VETERINARY PRACTITIONERS BOARD

AUSTRALIAN CAPITAL TERRITORY

Home Veterinary Service

	ACT Veterinary Practitioners Board – Home Veterinary Service	
Policy	**APPROVED BY** ACT Veterinary Practitioners Board	August 2026

Table of Contents

1.0 Purpose

This policy applies to registered veterinary practitioners in the ACT and outlines the regulatory framework governing a Home Veterinary Service. Procedural restrictions outlined within this document represent current Board policy limitations for delivering veterinary services in a domestic setting rather than direct statutory prohibitions under the Act.

This policy establishes:

- minimum professional and operational assurances required for services delivered in domestic settings;
- scope limitations appropriate to veterinary care delivered in the home; and
- explicit exceptions where required for euthanasia, emergency care or animal welfare.

The purpose of this document is to clarify operational boundaries and risk management standards for practitioners delivering home services, ensuring patient safety, animal welfare and public confidence are maintained.

2.0 Introduction/Context

The ACT Veterinary Practitioners Board recognises that veterinary services are increasingly delivered outside traditional fixed clinic environments. While the *Veterinary Practice Act 2018* defines mobile veterinary clinics and mobile veterinary hospitals as distinct vehicle-based entities, it does not explicitly categorise standalone home veterinary services where a practitioner visits a domestic residence without a modified clinical or surgical vehicle.

To provide regulatory clarity, this policy outlines the operational model for a Home Veterinary Service as distinct from registered mobile premises. It sets explicit Board policy limitations on clinical procedures permitted during home visits, restricting services to primary care examinations, minor treatments, microchipping, vaccinations, humane euthanasia and low-risk procedures requiring only oral sedation. Procedures requiring general anaesthesia, heavy sedation or intensive physiological monitoring are excluded from domestic environments due to the absence of specialised recovery and resuscitation facilities.

3.0 Existing legislative provisions

3.1 Veterinary Practice Act 2018

Reference	Description
Section 6	This section states the objects of this Act are to regulate the provision of veterinary services to ensure they focus on the welfare and protection of animals, and that practitioners provide services professionally and competently.
Section 71	This section defines the categories of registered veterinary premises, including mobile veterinary clinics, mobile veterinary hospitals, clinics, consulting rooms and hospitals.
Section 72	Establishes that the Board may make a standard relating to requirements for veterinary premises.

3.2 Code of Conduct for Veterinary Practitioners

Reference	Description
Schedule 1, Clause 1	The basic principles of professional conduct for a veterinary practitioner are a primary concern for the welfare of animals, and the maintenance of professional standards to the standard expected by other practitioners, users of services and the public.
Schedule 1, Clause 4	A veterinary practitioner must maintain knowledge of the current standards of the practice of veterinary science in the areas relevant to their practice, and carry out professional procedures in accordance with those current standards.
Schedule 1, Clause 8	A veterinary practitioner must, when accepting an animal for diagnosis or treatment, ensure that they are available for the ongoing care of the animal, or make arrangements for another practitioner to take over the care
Schedule 1, Clause 14	A veterinary practitioner must ensure that a detailed record of any consultation, procedure or treatment is made as soon as is practicable, which must be legible, in sufficient detail to enable another practitioner to continue treatment, and retained for at least 4 years.

3.3 Other

- Medicines, Poisons and Therapeutic Goods Act 2008: Regulates the acquisition, storage and supply of scheduled substances

4.0 Terms/Definitions

- **Home Veterinary Service:** A service model where a registered veterinary practitioner travels to a client residence to provide veterinary services, utilising tools carried in a standard transport vehicle without performing surgery or maintaining a registered clinical premises inside that vehicle.
- **Veterinary Consulting Rooms:** Fixed premises registered for consultations, minor treatments and restricted acts excluding major veterinary surgery or emergency care.
- **Mobile Veterinary Clinic:** A vehicle or trailer explicitly modified and registered to operate as a veterinary clinic where restricted acts of veterinary science, including major veterinary surgery, may be carried out.
- **Mobile Veterinary Hospital:** A registered vehicle or trailer modified to operate as a veterinary hospital, providing a higher level of diagnostic facilities than a mobile clinic.
- **Veterinary Clinic:** Fixed brick and mortar premises registered for restricted acts of veterinary science and major surgery.
- **Veterinary Hospital:** Fixed premises registered to provide major surgery, emergency care and advanced diagnostic facilities with a minimum of two practising veterinarians.
- **Major Veterinary Surgery:** A restricted act of veterinary science that includes procedures requiring anaesthesia (other than local anaesthetic), spinal anaesthesia, or as prescribed by regulation.

