

# Explanatory Notes Professional Relationships

## 1. Introduction

- (i) There are many situations (clinical and non clinical) where veterinarians must interact, communicate and co-operate with each other. The Code of Professional Conduct (COPC) demands a high standard of ethical behaviour in relation to communication and interaction between veterinary colleagues. An overtly poor relationship between veterinarians undermines public confidence in the whole profession and can pose risks to animal welfare, the promotion of public health, national biosecurity, integrity of certification and the advancement of veterinary knowledge.
- (ii) Isolation from colleagues is a known barrier to maintaining professional competence. Veterinarians should work to develop and maintain good collegial relationships.
- (iii) Different types of situations will occur where more than one independent veterinarian may be providing veterinary services to the same client. Examples of these will be dealt with separately in the following sections. As a general principle veterinarians must always liaise with colleagues where more than one veterinarian is involved in, or has responsibility for, the care of an animal(s).
- (iv) The requirements of this COPC in relation to professional co-operation are identified in order to achieve the best potential outcome for the animals treated and for their owners. VCNZ recognises and affirms the client's right to use the services of more than one veterinarian. The professional ethical requirements in this code are not identified in order to try to prevent clients from exercising this right.
- (v) When different veterinarians are providing professional services to the same client and treating the same animals there is the potential for an overlap of services. Where those services include the authorisation of restricted veterinary medicines, the undertaking of veterinary procedures, the development of herd health programmes, or the provision of advice there is an increased risk that conflicting or concurrent treatment programmes may have the effect of compromising animal welfare/safety and public health. There may be an increased risk of residues in food producing animals and it will be harder to ensure the integrity of certification.
- (vi) When it is known that more than one veterinarian is involved with treating the same animal(s) then those veterinarians must communicate with each other (with the client's consent) and share sufficient information to determine whether proposed treatment plans should be modified in order to protect the interests of the animal(s), the client and the veterinary healthcare providers.

- (vii) Multiple veterinarians can be providing veterinary services to the same client without any overlap of professional responsibilities. In these cases and where it is known that other veterinarians are involved, good standards of ethical behaviour and professional courtesy still dictate that those professionals should make contact with, and identify themselves to each other.
- (viii) In the interests of establishing and maintaining good professional relationships between neighbouring practices it is recommended that veterinarians:
  - a. Taking up duty in a new locality should make contact with other veterinarians in the area and introduce themselves;
  - b. Should communicate effectively and regularly with other veterinarians in the district;
  - c. Should settle any personal dispute with colleagues without recourse to publicity, as such action may bring the profession into disrepute.
- (ix) Where good communication and harmonious relationships exist between veterinarians, especially between veterinarians in neighbouring practices, there is a greater chance that veterinarians will be able to resolve conflicts and issues easily and professionally. Where there are disputes that are not easily settled between the parties, veterinarians should consider using the NZVA to intercede and facilitate the resolution of issues.

## **2. Understanding section 1 – Services provided by more than one veterinarian**

- (i) It is likely that a client will have one usual veterinarian who can be considered to be the provider of regular veterinary services (general veterinary practitioner) for an animal or a particular group of animals owned by the client. Over a period of time, this veterinarian will accumulate veterinary records for the herd/flock/animal(s), their husbandry and their environment providing clinical history information that could be invaluable in future health management of those animals. It is in the best interests of the client and their animals for that veterinarian to be kept fully informed about the animal's complete veterinary care in the situations where some of that care is provided by different and independent veterinarians.
- (ii) Where a veterinarian is proposing to provide a specific and limited range of professional veterinary services to a client they must first (before their services are provided) question the client to ascertain who their general veterinary practitioner is. The veterinarian should seek the client's permission to, and explain the benefits of communicating with the general veterinary practitioner. If the client declines to provide permission, the veterinarian should respect that choice but this process should be recorded. If permission is given, the veterinarian should contact the general veterinary practitioner and inform them of their involvement. The veterinarians involved should co-operate and share necessary clinical information where this will improve the veterinary healthcare of the animals involved, or improve the management of risks associated with the animal treatment.

The general veterinary practitioner should be advised of the scope of services provided by other veterinarians treating the identified animals.

