (MDC) Chair, Dr. Jon Klingborg called the meeting to order at 10:01 a.m. Veterinary Medical Board (Board) Executive Officer, Annemarie Del Mugnaio called roll; nine members of the MDC were present and thus a quorum was established. Dr. Allan Drusys arrived at 10:22 a.m.

## 2. Introductions

<u>Members Present</u> Jon Klingborg, DVM, Chair Allan Drusys, DVM, Vice Chair William Grant, DVM David Johnson, RVT Jennifer Loredo, RVT, Board Liaison Kristi Pawlowski, RVT Jeff Pollard, DVM Richard Sullivan, DVM, Board Liaison Diana Woodward-Hagle, Public Member

<u>Staff Present</u> Annemarie Del Mugnaio, Executive Officer Nina Galang, Administrative Program Coordinator Kurt Heppler, Legal Counsel Ethan Mathes, Administrative Program Manager Candace Raney, Enforcement Manager Caesar Victoria, DCA Webcast

Guests Present Kathy Bowler, Veterinary Medical Board Tuesday Cool, California Registered Veterinary Technician Association Nancy Ehrlich, RVT, California Registered Veterinary Technician Association Valerie Fenstermaker, California Veterinary Medical Association Erica Hughes, State Humane Association of California Grant Miller, DVM, California Veterinary Medical Association Eric Mills, Action for Animals Allyne Moon, RVT, California Registered Veterinary Technician Association

MDC Meeting

Mark Nunez, DVM, Veterinary Medical Board John Pascoe, DVM, University of California, Davis Ken Pawlowski, DVM, California Veterinary Medical Association Cindy Savely, RVT, Sacramento Valley Veterinary Technician Association Dan Segna, DVM, California Veterinary Medical Association Leah Shufelt, RVT, California Veterinary Medical Association Cheryl Waterhouse, DVM, Veterinary Medical Board

#### 3. Review and Approval of October 18, 2016 Meeting Minutes

The MDC made a minor correction to the minutes.

• Dr. William Grant moved and David Johnson seconded the motion to approve the minutes as amended. The motion carried 8-0. Dr. Drusys was not present to vote on the motion.

#### 4. Update from the Complaint Process Audit Subcommittee

Dr. Jeff Pollard presented a list of points discussed at the Expert Witness roundtable that he and Dr. William Grant attended on November 3, 2016 in San Diego, CA.

Dr. Pollard stated that from his experience auditing enforcement cases, the letters sent to respondents, from the Board appeared to be educational, rather than punitive.

Dr. Pollard discussed the concept of multiple expert reviews for Board enforcement cases and expressed his opinion regarding the inherent problems with employing two experts to render the same expert opinion.

Ms. Del Mugnaio added that there are two layers of review: 1) in-house consultants and 2) expert witnesses. However, the Board ensures that both layers are not involved in the disciplinary aspect of cases. Criminal cases do not rely on expert witnesses, but standard of care cases do.

Dr. Pollard expressed support for continuation of the Complaint Process Audit Subcommittee review.

#### 5. Discussion and Consideration of "Extended Duty" for Registered Veterinary Technicians Regulations; Potential Recommendation to Full Board

David Johnson suggested that there may be a need to look at access, the risk to the consumer and animal patient, as well as examine what is being practiced in private shelters and review the complaints that the Board receives. It is important in the discussion to provide justification for any proposed regulatory changes when submitting a rulemaking file to the Office of Administrative Law (OAL).

Jennifer Loredo suggested that the "extended duty" discussion on tasks are isolated to Registered Veterinary Technicians (RVT) only.

Allyne Moon, California Registered Veterinary Technicians Association (CaRVTA) President, added that CaRVTA is willing and able to assist on a workgroup or taskforce to discuss these issues.

Cindy Savely, Sacramento Valley Veterinary Technician Association, also offered to assist on a workgroup or taskforce and emphasized that her focus would be on protecting the patient at all times.

Ms. Del Mugnaio pointed out that the Board's role is to respond to potential risk of harm, not to advance the profession. She stated that the Board may want to evaluate whether this is an issue of inappropriate delegation or supervision, or if this is something that should be codified as an excluded function for a veterinary assistant. It may be possible to pull data from the last several years to identify violations of aiding and abetting of unlicensed practice where delegation of complex or higher risk task was the bases for the complaint.

Ms. Loredo opined that having a license can cause one to perform tasks more carefully, since there is a risk of losing their license should something go wrong. Veterinary assistants do not have a license to lose and in Ms. Loredo's experience, veterinary assistants frequently perform the tasks identified in the RVT "Extended Duty" list.

Ms. Del Mugnaio added that survey data will be available based on an Occupational Analysis that is being done for the RVT profession, but it does not cover veterinary assistant duties.

• Jennifer Loredo moved and David Johnson seconded the motion to suggest to the Veterinary Medical Board at the January 18, 2017 meeting to form a task force or work group to develop a tool or guideline to determine the appropriateness of scope of practice changes for veterinary assistants and RVTs. The task force or work group may include members of the MDC, CaRVTA, and other stakeholders. The motion carried 9-0.

## 6. Discussion and Consideration of Proposed Amendments to RVT Job Tasks, Emergency Animal Care – Sedation and Pain Management – Section 2069 of Title 16 of the California Code of Regulations; Potential Recommendation to Full Board

Ms. Del Mugnaio provided background information on RVT job tasks authorized during emergency situations. One item that is missing from the list that had been identified for discussion is the administration of drugs. Existing regulations address any emergency situation, and the addition of new provisions regarding the administration of drugs was important in addressing emergency care at rodeo events.

Eric Mills, Action for Animals, provided background of alleged underreporting of animal injuries at rodeos and expressed support for the proposed language.

The proposed language, as written, is open-ended as far as its inclusion of controlled drugs, and members of the MDC agreed that it should be clarified.

Legal Counsel, Kurt Heppler, suggested further refining the drug administration aspect of the language, but also noted that it may be difficult to promulgate the regulations if it is in conflict with federal law. Dr. Sullivan suggested adding "in compliance with state and federal law".

Ms. Hughes suggested that it might make sense to expand Penal Code section 597.1 to include RVTs as well. Ms. Del Mugnaio responded that it may be challenging to find a legislative vehicle to permit the transport of controlled substances. If non-controlled drugs are sufficient, this could be handled through regulations. Dr. Klingborg opined that it would not be easy to add it into Penal Code section 597.1 since it contains other requirements (e.g. firearms training) that would not apply to RVTs.

Ms. Woodward-Hagle suggested clarifying that "other sporting events" excludes horse-racing events. Ms. Del Mugnaio noted that horse-racing events are not spelled out as an exclusion in other areas of the

Practice Act since those events are generally understood to be under the California Horse Racing Board's jurisdiction.

Mr. Johnson suggested adding the drug-aspect of the proposed language under BPC section 4840 which allows RVTs to purchase controlled substances for the purposes of euthanasia.

Mr. Heppler suggested tabling the statutory language discussion for the next agenda since it was not on this agenda to discuss changes to BPC section 4840 or Penal Code section 597.1 to authorize RVTs to transport controlled drugs.

Dr. Klingborg clarified that the proposed language has been amended to include "the administration of drugs in compliance with state and federal laws".

• Dr. Richard Sullivan moved and Jennifer Loredo seconded the motion to recommend to the Board to move forward with CCR section 2069, Item #9, as amended. The motion carried 9-0.

## 7. Discussion and Consideration of Alternate Route for DVM Graduates to Practice as RVTs – Proposed Section 2027.5 of Title 16 of the California Code of Regulations; Potential Recommendation to Full Board

The proposed language was developed by a task force consisting of Dr. Klingborg, Ms. Loredo, Ms. Del Mugnaio, and Ethan Mathes. The task force confirmed that the proposed eight months prequalification option to sit for the national RVT examination and California RVT examination prior to graduation is consistent with current law allowing a veterinary student to sit for the veterinarian examinations eight months prior to graduation.

Dr. Klingborg clarified that the one-year eligibility option in the proposed language is a grace period to obtain an RVT license or a veterinary license. Members of the MDC expressed opposition with restricting the ability to take the examination past the one-year grace period, arguing that the one year period might not be enough time.

Mr. Heppler suggested that it may be better to apply this regulation prospectively, as there is a legal risk if the Board tries to apply the regulation retroactively. Ms. Del Mugnaio added that it is the understanding that practice as an unlicensed RVT would need to cease one year from the date the regulation is implemented.

Mr. Heppler noted that a "grandfather" clause typically applies to licensees that keep renewing. Veterinary graduates that have been practicing as RVTs would not need to be fingerprinted because you cannot cite for unlicensed activity since they will be given a pass for one year. Mr. Johnson suggested an alternative to make a new regulation, which, in essence, states that graduates under California Code of Regulations (CCR) sections 2022(a) and 2022(b) who have not successfully become a veterinarian who are performing RVT tasks must apply for and pass the RVT examination in order to continue performing RVT tasks.

Dr. Drusys expressed concern regarding the terms "recognized" and "accredited" when referring to the veterinary colleges as used interchangeably in CCR sections 2022(a) and 2022(b). Ms. Del Mugnaio noted that the language used in CCR section 2022(a) speaks to "Board recognition of accreditation" and CCR section 2022(b) speaks to "Board recognition of an equivalent accredited college". The MDC still felt that the language was unclear.

Dr. Drusys expressed support for changing the term "recognized" to "accredited" in CCR section 2022(a).

The MDC proposed the following new section and proposed language of CCR section 2027.5(a): "any person who receives a veterinary medical degree from an accredited veterinary college listed in CCR section 2022(a) or a person who is within eight months of his or her anticipated graduation date from an accredited veterinary college, shall be eligible to apply for the national veterinary technician examination and the California veterinary technician examination as provided for in CCR section 2010."

An additional subsection, CCR section 2027.5(b), would be created to read "a graduate from a recognized veterinary college listed in CCR section 2022(a), may perform RVT job tasks for a period of one year from the date of graduation without holding an RVT license."

Another new section, CCR section 2027.5(c) was proposed with the following language: "any graduate who is currently performing RVT job tasks shall cease practice after one year until or unless the individual passes the RVT examination as prescribed in subsection (a)."

Ms. Del Mugnaio clarified that it may be difficult to reverse an exemption by way of regulation without statutory authority, but the MDC intends to move forward with the proposed language to seek adoption.

• Dr. Richard Sullivan moved and Dr. Allan Drusys seconded the motion to adopt the proposed language for CCR sections 2027.5(a), 2027.5(b), and 2027.5(c) and direct staff to seek legal guidance on the implantation of the requirement for all DVM graduates to obtain an RVT license by a specified date. The motion carried 9-0.

#### 8. Discussion and Consideration of Recommendations from State Humane Association of California and California Veterinary Medical Association Regarding Public and Private Shelters and Minimum Standards & Protocols for Shelter Medicine; Potential Recommendation to Full Board

Erica Hughes, SHAC, expressed that the most important goal for shelters is to make sure that veterinary assistants are lawfully able to perform certain basic tasks upon intake. Ms. Hughes requested that unlicensed shelter staff be allowed to perform the duties identified by CaRVTA.

Ms. Del Mugnaio noted that changes to the scope of authority for veterinary assistants to perform specified tasks would require a statutory amendment.

The MDC and members of the public discussed various levels of veterinary assistant training provided in animal shelters, ranging from on-the-job training, self-paced training with an examination, to no training.

Mr. Johnson added that some Animal Control Officers (ACOs) are considered "veterinary assistants" but may receive formal training through an ACO academy.

Dr. Drusys provided a background on the large showing at his Riverside vaccination clinic to emphasize the need for the service. He presented the results of a survey conducted of Riverside pet owners during free vaccination clinics.

Some highlights from the results include: majority of people surveyed own less than four pets, almost half of those surveyed have never brought their pets in to see a veterinarian, and two-thirds do not have a

regular veterinarian. Approximately 80 percent of those studied attended the free vaccination clinic because it was inexpensive and more than 20 percent were responding to a citation.

# 9. Review and Consider Proposed Regulations Regarding the Compounding of Drugs Pursuant to the Enactment of Senate Bill 1193 (2016), Potential Recommendation to Full Board

Dr. Sullivan provided an overview of the proposed drug compounding language and emphasized that the goal is to clarify existing processes, not to expand the practice.

Dr. Valerie Wiebe, University of California, Davis (UCD), Director of Pharmacy, suggested changing section 2033.1(a) to allow for certain drugs to be prepared in advance due to historic need and justifying the use of the product over time. Under CCR section 2033.6, Item #5, Dr. Wiebe suggested changing the language "beyond use date of 30 days unless an ingredient has a shorter beyond use date" to allow using the beyond use date of 30 days, regardless of a shorter beyond use date, if it can be justified through scientific data.

Dr. Sullivan suggested changing 2033(a) from "under the indirect orders of that veterinarian" to "under written orders of that veterinarian."

Dr. Wiebe clarified that it is legal to sell drug compounds that were made in-house, but the problem comes when you have outsourced the drug compounding mixture to a licensed compounding pharmacy, it was sold to the veterinarian, and then the veterinarian re-sold it to the client.

Dr. Drusys suggested that the shelter environment should be exempted from the Veterinary-Client-Patient Relationship (VCPR) requirement. In the shelter environment, there may be times when the owner is not known and the animal patient must be treated with compounded products regardless of if the owner shows up or not.

Dr. Wiebe noted that there is a recent Pharmacy regulations which removes the time limit for compounding pharmacies to get the compounded products to veterinarians.

Dr. Sullivan reviewed the proposed amended regulatory language.

Dr. Grant suggested removing CCR section 2033.6(a)(6) since there is a compounded product that is commonly used that includes a hazardous drug.

Dr. Wiebe suggested that for all sterile products, the beyond use date should be changed to 28 days after the first puncture and then it must be thrown away.

Ms. Del Mugnaio shared that the Pharmacy Board expressed interest in having joint oversight if compounding is involved.

Dr. Klingborg suggested continuing the MDC's work and meeting again with Dr. Wiebe, other representatives from UCD, and the Board of Pharmacy. No further action was needed from the MDC.

