

# STANDARDS CHECKLIST VETERINARY CONSULTING ROOMS



An inspection of the premises can be avoided if a reasonable visualisation of the premises can be achieved from the information provided on this form and the floor plan. Please submit a one-page floor plan which clearly identifies all the items (using words) indicated in this form and, if applicable, an additional plan showing where the practice is located if in a complex.

## Physical Description

Overall size of the practice premises (internal area)

Building Type:

- New construction
- Stand alone
- On property of applicant
- Leased/rented premises\*
- Other

If existing construction what was the premises previously used as:

\*Number of shops/offices if located in a complex.

Please give details if you chose 'other' above.

## Construction Material

Building

Internal Walls

Floors

## PART 1 - PRESCRIBED STANDARDS

1. A permanent area with no other uses.  Yes  No
2. In good condition with the immediate surrounding areas and the interior maintained in a clean, orderly and sanitary condition, free of insects and vermin, with safeguards taken to avoid sources and transmission of infections.  Yes  No
3. Internal walls and flooring coverings are impervious to allow thorough cleaning and disinfection.  Yes  No

4. Adequate floor space for the separation of practice functions and efficient operation of all activity areas.  Yes  
 No  
 Shown on floor plan
5. Adequate ventilation to ensure client and patient comfort in terms of temperature and air quality.  Yes  No
6. Insect screening on all doors and windows.  or Air conditioned throughout practice.
7. Safeguards installed including self-closing devices on doors to prevent the escape of patients brought into the premises and to ensure the effective confinement of animals at all times. This standard extends to exercising/toileting facilities.  Yes  No
8. Sanitary and aesthetic disposal of all wastes and excreta, cadavers and sharps at intervals sufficient to avoid the generation of offensive odours, offensive appearance and health hazards.  Yes  No
9. Facilities for sterilisation of instruments and drapes and storage of sterilised material.  Yes  No

10. Signage that includes:

- a) the days and hours of attendance;
- b) the telephone number and details for gaining out of hours veterinary attention; and
- c) the name and qualifications of the veterinary surgeons employed at the practice.

Please provide this detail (wording) in the box below and identify the location of the sign.

11. A standard of dress, cleanliness and personal appearance consistent with a clinical atmosphere.  Yes  No
12. Veterinary and support staff commensurate with volume of clientele and procedures undertaken.  Yes  No

Anticipated client load per day:

Anticipated staff complement and designation:

13. Where veterinary premises are located within the confines of a multi-use complex:  Not applicable
- Veterinary premises are totally independent and separate from those of any other tenant or business type without direct public traffic ways between them. This includes airflow and doorways.  Yes  No

If operating as a public veterinary practice, public entrance, telephone and electronic contact details are distinct from that of any other tenant or business type.

Yes  No

Attach sketch plan showing location of premises within complex.

Plan attached

14. Standard of equipment and fittings in terms of age and suitability commensurate with range of procedures to be undertaken and physical attributes of premises.

Yes  No

15. Practice procedures manual incorporating protocols for occupational health and safety.

Yes  No

## PART 2 - RECEPTION AND WAITING AREA

16. Single purpose area positioned independent of practice work areas with adequate furniture and equipment for reception staff and seating for client volume.

Yes  No

Show on floor plan (include size)

Indicated on floor plan

## Large Animals

17-20  Not applicable

17. Sufficient area to facilitate the safe loading and unloading of large animals and movement of such transport used in the delivery of these animals.

Yes  No

18. Suitable loading races for this purpose.

Yes  No

19. Suitable form of stable or secure yard to hold animals on admission.

Yes  No

20. A suitable grassed or surfaced area where horses can be safely examined.

Yes  No

Show 18, 19 and 20 on floor plan.

Indicated on floor plan

## For all clients

21. Case records of veterinary examinations and procedures performed maintained in the format defined in Section 24 of the *Veterinary Surgeons Regulation 2016* and as prescribed on the Board's [website](#). Confidentiality of these records are ensured.

Yes  No

Detail system used:

## PART 3 - EXAMINATION AND CONSULTATION AREA

22. An individual single purpose area not incorporated with public areas, one for each clinician examining or consulting concurrently.

Yes  No

Show on floor plan (include size).

Indicated on floor plan

23. Examination table in each area with impervious surface which can be readily cleaned and disinfected.

Yes  No

24. A basin with hot and cold running water and fixed drainage.

Yes  No

Show on floor plan

Indicated on floor plan

25. Adequate lighting and instrumentation to carry out a competent clinical examination.  Yes  No

**Large Animals**

26-27  Not applicable

26. Securely and safely enclosed area free of extraneous noise and activity, dust free and able to be thoroughly cleaned and disinfected if needed.  Yes  No

Show location and size on floor plan  Indicated on floor plan

27. Where warranted by the type of examination to be conducted, a set of examination stocks and/or squeeze crush.  Yes  No

Show location on floor plan  Indicated on floor plan

**PART 4 - PHARMACY AND DRUG STORAGE**

28. Range of pharmaceuticals consistent with a good standard of practice and the range of procedures undertaken.  Yes  No

29. Cold storage facility for pharmaceuticals independent of those for food or noxious samples.  Yes  No

30. Storage/security, labelling, recording of restricted and controlled drugs must meet Queensland Health [requirements](#).  Yes  No

Detail storage/security arrangements:

Show S4 drug location on floor plan

Show S8 drug safe on floor plan

Detail type of mounting for S8 drug safe

Show Brand/Model of S8 Receptacle

**Complete Parts 5 and 6 if radiology and pathology services are intended to be undertaken.**

**PART5 - RADIOLOGY**

31. X-ray equipment and facilities capable of producing diagnostic radiographs appropriate to the range and size of animals seen at the practice.  Yes  No

Equipment type:

32. A [license to possess the x-ray equipment](#) incorporating a radiation safety and protection plan. (Copy of possession license or evidence of receipt of application for license must be attached).  Yes  No

33. All persons using x-ray equipment hold a use license.  Yes  No

34. X-ray film identified at the time of exposure and should include the name of the practitioner or practice, client, animal and date, and clearly identify left and right sides of the animal.  Yes  No  N/A - digital

35. Developing facilities with bench and storage space incorporated in radiology section. Show on floor plan.  Yes  
 No  
 Shown on floor plan  
 N/A - digital
36. As part of the animal's case history record, radiographs to be safely stored for at least the minimum statutory term (3 years).  Yes  No

**PART6 - LABRATORY**

37. Microscope  Yes  No

Detail:

38. Facilities for the simple examination of blood, serum, urine and faecal specimens in addition to demonstrable access and usage of a professional service in haematology, chemistry, bacteriology, parasitology and pathology if these services are not carried out on the premises.  Yes  No

Detail:

39. Adequate bench and shelf space. Show on floor plan.  Yes  
 No  
 Shown on floor plan
40. Refrigeration for laboratory use, which may be used for vaccine storage. Show on floor plan.  Yes  
 No  
 Shown on floor plan

Additional Information in support of your application: