SOUTH AFRICAN VETERINARY COUNCIL

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Acting Registrar/CEO: Ms Dinamarie Stoltz

CHANGE OF OWNERSHIP/PRINCIPAL OF A REGISTERED

RULE 35 – Non-Practicing Facility

PLEASE TAKE NOTE

1. All veterinarians and para-veterinary professionals must render services from a facility registered with the SAVC (Council).

2. The SAVC has set of rules for veterinary and para-veterinary facilities, with categories of facilities and minimum standards for each category. These minimum standards are described in rules relating to the practising of veterinary and para-veterinary professions, the facility must comply with set minimum standards of the category you are applying for, to register with Council and render services;

3. This form must be submitted with the facility minimum standards - self-evaluation form - which must be completed by the principal. To assist you in ensuring that your facility complies with these minimum standards, it is required that you conduct a self-evaluation of the facility and submit the completed form with your application for registration of your facility.

4. When doing the self-evaluation, please ensure that: -
   a. Complete the applicable Self-evaluation form for the category of facility you are applying to register.
   b. Refer to the Minimum standards required for type of facility you are applying for.

5. Please ensure that you attach pictures of the facility and proof of payment of the **change of principal of R362** and submit these supporting documents with this application form

6. Please list all the services or functions that you are intending to render from this facility. The list should be detailed to ensure that the Facilities Administrator and Facilities Compliance Committee is able to assess whether the application for registration of the facility and compliance with the minimum standards.

7. **SUBMISSION OF REGISTRATION DOCUMENTS: -**

- The facility registration form must be submitted to reception@savc.org.za
- Please ensure that the form and self-evaluation section are completed, the form must be signed by the principal of the facility in front of commissioner of oath
- This form must be signed in front of a Commissioner of Oaths.
- Registration will be processed within 5 – 7 working of receipt of complete forms.
- **Incomplete registration form will not be processed**

PLEASE NOTE:
Any dishonesty in the completion of this form is considered a serious offence.

WHEN SUBMITTING YOUR APPLICATION FOR FACILITY REGISTRATION, PLEASE ENSURE THAT THE FOLLOWING DOCUMENTS ARE INCLUDED:

IMPORTANT: NO APPLICATION WILL BE PROCESSED UNLESS ALL THE REQUIRED SUPPORTING DOCUMENTS, AS STIPULATED BELOW, ARE SUBMITTED.	**YES / NO Please tick**
Fully completed and signed application form	
Proof of payment of **R362** for change of facility principal	
Photograph of the office	
Photograph of the safe bolted to the wall	
Photograph of the refrigerator for the cold storage of medicines with thermometer and lock	

DEFINITIONS

"Consultancy"	means an interaction between a veterinarian and an owner, farmer, client or group of clients where animals may be examined away from a registered physical facility, treatment protocols drawn up, medicines prescribed and/or provided and professional advice given regarding an ongoing health, production concern/entity or animal behaviour;
"House or farm call"	means when a veterinary professional leaves his/her physically registered base practice to render a professional service to his/her clients in a vehicle suitably equipped for that type of practice;
"Invasive surgery"	means surgery that is performed intra-abdominally, intra-cranially, intra-thoracically, musculo-skeletally or of the cardio-vascular system;
"Mobile animal service"	means a veterinary practice facility, which is registered with the Council in the name of the principal of the base veterinary facility from which it operates;
"Mobile theatre"	means a vehicle or trailer, which could consist of either a self-propelled facility or be mounted on a base which is transported to a site, and which is appropriately equipped to perform sterilisations and other surgical procedures in a controlled environment to indigent or isolated communities;
"Non-practising facility"	means a facility where no veterinary services will be rendered or medicines sold for direct or indirect gain. The veterinarian does not practice, but requires access to Act 101 medicines for use solely on his/her own animals;
"Principal"	means the veterinary professional in whose name the veterinary facility is registered and who takes responsibility for minimum standards of the facility, or his appointed agent who must be a registered veterinary professional;
"Production animal"	means an animal whose products are used by humans and/or which may enter the food chain for consumption;
"Production animal herd health facility"	means a base facility where no clinical work is done and where the primary service is rendered essentially from an equipped vehicle to ruminant livestock, wildlife, poultry, pig or aquatic production units;
"Registered facility"	means a veterinary facility which complies with the minimum standards as applicable to the category of service rendered there, and is registered with Council;
"Research animal facility"	means any facility or area where animals may be used, maintained or bred for scientific purposes, including for research, testing, teaching, validation, production or observation;
"Veterinary hospital/clinic"	means a veterinary facility where veterinary services are available at selected times and wherein examination, diagnostic, prophylactic, medical, surgical and extended accommodation services for hospitalised animals are provided;
"Veterinary laboratory"	means a facility which has the specific purpose of diagnostic and/or research testing, any mobile service unit linked to the permanent facility, and in-house laboratories that form part of a veterinary facility where the service is not only rendered for the facility's own requirements;
"Wildlife"	means all non-domesticated species of animals, whether free-living or kept in captivity.

