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Guidelines on delivery of Televeterinary Medicine

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I) PREAMBLE

The Kenya Veterinary Board (KVB) was established under Section 3 of Veterinary Surgeons and Veterinary Paraprofessionals (VSVP) Act No. 29 of 2011. The Board's mandate is to exercise general supervision and control of the practice of Veterinary Surgeons and Paraprofessionals and advise the Government in relation to all aspects thereof in Kenya. Further, Section 6 (2) (a), (e), (h), (i) and (m) of the Act, empowers the Board to regulate all aspects of veterinary practice. Specifically, Section 6 (2) (p) mandates the Board to carry out any other function to improve, promote and advance the veterinary profession and practice in Kenya.

Geographical barriers, pandemics (such as COVID-19), disasters, political and civil unrests and economic cost pose challenges in delivery of accessible, cost effective and quality veterinary health care. Increased demand for quality veterinary services as well as advancements in ICTs provides an opportunity to overcome these challenges. Cognizant of these, the Kenya Veterinary Board has developed guidelines to regulate delivery of veterinary services through Information Communication Technologies (ICTs).

These guidelines shall be enforced through the Code of Ethics and the VSVP Act, 2011 and should not be construed in no way to alter the scope of practice of any Veterinary Surgeon and Veterinary Para Professional; or authorize the delivery of veterinary medical services, in a setting or in a manner that is not otherwise authorized by law. The Kenya Veterinary Board will not condone any dereliction of duty, proper animal care and welfare in relation to any part of these guidelines

II) PURPOSE AND SCOPE

These guidelines provide an appropriate balance between enabling access to veterinary care while ensuring patient safety using ICTs. They provide guidance for regulating the use of televeterinary medicine technologies in service delivery. Key components of the document include: definitions, Veterinarian-Client-Patient Relationship (VCPR), licensure, evaluation and treatment of the patient, continuity of care, medical records, emergency services, prescription and televeterinary medicine service requirements.

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III) DEFINITIONS

Animal means any member of the animal kingdom other than humans, whether living or dead

Client means a person who has entered into an agreement with a veterinary surgeon/ veterinary paraprofessional for the purposes of obtaining veterinary medical services.

General Advice means any advice provided by a veterinarian or veterinary paraprofessional via any method of communication within or outside of an established VCPR that is given in general terms and is not specific to an individual animal, group of animals, diagnosis or treatment.

Informed Consent means the VS or VPP has informed the client or the client's authorized representative, in a manner understood by the client or representative, of the diagnostic and treatment options, risk assessment and prognosis, and the client has consented to the recommended treatment.

Patient means any animal or group of animals receiving veterinary care from a VS or VPP

Service Provider means any individual, firm, partnership, association, joint venture, cooperative, corporation, governmental body or any other group, legal entity or combination acting in concert; and whether or not acting as a principal, trustee, fiduciary, receiver or as any kind of legal or personal representative, or as the successor in interest, assignee, agent, factor, servant, employee, director, officer, or any other representative of such person involved in delivery of telemedicine.

Teleconsultation refers to the interaction that happens between a VS or VPP and a client; or another VS or VPP for the purposes of providing diagnostic or therapeutic services using ICTs

Telehealth is the overarching term that encompasses the use of a broad variety of ICTs and tactics to deliver virtual medical, health, and education services.

Tele veterinary medicine is a sub category of telehealth that involves the remote delivery of veterinary healthcare services such as health assessment or consultations using ICTs.

Teletriage is the safe and timely assessment; and management of an animal patient by VS or VPP via electronic consultation presented by the owner/agent that is not intended to specifically diagnose or treat a patient but aimed at providing the most appropriate advice.

IV) BASIC PRINCIPLES

Veterinary Surgeons and Veterinary Para Professionals should abide by the following basic principles when carrying out their professional duties through tele veterinary medicine:

1. The primary concern is to safeguard animal health and welfare and promote public health
2. To provide oversight on treatment and compliance to the legislation governing the practice of veterinary medicine
3. Use these guidelines as complimentary to existing legislation governing the practice of veterinary medicine
4. Adhere to the Code of Ethics at all times
5. Promote cohesion within the profession and the trust of the profession by the general public
6. Employ sound judgment to determine whether a case requires televeterinary medicine approach
7. Subscribe to accredited televeterinary medicines services provider and adhere to the schedule of duties as per the Section 23 and Second Schedule of the VSVP Act 2011.