- (iii) Where a veterinarian is providing veterinary services to a geographically distant client, there is a greater requirement to communicate with the client's usual general veterinary practitioner. It may be appropriate to gather relevant medical history to ensure the interests of the animals and the client are not compromised. This communication also facilitates the arrangement of any subsequent veterinary care that the general veterinary practitioner may be required to provide.
- (iv) On occasion a client may choose to use the services of a number of different veterinarians and divide the regular veterinary requirements for a particular group of animals between those practitioners. In this situation there may not be one single veterinarian who could be reasonably considered to be the client's general veterinary practitioner. The principles identified in this COPC relating to communication between the veterinarians still apply, but because the total veterinary input is fragmented it may be difficult to achieve the best possible veterinary healthcare for the animal(s) and the client in these circumstances.
- (v) The general veterinary practitioner for a client's particular animals will typically be providing a broad range of veterinary services and consequently authorising the necessary restricted veterinary medicines required to support those services. Because authorisation of restricted products has to be linked to consultation, the range of restricted products that a veterinarian authorises reflects the range of services provided. In order to meet the ethical obligations around consultation, those veterinarians will therefore be expected to have a broad responsibility to provide 24/7 emergency care.
- (vi) Where a veterinarian is providing a specific and limited range of veterinary services (e.g. consultancy or artificial breeding techniques such as embryo transplanting), the range of restricted veterinary medicines authorised for use by the client will logically be related to and reflect those services. Restricted veterinary medicines should not be authorised by this veterinarian unless the appropriate consultation has taken place in order to gather sufficient information to support prescribing those products. The responsibilities of this veterinarian are still to make provision for continuous emergency care in relation to the matters they have consulted on. Where a veterinarian is providing veterinary services to a geographically distant client, they must still comply with this requirement. Where circumstances are such that the veterinarian cannot personally provide this, specific prior arrangements must be made with colleagues who can do so and provide their colleagues in the area and the mutual client with a specifically arranged emergency service locally.
- (vii) In the situation where a veterinarian is providing services to a geographically distant client and is authorising and supplying restricted veterinary medicines for use by the client or by a technician, the veterinarian remains responsible for the subsequent use of those drugs.

They must only be supplied for use on animals under the care of the veterinarian. The technician or client should be conversant with the correct and proper use of such drugs if not administered under the direct supervision of the veterinarian. Veterinary operating instructions should be used where necessary to control and manage risks associated with use.

### **3. Understanding Section 2 – Second opinions**

- (i) A second opinion is the process of seeking an evaluation by another veterinarian to confirm the diagnosis and treatment plan, or potentially to offer an alternative diagnosis and/or treatment approach.
- (ii) Second opinions may occur for different reasons, and the ethical expectations of the parties may vary accordingly. Second opinions can be loosely divided into those organised independently by the client and those organised with the involvement of the veterinarian. In the former group the client seeks a second opinion usually without informing the veterinarian that they are doing so because they may be apprehensive about the first opinion veterinarian's proposed course of treatment, or they are unhappy with the care provided. In the latter group, the veterinarian might decide for a number of reasons that a second opinion is indicated or advisable e.g. the case is complex or, the veterinarian has concerns about the client's acceptance of the proposed treatment. It is appropriate and a legal requirement under section 138 of the Animal Welfare Act 1999 that a second opinion be sought if the proposed course of action is euthanasia for welfare reasons and the client will not accept the recommendation. A second opinion allows the opportunity for another veterinarian to consider if the proposed course of action is appropriate.
- (iii) When the client organises the second opinion independently it is possible, if their apprehensions are realized that they may choose not to return to the original clinic, or they may choose to have the treatment/investigations carried out at the second opinion clinic. Clients are entitled to choose which veterinarian they will use. In this case the ethical expectations are that the second opinion veterinarian will manage the case as one of supersession.
- (iv) When a second opinion is organised by the veterinarian, the veterinarian should assist the client by recommending an alternative veterinarian with the appropriate expertise. The first opinion veterinarian should provide the necessary case summaries and information to facilitate the process and contact the second opinion veterinarian to notify them of the possible client visit. In these circumstances the second opinion veterinarian should not seek to take over the case.
- (v) In both sets of circumstances the second opinion veterinarian must be careful not to discredit the first opinion veterinarian.
- (vi) Second opinions managed correctly and professionally can lead to better patient care, better quality of medical practice, stronger client loyalty and enhanced relations between the veterinarians involved.