SECTION A: DETAILS OF THE VETERINARY FACILITY:

1. Name of facility	
2. Facility SAVC Reg Number	
3. Physical address	
4. Postal Address (If different from the physical address)	
5. GPS coordinates	
6. Telephone number of the facility	
7. Mobile Number of the facility	
8. Email Address of the facility	

DETAILS OF THE CURRENT PRINCIPAL OF THE FACILITY

9. Name of the Principal of the facility		
10. SAVC reg no. of the principal		
11. Contact Details of the principal of the facility	**MOBILE NO:**	**EMAIL ADDRESS:**

SECTION B: DETAILS OF THE PRINCIPAL/S OF THE FACILITY (If there's more than one principal, include all their details)

1. Name of the main principal of the facility (responsible for the account)			
SAVC reg no. of the principal			
Contact Details	**MOBILE NO:**	**EMAIL ADDRESS:**	
Proof of CPD compliance of the principal (Please attach proof CPD activities/certificates)		**YES**	
		NO	

2. Name of the Principal of the facility			
SAVC reg no. of the principal			
Contact Details	**MOBILE NO:**	**EMAIL ADDRESS:**	
Proof of CPD compliance of the principal (Please attach proof CPD activities/certificates)		**YES**	
		NO	

SECTION C: OWNERSHIP STRUCTURE OF THE VETERINARY FACILITY, PLEASE INDICATE WITH AN X

PS: The Act does not make provision for a (Pty) Ltd	
Please select the applicable	**Mark with X**
a) Sole Proprietor (Me)	
b) Close Corporation (Attach company registration documents)	
c) Incorporated Company (Attach company registration documents)	
d) State-Owned Facility	
e) Animal Welfare Organisation Please attach NPO number and copy of the constitution	
f) Educational Institution /Animal Research Facility	
COMMENTS/ NOTES	

SECTION D: EMPLOYMENT (OUTSIDE OF THE FACILITY) PLEASE RELEVANT BOX

Are you currently employed at a state-owned facility and/or animal welfare organisation other than this facility	**YES**	**NO**	**Self-Employed**
Nature of employment	**Full-Time**	**Part-Time**	**Self-Employed**
I have permission from my employer/s to perform these services outside (Proof attached)	**YES**	**NO**	**Self-Employed**
I am aware that the permission indicated above will be subject to verification during the routine facility inspection by the SAVC.			**YES**

SECTION E: CONFIRMATION OF TYPE / CATEGORY OF FACILITY X.

TYPE/CATEGORY OF FACILITY	**Mark with "X"**
Rule 24 - Clinical Veterinary Facility – Consulting Room/Clinic (General anaesthesia with invasive surgical procedures)	

PLEASE LIST/ATTACH VETERINARY SERVICES AND PROCEDURES TO BE RENDERED AT THIS FACILITY.

SECTION F: CONFIRMATION OF STAFF MEMBERS EMPLOYED/TO BE EMPLOYED AT THE FACILITY

INITIAL AND SURNAME		SAVC Registration (If applicable)
1.		
2.		
3.		
4.		
5.		
6.		

SECTION E: RULE 35 - MINIMUM STANDARDS FOR NON-PRACTISING FACILITIES

The completion of this checklist/s should reflect the current status of the facility's compliance with the prescribed minimum standards of veterinary facilities.

- In the event that your facility does not comply with one or more required minimum standards as per the checklist/s, you must submit a motivation letter to the SAVC Inspections Committee detailing the reasons why exemption from compliance with those minimum standards is required.
- This motivation letter should provide information about the services and procedures to be rendered at the facility to ensure that the Inspections Committee has the relevant information when evaluating the application for exemption from compliance with these minimum standards for veterinary facilities.
- The motivation letter must be submitted with this form.

BY TICKING "YES" TO ANY RULE ON THIS CHECKLIST YOU AGREE THAT THE FACILITY ALREADY COMPLIES WITH THAT STANDARD.

