



## MEETING MINUTES MULTIDISCIPLINARY ADVISORY COMMITTEE

February 20, 2018  
1747 N. Market Blvd.  
1<sup>st</sup> Floor Hearing Room  
Sacramento, California

**10:00 a.m. Tuesday, February 20, 2018**

### 1. Call to Order/Roll Call/Establishment of a Quorum

Multidisciplinary Advisory Committee (MDC) Chair, Dr. Jon Klingborg called the meeting to order at 10:05 a.m. Veterinary Medical Board (Board) Executive Officer, Ms. Annemarie Del Mugnaio called roll; six members of the MDC were present, and a quorum was established. Board members William A. Grant II, DVM, Kristi Pawlowski, Registered Veterinary Technician (RVT), and Diana Woodward Hagle were absent.

### 2. Committee Chair's Remarks, Committee Member Comments, and Introductions

#### Members Present

Jon A. Klingborg, DVM, Chair  
Allan Drusys, DVM, Vice-Chair  
Jeff Pollard, DVM  
David F. Johnson, RVT  
Jennifer Loreda, RVT, Board Liaison  
Richard Sullivan, DVM, Board Liaison

#### Staff Present

Annemarie Del Mugnaio, Executive Officer  
Ethan Mathes, Administrative Program Manager  
Amanda Drummond, Administrative Program Analyst  
Tara Welch, Legal Counsel

#### Guests Present

Allison Lozoya, El Dorado County Animal Services  
Cheryl Waterhouse, DVM, Veterinary Medical Board  
Cindy Savely, RVT, California Veterinary Medical Association and Sacramento Valley Veterinary Technician Association  
Eric Anderson, California Animal Control Director's Association  
Grant Miller, DVM, California Veterinary Medical Association  
Valerie Fenstermaker, California Veterinary Medical Association  
John Pascoe, DVM, University of California, Davis

Leah Shufelt, RVT, California Veterinary Medical Association  
Linda Tripp, Sacramento Valley Veterinary Technician Association and University of California, Davis  
Nancy Ehrlich, RVT, California Registered Veterinary Technician Association

### **3. Review and Approval of October 17, 2017 Committee Meeting Minutes**

The MDC made minor changes to the October 17, 2017 meeting minutes.

- Dr. Allan Drusys moved and Mr. Dave Johnson, RVT seconded the motion to approve the minutes as amended. The motion carried 6-0.

### **4. Update from the Complaint Process Audit Subcommittee; Potential Recommendation to Full Board**

Dr. Jeff Pollard presented research that he and Dr. Grant conducted regarding the complaint process. The Complaint Process Audit Subcommittee met several times over the course of two years. They reported that the cases they reviewed from 2014-2017 were generally well-organized, and the complaint process appears to be improving.

There was a public inquiry from Ms. Bonnie Lutz, who asked about the process for the expert witnesses who review the cases and at what point are they provided with the complaints. There was a concern that the expert witnesses may be putting too much weight into the complaint itself, as opposed to basing their review off the entirety of evidence in a complaint case file. The MDC advised that it is standard procedure during expert witness training for all experts to review the complaint as part of the entire case, because the medical record alone only provides a limited amount of information. The substantiated evidence the expert witnesses uses in making a determination on a case is not based on just what the consumer complainant reported in the complaint, but it is one of many factors reviewed so the totality of the incident understood.

Dr. Klingborg stated that the Complaint Process Audit Subcommittee provides a report every other meeting, so the next report will be in August. Dr. Grant has been a member of the subcommittee since its inception and will be terming out in May, and there will be a new appointee to the subcommittee.

### **5. Discussion and Consideration of Recommendations from State Humane Association of California, California Animal Control Director's Association, and California Veterinary Medical Association Regarding Public and Private Shelters and Minimum Standards and Protocols for Shelter Medicine; Potential Recommendation to Full Board**

Dr. Klingborg addressed the MDC and led the discussion regarding the minimum standards for shelter medicine brought before the MDC that were developed by the State Humane Association of California (SHAC), the California Animal Control Director's Association (CACDA), the California Veterinary Medical Association (CVMA), Ms. Del Mugnaio, Dr. Drusys, and Mr. Johnson.