V) VETERINARIAN CLIENT-PATIENT- RELATIONSHIP (VCPR)

A Veterinarian Client- Patient relationship (VCPR) exists when: -

1. The VS or VPP has assumed responsibility for making judgements regarding the health and welfare of the animal(s) and the need for treatment, with the owner's (client's) agreement/consent
2. The VS or VPP has sufficient knowledge of the animal(s) to initiate at least a general or preliminary diagnosis of their medical condition. This means that the VS or VPP has up to date knowledge of the keeping and care of the animal(s) by virtue of a clinical examination, or by timely inspections of the premises and has assessed the general health of the animal(s) kept there; and
3. The VS or VPP is available, or has advised the client where they can obtain emergency coverage, for follow-up evaluation in the event of an adverse reaction or failure of the treatment regimen
4. The VS or VPP provides oversight of treatment compliance and outcome
5. The VS or VPP maintains medical records of patient

6. The VS and VPP adheres to the Clause No. 20 and 21 of the Code of Ethics, respectively

VI) VS-VPP RELATIONSHIP

A relationship between VS & VPP shall be deemed to exist when:

1. The two parties handle case(s) /patient(s) as a team
2. The two parties enter into a mutual agreement for sharing the costs and revenue accruing from the particular case(s)
3. Veterinary paraprofessional work under the supervision and/or delegated responsibility of a veterinary surgeon as per Section 23 of the VSVP Act.

The relationship will end as mutually agreed by the two parties.

Both parties observe the provisions of Code of Ethics.

VII) REQUIREMENTS FOR PROVISION TELEVETERINARY MEDICINE

A VS or VPP who utilizes televeterinary medicines approach must:

1. Ensure that a bona fide VCPR exists
2. Make sound judgement on appropriateness of teleconsultation
3. At the earliest opportunity, assess the animal's condition based on history, clinical signs examination and appropriate intervention
4. Take responsibility for evaluating information used in assessment and treatment irrespective of its source
5. Prepare and retain accurate clinical record
6. Observe client - patient confidentiality.

VIII) CRITERIA FOR LICENSING OF TELEVETERINARY MEDICINE SERVICE PROVIDERS

A televeterinary medicines service provider must:

1. Ensure that the client is aware of the identity, location, registration number and licensure status of the VS or VPP
2. Provide to clients a clear mechanism to:
 - a. Access and edit client and patient data.
 - b. Access medical records pertaining to the consultation
 - c. Grant informed consent
 - d. Register complaints with the KVB
3. Provide for access rights to clients to access VS or VPP based on the levels of practice provided for in Section 23 and Schedule II of the VSVP Act.
4. Provide a mechanism for VS or VPP to interact
5. Provide a platform for payment of a minimum consultation fees which shall be determined by the Board from time to time
6. Avail a summary of registered VS or VPP and services offered
7. Provide access rights to the Board for virtual monitoring
8. Inform the clients that additional service costs shall be charged separately by the attending VS or VPP.

IX)) LICENSURE

Televeterinary medicine services providers shall:

1. Be licensed by Kenya Veterinary Board upon compliance with set requirements
2. Ensure that the services are offered under the supervision of a registered veterinary surgeon
3. Ensure that only duly licensed VS or VPP are enrolled on to their platform(s)
4. Renew their license annually subject to compliance with the VSVP Act, 2011.

The Board shall inspect televeterinary medicine service providers from time to time to ensure compliance.

X) EVALUATION AND TREATMENT OF THE PATIENT(S)

The VS or VPP must:

1. Employ sound professional judgment to determine whether using telemedicine is a suitable approach
2. Take appropriate steps to establish the VCPR
3. Obtain informed consent from the client,
4. Conduct all the appropriate patient evaluation consistent with acceptable standards of practice
5. Ensure client - patient confidentiality.

XI) CONTINUITY OF CARE/MEDICAL RECORDS

The VS or VPP must:

1. Maintain appropriate medical records that contain sufficient information for continued care and are compliant with veterinary laws and other applicable laws and regulations
2. Document, archive and avail the telemedicine engagement.

XII) PRESCRIPTION

Prescription of medications in-person or via teleconsultation requires an established VCPR.

The indication, appropriateness, and safety considerations for each teleprescription must be evaluated by the VS or VPP in accordance with VSVP Act, 2011 and Regulation 33 (2) (a) & (b) of Veterinary Medicines Regulations 2015.

XII) EMERGENCY SITUATIONS

In an emergency:

1. Teleconsultation should be as thorough as possible until suitable arrangements can be made for the continuing care of the animal
2. Triage may be performed by a VS or VPP without establishing a VCPR or obtaining Informed Consent.

These guidelines will be reviewed from time to time and the revised version posted on the Kenya Veterinary Board website www.kenyavetboard.or.ke.