Rule 35: **NON-PRACTISING FACILITY**	**Principal Self-Evaluation**		**For Official Use - Inspector**		
	Please tick relevant box		**Please tick relevant box**		
	YES	**NO**	**YES**	**NO**	**CATEGORY A, B or C**
(1) The base facility must comply with the following requirements:					
(i) Apply to be registered with Council in this category;					
(ii) have facilities for the safe storage of highly scheduled medicines,					
(iii) have refrigeration facilities for biologicals if applicable;					
(iv) have appropriate equipment for the recording and filing of all orders, scripts and usage of medicines and any diseases or events, as needed according to OIE guidelines and other relevant legislation; and					
(v) have access to the relevant scientific and/ or legislative information resources necessary.					
(2) The non-practising facility will be registered and such registration will be maintained, subject to the following:					
(i) the registered veterinarian must provide proof to the Registrar that he/she is up to date with the requirements of continuing professional development upon request;					
(ii) payment of the applicable annual maintenance fees; and					

(iii) the registered veterinarian undertakes to use any medicines purchased on his/her own animals only, and does not do any work for anyone else or for a fee.					

Principal's Comments	Inspector's Comments

Rule 21 (4): **General requirements at clinical veterinary facilities –** **The Dispensary must comply with the following, which must be read in conjunction with the Medicines Act 101 of 1965:**	**Principal Self-Evaluation** **Please tick relevant box**		**For Official Use - Inspector** **Please tick relevant box**		
	YES	**NO**	**YES**	**NO**	**CATEGORY A, B or C**
(a) It must be a separate room dedicated to the storage of medicines within the practice;					
(b) If medicine is stored in a cupboard in the consulting room, the following will apply: -					
(iv) all reference to temperature, climate control and practicality in Rules (c) to (m) below will equally apply to the room in which the cupboard is located;					

(v) the cupboard must be locked at all times when a veterinarian is not present;					
(vi) only **schedule 2-4 medicines** may be stored in this cupboard. **Schedule 5 and higher medicines must be locked in a safe** as prescribed by the Medicines Control Act.					
(c) light conditions, temperature and humidity within the dispensary or medicine room must comply with the requirements for the storage of medicine, other pharmaceutical products, and packaging materials;					
(d) the working surface area in a dispensary must be sufficient to accommodate the volume of prescriptions dispensed;					
(e) all medicines must be stored at the prescribed temperature;					
(f) a wash hand basin must be accessible, which may be in another room;					
(g) no medicines may be stored on the floor;					
(h) schedule 5 and higher scheduled medicines must at all times be under direct supervision of veterinary professionals and locked away in a safe when a veterinarian is not on the premises;					
(i) storage areas must be large enough to allow orderly arrangement of stock and proper stock rotation;					
(j) a suitable means of counting tablets and capsules. This equipment must be cleaned regularly so that cross-contamination between products is avoided;					
(k) refrigerator must be accessible (even in another room): must be equipped with a suitable thermometer and capable of storing medicines at temperatures between 2°C and 8°C. The refrigerator must be cleaned, defrosted and checked regularly to ensure efficient running. This refrigerator must be used only for storing pharmaceutical products;					
(l) a suitable range of dispensing containers for medicine;					
(m) dispensed medicines must be sold, and correctly labelled in a package containing the following information: -					
(i) the proprietary name, approved name, or the name of each active ingredient of the medicine, where applicable, or constituent medicine;					
(ii) the name of the owner, as well as the name of the patient, if available, for whose treatment such medicine is sold;					
(iii) the directions for the use of such medicine;					
(iv) the name and business address of the dispensing veterinarian; and					
(v) date of dispensing.					
(n) empty, time expired/or broken containers of medicines must be disposed of as legislated for dangerous substances in legislation controlling these substances.					
(o) **records of medicines** purchased need to be kept for a **period of 5 years**					

(p) the receipt of medication for restocking of the dispensary is the **responsibility of the veterinarian,** and not the responsibility of lay persons at the practice.					
(q) have access to the pharmacological reference sources, and in the case of compounding, access to protocols for the compounding of medication.					