#### **4. Understanding Section 3 - Referral**

- (i) Referral is the act of handing over a matter or clinical case to a person who is a registered specialist or who has particular skills in the appropriate discipline. In making the referral the client should be informed whether the referral veterinarian is a registered specialist, or if they are not, what their particular skills and training are.
- (ii) Referral occurs for the purposes of obtaining a diagnosis and carrying out treatment with the expectation that the client will return to the referring veterinarian.
- (iii) Veterinarians should recognise when a case is outside their area of competence and be prepared to refer it to a colleague whom they are satisfied is competent to carry out the investigations or treatment involved. Veterinarians must exercise their professional judgement in deciding when to offer clients this option. The ethical requirement is not that the veterinarian has to refer the case, but instead to offer the option of referral. Part of the informed consent process is to discuss alternative options to the course of action recommended by the veterinarian. A veterinarian, who fails to inform a client of the option of referral in an appropriate case is unnecessarily exposing themselves to liability.
- (iv) Where a veterinarian has the appropriate training, equipment and resources, and where the informed consent process has taken place and meets the requirements set out in this code, these expectations are not intended to stop veterinarians from providing particular services.
- (v) Where referral has been offered to the client but declined, this should be recorded in the medical record. Veterinarians should consider including this information on the consent form.
- (vi) Veterinarians should be familiar with the referral options available to their clients. Consideration should be given early in appropriate cases to offer the client the option of referral.
- (vii) Veterinarians should facilitate the referral by providing any case summaries and records as necessary to the referral veterinarian. Veterinarians should make telephone contact to discuss the case with the referral veterinarian if documentation is unable to be provided before the appointment.
- (viii) Referral veterinarians must provide referring veterinarians, with detailed reports on diagnoses, treatments and prognoses for animals which are referred. If the referral veterinarian provides a written statement for the client, the original veterinarian should also receive a copy.

#### **5. Understanding section 4 - Supersession**

- (i) The reasons the supersession requirements exist in this code are:
  - a. To protect the safety and welfare of the patient(s);

- b. To encourage professional courtesy;
- (ii) Veterinarians attending a patient (including a herd or flock) for a condition that has been recently treated by another veterinarian are expected to notify the original veterinarian before seeing the patient. Attending the patient may include providing specific clinical advice to the client (e.g. over the phone) before seeing the patient. If that advice to the client is general in nature then this probably does not require the first vet to be notified. If it is not possible for the superseding veterinarian to notify the original veterinarian before seeing the patient, then this should be done as soon as possible after the consultation.
  - (iii) Communication between veterinarians involved with supersession should only take place with the consent of the client. Knowing the previous clinical history can be critical for the safety of the patient. The superseding veterinarian should weigh up carefully whether they should provide services to a client who declines to provide consent for them to communicate with the first veterinarian. Where the client does not consent, the superseding veterinarian should exercise their professional judgement carefully in deciding whether to proceed, balancing the ethical expectations identified in this code against the best interests of the patient. The welfare and safety of the patient should be of primary importance in this decision. However, where consent is not provided the veterinarian must clarify the reasons and explain the basis for these requirements. In order for the veterinarian to proceed with treatment the client must provide justifiable reasons that override the potential risks. In the situation where a client does not agree to consent for communication with the previous veterinarian to occur, and where the superseding veterinarian elects to treat the patient, they must document this decision, preferably with the client's signature confirming the appropriate process has taken place.
  - (iv) In fulfilling the requirements for supersession, the second veterinarian must inform the original veterinarian (or their representative) of their involvement, and request from the original veterinarian (or their representative) details of any relevant clinical information which may influence future clinical management of the specific condition being treated.
  - (v) In contacting the original veterinarian it is not an absolute requirement that the second veterinarian must communicate directly and personally with the original veterinarian. However, professional courtesy is best served if the two veterinarians do discuss the case together. Open and honest communication between veterinarians as a part of supersession will facilitate better communication between the second veterinarian and the client, thus reducing the risk of misunderstandings and the likelihood of complaints. If however, the original veterinarian is not available to discuss the case, the second veterinarian can make the required notification by leaving a clear message about the situation with an appropriate representative of the original veterinarian (e.g. their receptionist).
  - (vi) Similarly the second veterinarian should not have to talk specifically to the veterinarian who has recently treated the patient in order to obtain the

medical history. The patient's medical record should contain sufficient information that another veterinarian could easily interpret the relevant medical history to pass on. The original veterinarian not being able to talk to the second veterinarian is not an acceptable reason not to pass on relevant information in the medical record where there is an urgent need to obtain the information.