5.0 Classification and Operational Differences

- **Veterinary Hospitals and Mobile Hospitals:** Authorised for full diagnostic, emergency, inpatient accommodation and major surgical procedures under general or regional anaesthesia.
- **Veterinary Clinics and Mobile Clinics:** Authorised for clinical examinations, diagnostic workflows and major veterinary surgery under sterile conditions.
- **Veterinary Consulting Rooms:** Authorised for consultations, minor treatments and restricted acts excluding major veterinary surgery or emergency care.

- **Home Veterinary Services:** Restricted exclusively to primary care, minor non-surgical interventions, non-invasive diagnostics and palliative options.

6.0 Core Distinctions: Home Veterinary Service vs Mobile Premises

The fundamental distinction between a Home Veterinary Service and a registered mobile premises relates to vehicle modification and the physical location of the clinical intervention:

- **Mobile Clinics / Hospitals:** The vehicle itself is an approved, registered clinical environment designed and equipped for sterile surgical procedures and intensive patient management to occur inside the unit.
- **Home Veterinary Services:** The vehicle is used purely for transit. All clinical consultations occur inside the client residence, strictly bounded by the scope limitations of this policy.

7.0 Operational Standards for Home Veterinary Services

Permitted Procedures and Sedation Limitations

Home Veterinary Services are restricted to primary care and non-surgical procedures that do not compromise patient safety. Permitted procedures include:

- Comprehensive physical examinations and health checks
- Routine vaccinations and microchipping
- Diagnostic sampling (e.g. blood collection, skin scrapes, fine needle aspirates)
- Subcutaneous fluid administration and non-invasive supportive care
- Minor first-aid and superficial wound management
- Humane end-of-life care and euthanasia

Chemical restraint in a domestic setting is restricted to low-risk oral sedation protocols. Procedures requiring general anaesthesia, injectable sedation protocols requiring dedicated physiological monitoring, or inhalational anaesthesia are not permitted within a home setting. The sole exception for administering injectable anaesthetic or sedative agents in the home is for the provision of humane euthanasia or immediate emergency welfare stabilisation.

Emergency and Ongoing Care Arrangements

In accordance with the Code of Conduct, practitioners providing a Home Veterinary Service must establish and maintain documented continuity of care arrangements. Because a home service lacks surgical suites, radiography and overnight hospitalisation facilities, practitioners must:

- Maintain a formal, written referral agreement with a registered physical veterinary clinic or hospital located within the ACT.
- Provide clear, written information to clients prior to consultation detailing service limitations and specifying the nominated emergency facility for escalation, advanced diagnostics or critical care transfer.

Scheduled Drug and Record Management

Veterinarians delivering home services must comply fully with all therapeutic goods and controlled substances legislation:

- Scheduled medicines transported for home services must be securely stored within locked, temperature-monitored containers out of public view and reach.
- Practitioners must maintain accurate registers and secure storage for all scheduled substances, retaining the capacity to demonstrate statutory compliance upon request.
- Detailed clinical records must be created contemporaneously or as soon as practicable following consultation, recording patient parameters, diagnostic assessments, exact medication dosages, clinical advice given and referral details. All records must be securely archived for a minimum of 4 years.

8.0 Resources/related policies

- ACT Veterinary Practitioners Board Responsibilities of a Veterinary Superintendent Policy.
- ACT Veterinary Board Premises Self Assessment Checklist (Form VP10).
- ACT Veterinary Board Application to Register a Veterinary Premises (Form VP08).
- GUIDELINES FOR VETERINARY HOUSE CALL PREMISES FOR SMALL OR COMPANION ANIMALS IN WESTERN AUSTRALIA