Principal's Comments	**Inspector's Comments**

Rule 6: **Records at Veterinary Facilities**	**Principal Self-Evaluation**		**For Official Use - Inspector**		
	Please tick relevant box		**Please tick relevant box**		
	YES	**NO**	**YES**	**NO**	**CATEGORY A, B or C**
(1) The attending veterinary professional **(must)** maintains records, including the records required in terms of the Medicines Act, for each animal or group of animals which are legible, accurate and permit prompt retrieval of information.					
(2) Records must contain the following information for individual animals as applicable: -					
(a) the date or period of the examination or consultation;					
(b) name of the veterinarian who treated the patient;					
(c) client's identification;					
(d) patient name, other forms of identification, as well as the species, breed, gender and age;					
(e) clinical information for the purposes of continuous care and assessment;					
(f) vaccination record;					
(g) special procedures;					
(h) diagnosis;					
(i) treatment and scripts issued; and					
(j) discharge instructions.					
(3) Records must contain the following information for production animals, including wildlife, if applicable:					
(a) The date or period of the examination or consultation;					
(b) Client's identification;					
(c) Species & breed; for wildlife species and sex, age group and/or colour if relevant;					
(d) Procedures or treatment performed. For groups of animals a general description of the type of herd-work and bulk use of medicine are acceptable, but the use of schedule 5 and 6 wildlife capture medicines, must be recorded with care; and					
(e) Instructions to client in general, if applicable and abnormal observations.					
(4) All records referred to in Rule 6(2), radiological images and the interpretation thereof, laboratory and pathology results must be retained by the principal of the veterinary facility for a period of five years from the patient's last visit, with the exception of ultrasound images where only the findings must be recorded.					

(5) Records must contain the following information for diagnostic laboratory work (if) applicable:					
(a) date sample was collected, date received, date completed, and date of release of results;					
(b) client information and geographical information;					
(c) animal identification as submitted, including species, breed, gender and age;					
(d) clinical history;					
(e) tests performed;					
(f) personnel doing the preparation and analysis;					
(g) method followed, deviations if any, reasons for deviation and reasons why results can still be accepted;					
(h) consumables and reagents including name, batch number, and expiry date;					
(i) results of quality control samples;					
(j) environmental conditions, if abnormal, or other critical information required by the standard operational procedure;					
(k) original findings; and					
(l) reports.					
(6) Records referred to in Rule **6(4)** relating to a complaint, charge or allegation lodged with Council in terms of section **31(1)** of the Act must be presented to Council within **seventy two (72) hours** of being requested to submit such records, or as otherwise arranged with Council.					
(7) Proper security arrangements must be made to protect medical and other clinical records from loss, fire, alterations, additions, supplements or unauthorised use; electronic records must be backed up on a daily basis and electronic backups should be stored off-site.					
(8) Any alterations, additions and/or supplements to any records, clinical or otherwise, must be entered as a supplement to said record and must be clearly defined as such.					
(9) (a) The principal of a veterinary facility will be responsible for confirming the identity of the attending veterinary professional to Council, where a complaint is lodged against his/her veterinary facility.					
(b) The principal of a veterinary facility will be responsible for providing the records referred to in Rule 6(5), should a complaint be lodged against a veterinarian no longer in the employ of the principal of the facility, subsequent to the date on which the complaint originated.					
(c) Should the principal of a facility fail to comply with the provisions of Rule 6(9)(a) he/she will be held accountable for any unprofessional conduct arising from such a complaint.					

Principal's Comments	**Inspector's Comments**

DECLARATION BY THE PRINCIPAL

I, Dr		**With SAVC registration no**	

hereby declare under oath that I apply for the **registration** of a facility in terms of Regulation 2(1) of the Regulations relating to the registration of veterinary facilities, read with Rule 4(e)(vi), relating to the Practising of Veterinary Professions, as indicated in the relevant category, that the information contained in this application **true and correct.** I make this application in the full knowledge and acceptance of the minimum standards of facilities as contained in the rules relating to the practicing of a veterinary profession.

SIGNATURE OF THE PRINCIPAL

Signature of the principal/s	**SAVC reg no**	**Date**

TO BE COMPLETED BY A COMMISSIONER OF OATHS:

THUS SIGNED AND SWORN TO BEFORE ME AT _____THIS _____DAY OF _____20_____,

THE DEPONENT HAVING ACKNOWLEDGED THAT HE/SHE* KNOWS AND UNDERSTANDS THE CONTENTS OF THIS AFFIDAVIT, THAT HE/SHE* HAS NO OBJECTION TO TAKING THE PRESCRIBED OATH AND THAT HE/SHE* CONSIDERS THE PRESCRIBED OATH/SOLEMN AFFIRMATION* TO BE BINDING ON HIS/HER* CONSCIENCE, AS REQUIRED BY GOVERNMENT GAZETTE NOS. R1258 OF 21 JULY 1972 AND R1648 OF 19 AUGUST 1977.

COMMISSIONER OF OATHS

FULL NAME AND SURNAME OF COMMISSIONER (in block letters _____

BUSINESS ADDRESS OF COMMISSIONER: _____

DESIGNATION: _____

AREA: _____