## 10. Discussion and Consideration of Proposed Amendments Regarding Drug Information to be Provided to Clients – Section 2032.1 of Title 16 of the California Code of Regulations; Possible Recommendation to Full Board

Solomon Stupp presented the document on his Lizzie Law initiative. Mr. Stupp expressed his feeling that some veterinarians do not communicate any potential adverse effects of medication and more information should be given to the client. He opined that long-acting drugs should be re-classified as a more dangerous drug.

Mr. Stupp felt that the MDC's proposed language was not enough and stated that the client needs to know what the drugs do and why they are necessary. He requested that the client should be given printed information on the potential risks and adverse effects of the medication, an acknowledgement form to sign, and posters informing clients of this right should be displayed in each of the examination rooms. He expressed that informed consent is just an advisory and he would like this initiative to be accepted as a minimum standard. He clarified that his request only applies to non-emergency, outpatient situations.

Ms. Del Mugnaio clarified that the section in which the proposed language would be placed would make the requirement a minimum standard.

Dr. Sullivan reminded Mr. Stupp that when a client signs a release, it does not change the liability of the veterinarian.

Dr. Klingborg referenced CCR section 1707.2, Duty to Consult, of the Pharmacy Practice Act, which states "a pharmacist shall provide oral consultation to his or her patient or the patient's agent in all care settings: (1) upon request; or (2) whenever the pharmacist deems it warranted in the exercise of his or her professional judgment." CCR section 1707.2 also discusses directions for use and storage and the importance of compliance with directions of the prescribed drugs. Dr. Klingborg opined that it is difficult to communicate things to the client that are unknown or are difficult to anticipate.

Mr. Heppler noted that it was not on the agenda to vote on Mr. Stupp's initiative and suggested taking additional public comment and make revisions to the MDC's language as appropriate.

Dr. Sullivan suggested utilizing "PLUMB'S Veterinary Drugs," a resource tool which provides up-todate veterinary drug information, as a way of satisfying Mr. Stupp's request. Mr. Stupp expressed support for this idea or a website that can be developed that provides professional information.

Ms. Woodward-Hagle noted that it might be beyond the scope of the MDC's and Board's authority to adopt the regulation, unless there is a statute that is identified which provides authority to require drug consultation as a minimum standard of veterinary practice.

Ken Pawlowski, CVMA, expressed that he is not opposed to clients having more information and is encouraged to look more into the Board of Pharmacy language.

Dr. Klingborg assigned Dr. Sullivan and Dr. Pollard to form a subcommittee to research the matter further and develop proposed language.

#### 11. Discuss Definitions and Scope of Responsibility for "Induction" of Anesthesia vs. Sedation – Section 2034 of Title 16 of the California Code of Regulations; Potential Recommendation to Board

Dr. Drusys opined that the differentiations between "anesthesia" and "sedation" are few, and in the field and shelter settings, where precise weight measurements cannot be taken of an unruly animal, the two are virtually the same. Dr. Sullivan shared his concern that there are two separate standards being applied to public shelters vs. private shelters, which can be problematic since public shelters sometimes provide care to owned animals. Mr. Johnson shared his method of handling a situation in which the animal is owned and meets the criteria for "prompt and necessary veterinary care."

Ms. Loredo added that there are exigent circumstances where, based on the time it would take to get to an emergency clinic, it is not in the best interest to ship the animal out. Ms. Loredo felt that there should be a separate standard for shelters.

Dr. Drusys expressed that he could not support allowing veterinary assistants to perform sedation since there is no criteria to become a veterinary assistant.

Dr. Klingborg noted that there are a number of drugs classified as sedatives. Since sedation is not clearly spelled out, RVTs are currently allowed by law to induce sedation. Given at a high enough dosage, sedation can induce anesthesia and intent can be questioned.

The MDC identified the need to allow RVTs to induce anesthesia under indirect supervision in shelter settings. Dr. Klingborg tabled the item to discuss at the next MDC meeting.

## **12. Discuss Minimum Standards for Spay/Neuter Clinics**

The MDC was unable to discuss this item during the allotted amount of time; therefore, it will be placed on the agenda for discussion at the next MDC meeting.

#### **13.** Public Comments on Items Not on the Agenda

There were no comments from public/outside agencies/associations.

#### 14. Future Agenda Items and Next Meeting Dates -

- April 18, 2017 (Oakland)
- July 25, 2017 (Sacramento/Southern California)
- October 17, 2017 (Fresno)
- A. Multidisciplinary Advisory Committee Assignment Priorities
- B. Agenda Items for Next Meeting Minimum Standards for Small Animal Spay and Neuter Clinics

The Minimum Standards for Mobile Specialists topic will be discussed at the next meeting if there is sufficient time to add the item to the agenda.

#### 15. Adjournment

The MDC adjourned at 4:52 p.m.