Erica Hughes from SHAC and Eric Anderson from CACDA addressed the MDC and stated that, while not all parties present at the stakeholder meeting held on December 8th were in unanimous agreement regarding the solution to the presented issues, the document developed is one that had input from all the stakeholders present and one that they felt identified the unique requirements for a shelter setting. The parties involved recommended that the MDC continue drafting minimum standards language that will address the issues identified in the document and satisfy the concerns of the stakeholders involved.

Issue 1: The prevention and treatment of infectious disease in shelters.

Mr. Johnson stated that it would be premature to change the statute without first revising regulations, and that minimum standards should be developed for shelters. He also stated that more clarifying information is needed for some of these issues, including whether shelters need a premises permit, parameters of shelter medicine, whether a shelter's access to a veterinary managing licensee is an issue, and that a subcommittee should be developed to further explore these issues.

Ms. Valerie Fenstermaker noted the CVMA previously proposed minimum standards for shelter settings in its June 2016 report to the Board that were developed from the CVMA's Task Force.

- Dr. Richard Sullivan moved and Mr. Dave Johnson, RVT seconded the motion to create a subcommittee to research the issues regarding the unique needs of a shelter to determine if minimum standards for shelters should be developed. The motion carried 6-0.

Issue 2: The definition of animal shelter.

Dr. Klingborg addressed the MDC and stated that the recommendation before them is that the definition for a shelter be updated to state, "any city or county animal care and control agency, public or private organization that contracts with a city or county to house shelter animals, or non-profit SPCA, or human society incorporated under Corporations Code section 10400 (or the former Civil Code section 607) as societies for the prevention for cruelty to animals." The recommendation was not a unanimous agreement at the December 8th meeting.

The CVMA was not in support of this recommendation until further legal research could be conducted. They expressed concern that the definition of a shelter is not just about veterinary medicine, and that definition could affect other parts of the law. Ms. Hughes clarified that their recommendation seeks only to define shelters for the purposes of minimum standards for shelters and to ensure that those minimum standards apply to both public and private shelters and the Society for the Prevention of Cruelty to Animals (SPCA), and humane societies.

MDC members discussed the authority of the Board to inspect these facilities, specifically if the facilities are for boarding purposes only and do not provide veterinary services. It was clarified that if the animals are housed and treated in the same facility, the Board has the authority to inspect the entire premises, and those facilities would be required to maintain specific sanitary standards.

Dr. Klingborg confirmed that the MDC subcommittee will need to research this issue further and that the development of a definition for a shelter will be left to them to create and present at the next meeting.

### Issue 3: Authority of RVTs and Staff in Shelters

Dr. Klingborg addressed the MDC and stated that the recommendation before them is to amend Business and Professions Code (BPC) section 4840(b) to include veterinary assistants (VAs) and replace “animal health care” with “necessary and prompt veterinary care”. Additional revisions would also include Issue 2, the definition of an animal shelter, but that portion can be held off until a definition of a shelter can be agreed upon.

There was a discussion between the MDC and members of the public about what tasks VAs should be allowed to perform in the shelter setting. Concern was raised that some shelters do not have RVTs on site, and thus rely heavily on VAs to provide services such as vaccinations and deworming. Members of the MDC expressed concern about allowing VAs to perform too broad of tasks and ensuring the regulations that identify VA tasks are not too broad.

Ms. Del Mugnaio inquired whether there is authority under BPC section 4836 that establishes a protocol between the veterinarian, RVT, and VA that would set up a hierarchy for who can delegate tasks and who can provide supervision. She recommended that the MDC research BPC section 4836 to see if there is statutory authority to allow a VA to intake and triage in a shelter but does not elevate them beyond what their current scope of authority would allow.

The MDC discussed creating an itemized list of the tasks that an RVT and VA can perform in the shelter setting or researching BPC section 4836 further to see if this section is adequate without writing additional regulations. The MDC agreed this task would be included in the subcommittee’s research.

### Issue 4: Rabies Vaccinations

Dr. Klingborg addressed the MDC and stated that the recommendation before them is that California Code of Regulations (CCR) section 2035(c) be amended to state that the rabies vaccination may be administered to an owned animal upon redemption from an animal shelter without prior examination by a veterinarian.