- (vii) Patient medical records are owned by the owners of the veterinary practice. However, veterinarians have an over-riding ethical obligation to release copies of their records or relevant information from their records to the client's new veterinarian in order to protect animal welfare unless there are lawful grounds for withholding this information.
- (viii) If the practice owner is not always available to authorise release of the clinical information contained within the record, they have an ethical responsibility to delegate that authority to another person in order that important relevant clinical information is provided in a timely manner.
- (ix) The superseded veterinarian does not have an obligation to send a copy of the patient's clinical record, but most veterinarians will usually do this as it is easier than summarising treatment. The superseded veterinarian is entitled to relay the relevant clinical information in a form that is convenient to them and appropriate for the type and amount of information, and the urgency of the situation. Verbally providing the details may be appropriate, as would be faxing or emailing. If the circumstances of the case are not urgent, posting the details may be sufficient. Veterinarians are expected to exercise their professional judgement about what is acceptable and appropriate in the particular circumstances. The patient's welfare should not be compromised by the decision on how to forward the records.
- (x) The superseded veterinarian should as soon as possible provide treatment details which might have a bearing on the patient's ongoing treatment. This information should include any relevant information including x-rays, lab results drug or other treatments. It is not a requirement that the superseded veterinarian provides this information personally, and if they are otherwise engaged (e.g. in surgery) the relevant details can be relayed by their representative, e.g. receptionist.
- (xi) The second veterinarian does not have to provide the superseded veterinarian with any details of their planned treatment of the case before proceeding or after they have carried out the treatment.
- (xii) Implicit in the ethical requirements surrounding supersession is the expectation that the veterinarians will communicate professionally and not hinder the ongoing management of the case. Ultimately the patient's welfare must not be compromised. There is a secondary expectation that the public perception of the profession will not be compromised through the client's observation of poor communication between veterinarians when supersession is involved in a case involving their animals.

- (xiii) Clients have the right to access all personal information held by a veterinary practice about themselves. [Privacy Principle 6 of the Privacy Act](#) details the rights of persons to enquire whether an organisation holds personal information about themselves, and to request access to that personal information. Personal information is defined as information about a living human being that is capable of being identified to the individual concerned. Personal information does not include the clinical details relating to the treatment of their animals, but it may include any comments contained within the medical record that describe the client personally and which can be identified to the client. The veterinary practice is entitled to charge the client a reasonable fee for providing access to that personal information.
- (xiv) In the interests of openness and transparency and to facilitate a client's particular requirements, veterinarians are encouraged to provide copies of the client's patient's records to the client on request. Where the practice incurs costs to duplicate records, those reasonable costs can be passed on to the client in order for them to obtain their copies.

## **6. Understanding Section 5 – Denigrating colleagues**

- (i) Veterinarians making unsubstantiated public criticisms of other veterinarians could face disciplinary action by the Veterinary Council of New Zealand for bringing the profession into disrepute.
- (ii) Veterinarians must not publish denigrating comments about other veterinarians on any public fora such as internet based blogs and chat sites.

## **7. Understanding Section 6 – Responsibilities to employees**

- (ii) A practice employing newly registered or inexperienced graduates, must take into account that such persons may not have had the opportunity to develop technical and communication skills to perform at all times to a high standard. The responsible veterinarian/s in the practice must ensure that the inexperienced practitioner is appropriately supervised and supported at all times (see Veterinary Services Section 4 for further detail on responsible veterinarian/s) This support may include being available for direct assistance or by call-back, or the provision of access to an alternative back-up, such as a neighbouring practice, a registered veterinary specialist, referral centre, or an out-of-hours veterinary clinic.
- (iii) Responsible veterinarians must support the inexperienced veterinarian within the practice in general communication matters as well as in a professional sense. Practice meetings, practice seminars, regular performance feedback/review meetings and formal induction of new employees into the practice, all assist in the successful adoption of the practice culture, professional standards and business ethics.

- (iv) When a veterinarian enters a practice for any period, the relationship should be defined clearly in an agreed, fair and correctly prepared contract or employment agreement which makes all accountabilities clear. Failure to do so may lead to difficulties and disputes which may bring the whole profession into disrepute.