The MDC discussed how, at their October 2017 meeting, Ms. Del Mugnaio provided an overview of her conversation with Curtis Fritz at California Department of Public Health (CDPH) regarding the degree of oversight that CDPH may require of the veterinarian in administering the rabies vaccination. At the October 2017 meeting, Ms. Del Mugnaio reported that, ultimately, the veterinarian who signs the vaccination certificate maintains responsibility for the administration, storage, handling, and management of the vaccine, and the training of the staff who are responsible for administering the vaccine. There is no requirement for the veterinarian to be on site while the vaccine is being administered so long as the veterinarian responsible for the shelter understands that he or she shall be responsible for any adverse reaction an animal may experience.

The MDC felt that it was important to develop regulations that would allow for the administration, storage, handling and management of the rabies vaccination within the shelter setting. The MDC agreed this issue would be assigned to the subcommittee for further research and possible incorporation into shelter minimum standards.

## **6. Discussion and Consideration of California Veterinary Medical Association's Proposal Regarding Minimum Standards for Alternate Veterinary Premises/Practices; Potential Recommendation to Full Board**

Dr. Sullivan introduced the topic and stated that he and Ms. Del Mugnaio participated in meetings with the CVMA and multiple veterinary practices to ensure that multiple types of veterinary premises were identified. The document presented before the MDC is what was drafted based on the information obtained from these meetings.

The MDC discussed the Premises Permit Subcommittee Report in length and went through each section and agreed to the following changes:

- CCR section 2030
  - Add an additional sentence at the end of the section to state “If the facility or practice type is operated from a building or facility that is the licensee manager’s principle place of business and the building or facility is registered with the board, the facility or practice type shall be considered a mobile unit and exempt from independent registration with the Board.” This change was recommended by Legal Counsel to clarify which facilities would be required to obtain a premises permit and maintain consistency with the premises registration requirements under Business and Professions Code section 4853, subdivision (b).
- CCR section 2030.2
  - Changing the section name from “Small animal mobile clinic” to “Small animal mobile facility” to maintain consistency.
  - Changing paragraph (b)(2) from “Shall have an examination area separate from the surgery room that is large enough to conduct an examination.” to “Shall have an examination area separate from the surgery room.” This change was recommended to provide clarity and eliminate confusion since (a)(8) already provides the size requirements for the room.
- CCR section 2030.3
  - Changing the language from “For purposes of these regulations an ‘animal vaccination practice’ shall mean a location where veterinary medicine is being practiced where a veterinarian performs only vaccinations against disease and preventative procedures for parasite control.” to “For purposes of these regulations, an ‘animal vaccination practice’ shall mean a location where the scope of veterinary practice is limited to vaccinations and preventative procedures for parasite control.” This change was recommended to address concern that vaccination clinics may use the original language as a means to provide additional services outside their scope of practice.
  - Changing subdivision (c) from “The veterinarian is responsible for consultation and referral of clients when disease is detected or suspected.” to “The veterinarian is responsible for documenting that the animal patient appears healthy enough to receive vaccines or preventable parasiticides as well as providing consultation and referral of clients when disease is detected or suspected.” This change was recommended to ensure that an animal is healthy enough to receive the vaccination

and the veterinarian did their due diligence to inspect the animal and documents their interactions.

- Global changes to the entire document
  - Replacing the term “capacity to render” with “ability to provide”. This change was requested due to concern that facilities, such as mobile facilities, may not have the ability to provide x-ray and diagnostic services, and the verbiage would not allow for the outsourcing of those services.
  - Revising “when medically appropriate” to state “when medically and species appropriate” for facilities to provide exercise to animals residing at the facility. This change was requested due to concern that some facilities may not have the correct facilities to allow for exercise of the animals.
  - Changing “Surgery room doors that are able to be fully closed...” to “Surgery room doors able to be fully closed...”. This change was requested to address concern that the language, as written, could be interpreted as the surgery room could include doors that do not have to be fully closed.
  - Revising the language that states “For purposes of this section, “clean surgery” shall mean the performance of a surgical operation procedure...” to remove subsection (1) and place it at the beginning of the language so that the language reads “When performing clean surgery, the instruments used to perform such surgery shall have been sterilized and the surgeon(s) and ancillary personnel shall wear appropriate apparel. For purposes of this section, ‘clean surgery’ shall mean the performance of a surgical procedure for the treatment of a condition and under circumstances which, consistent with the standards of good veterinary medicine, do not warrant the use of aseptic surgical procedures.” This change was recommended to maintain consistency, provide clarity, and eliminate the need for subsection (1).
- Mr. Dave Johnson, RVT moved and Dr. Jeff Pollard seconded the motion to accept the proposed language as amended. The motion carried 6-0.

## **7. Discussion and Consideration of Amendments to Supervision Requirements for Veterinarians Delegating Tasks to Registered Veterinary Technicians; Potential Recommendation to Full Board**

Dr. Klingborg presented research that he conducted regarding updating CCR section 2035, the supervising tasks of a veterinarian. At its October 2017 meeting, the MDC researched how supervising veterinarians can delegate advanced health care techniques and how the Board can ensure only appropriate and qualified personnel are performing these tasks.

Proposed language includes CCR section 2035(a)(1) which states, “A supervising veterinarian may not delegate any function or allowable animal health care task to an RVT or VA that requires extensive clinical skill and judgement and that is beyond the training and demonstrated competency of the RVT or VA.” This language mirrors similar language from other medical boards that allow for delegation of advanced techniques. Dr. Klingborg reiterated that the MDC decided to amend CCR section 2035(a)(1), instead of creating a list of acceptable tasks an RVT or

VA can perform, because there is no practical way to create an all-inclusive list to encompass all advanced tasks.

Legal Counsel suggested the proposed language can be moved to its own subdivision (d) instead of paragraph (1) under subdivision (a).

Members of the public and the MDC discussed the language, including whether the proposed language was meant to state that in order for the supervising veterinarian to delegate a task, the task would need to go beyond the normal tasks that an RVT or VA would perform and whether the RVT or VA must show good judgement when being assigned a task. The MDC discussed drafting the proposed language by listing out the specific qualifications a supervising veterinarian must look for when delegating tasks, including (1) extensive clinical skill, (2) judgement, (3) requisite training, and (4) demonstrated competency. They also discussed striking “function” from the verbiage, as it was redundant with “allowable health care tasks”. The MDC decided to not include “judgement” as one of the items listed for delegating a task, because they felt “judgement” was not a quantifiable trait, and the judgement required in this provision is that of the supervising veterinarian, not the RVT or VA.

Concern was raised regarding the use of “allowable” in this section. Since the existing language of Section 2035 includes “allowable health care tasks,” and adding references to all of the CCR sections that specifically provide for the health care tasks an RVT, VA, or permit holder can perform becomes cumbersome, the term “allowable” was left in the language, but “function” was removed. The language was revised to “A supervising veterinarian may delegate any allowable animal health care task to an RVT, permit holder, or veterinary assistant, provided the RVT, permit holder, or veterinary assistant has: (1) extensive clinical skill; (2) requisite training; and (3) demonstrated competency.” Concern was raised that changing the language in this way to a positive means that the language is permissive rather than a requirement.

- Dr. Richard Sullivan moved and Dr. Allan Drusys seconded the motion to have Board staff draft language that is both positive and an inclusive list of the qualifications a supervising veterinarian should use for determining delegation, and present that language to the Board. Following discussion and revisions to the proposed language, the motion was amended to instead adopt the revised language. The motion failed 2-4 (Dr. Sullivan and Dr. Drusys voted aye).

The task force will reconvene to further discuss this issue and develop additional language and suggestions to bring back to the MDC for further consideration.

## **8. Public Comment on Items Not on the Agenda**

*There were no comments from the public, outside agencies, or associations.*

## **9. Future Agenda Items and Next Meeting Dates**

### **A. Next Meeting Dates**

The August 21, 2018 meeting was moved to August 28, 2018 with a location to be determined.

- May 22, 2018, Sacramento
- August 28, 2018, TBD
- November 13, 2018, TBD

### **B. Multidisciplinary Advisory Committee Assignment Priorities**

Dr. Klingborg reviewed and updated the list of MDC assignment priorities:

- Complaint Process Audit/ Enforcement Case Outcomes
- Minimum Standards for Shelter Medicine
- Supervision Requirements for Veterinarians Delegating Tasks to RVTs

### **10. Adjournment**

Dr. Jeff Pollard moved to adjourn and Ms. Jennifer Loreda, RVT seconded the motion. The MDC adjourned at 3:20pm.