

**VETERINARY EXAMINING BOARD**

**July 17, 2024**

**9:00am**

**Contact: Melissa Mace 608-279-3861**

In Person: Boardroom CR 106, 2811 Agriculture Drive, Madison, WI 53708

Via Internet Access: <https://www.zoomgov.com/j/1619817980?pwd=ZUIMcEJnd1o5LzRsc1NsSjVIU3BBZz09>

Via Telephone Access: Dial 1-669-254-5252, Meeting ID: 161 981 7980 and participant code: 620863

If you would like to speak during the public comment time please send your name, address, who you are representing (if other than yourself), and the topic of your comments to Melissa Mace at [Melissa.Mace@wisconsin.gov](mailto:Melissa.Mace@wisconsin.gov) or (608) 279-3861 by 4:30 p.m. Tuesday, July 16, 2024

*The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Board.*

**AGENDA**

**I. 9:00 A.M. OPEN SESSION – CALL TO ORDER – ROLL CALL**

**II. Approval of the Agenda (action item)**

**III. Approval of Board Meeting Minutes (action items)**

- A. April 17, 2024 Full Board Meeting
- B. May 7, 2024 Ad Hoc Board Meeting

**IV. Introductions, Announcements and Recognition (informational)**

- A. Reappointments
- B. Board officers and committee appointments changeover

**V. Public Comments**

*Each speaker is limited to five minutes or less, depending on the number of speakers. Each speaker must fill out and submit an appearance card to the Board clerk.*

**VI. American Association of Veterinary State Boards (AAVSB) Matters (informational)**

- A. AAVSB Annual Meeting & Conference, San Diego, CA Sept. 25-28
- B. AAVSB Services Presentation

**VII. Administrative Items**(informational)

- A. VPAP Quarterly Report
- B. Emergency Veterinarian Services
- C. AVMA HOD Report
- D. AABP CVT Guidelines vs. WI VE 1.44

**VIII. Guidance Document (action item)**

- A. VCPR timely exams

**IX. Licensing/Exam Inquiries (informational)**

**X. Administrative Code**

- A. VE 1 Evaluation (**action item**)

**XI. Legislative and Policy (informational)**

- A. Legislative update
- B. Biennial Budget

**XII. Strategic Plan**

- A. 2023 Goals (informational)
- B. 2024 Changes (discussion)

**XIII. Future Meeting Dates and Times**

- A. AAVSB Voting Items Review Sept. 18 9am
- B. Next Board Meeting – October 16, 2024

**XIV. CONVENE TO CLOSED SESSION (ROLL CALL VOTE)**

*CONVENE TO CLOSED SESSION to deliberate on cases following hearing (§ 19.85 (1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.).*

**XV. Deliberation on Licenses and Certificates (action items)**

**XVI. Deliberation on Compliance Matters (action items)**

- A. Proposed Administrative Warnings
  - 1. 24 VET 002 BG
  - 2. 24 VET 026 BK
  - 3. 24 VET 024 AV
  - 4. 23 VET 103 KS

B. Proposed Stipulations, Final Decisions and Orders

1. 24 VET 020 SH
2. 23 VET 118 BG
3. 24 VET 004 AD
4. 24 TECH 002 AL
5. 23 VET 120 SR
6. 20 VET 046; 20 VET 057; 20 VET 062; 20 VET 097; 20 VET 098; 21 VET 029; 21 VET 030; 21 VET 031; 21 VET 032; 21 VET 033 MR
7. 24 VET 041 TG
8. 23 VET 067; 23 VET 105 EM

C. Orders Granting Full Licensure

1. 23 VET 124 JSR

D. Investigations Recommended for Closure

1. 23 VET 114 KK

E. Suspension Orders

**XVII. Review of Veterinary Examining Board Cases**

- A. Licenses Returned to Full Status (Informational)
- B. Pending Case Status Report (informational)

**XVIII. RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION**

**XIX. Open Session Items Noticed Above not Completed in the Initial Open Session**

**XX. Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate**

**XXI. Ratification of Licenses and Certificates**

*To delegate ratification of examination results to DATCP staff and to ratify all licenses and certificates as issued.*

**XXII. ADJOURNMENT**

*The Board may break for lunch sometime during the meeting and reconvene shortly thereafter.*

**VETERINARY EXAMINING BOARD**

**April 17, 2024**

**9:00am**

**Contact: Melissa Mace 608-279-3861**

**MEMBERS PRESENT:** Hunter Lang, DVM; Alan Holter, DVM; Lyn Schuh, CVT; Karl Solverson, DVM; Leslie Estelle, DVM; Stephanie Miesen, DVM; Amanda Reese.

**STAFF PRESENT,** Department of Agriculture, Trade and Consumer Protection (DATCP): Melissa Mace, VEB Executive Director; Aaron O’Neil, DATCP Attorney; Erin Carter, Regulatory Specialist; Heidi Ulteig, Regulatory Specialist; Dustin Boyd, Compliance Supervisor; Angela Fisher, Program and Policy Analyst; Jonathan Bent, Licensing Associate; Karen Torvell, Program Assistant Supervisor.

Hunter Lang, Chair, called the meeting to order at 9:03 am. A quorum of seven (7) members was confirmed.

**I. 9:00 A.M. OPEN SESSION – CALL TO ORDER – ROLL CALL**

**II. Approval of the Agenda**

**MOTION** Alan Holter: moved, seconded by Amanda Reese, to approve the agenda. Motion carried unanimously

**III. Approval of Board Meeting Minutes**

A. January 17, 2024 Full Board Meeting

**MOTION** Alan Holter: moved, seconded by Leslie Estelle, to approve the January 17, 2024 board meeting minutes. Motion carried unanimously

**IV. Introductions, Announcements and Recognition**

**V. Public Comments**

*Each speaker is limited to five minutes or less, depending on the number of speakers. Each speaker must fill out and submit an appearance card to the Board clerk.*

A. Dr. Brian Kersten and Timothy O’Brien, legal counsel, spoke regarding Dr. Kersten’s petition to lift his stay of suspension.

**VI. Administrative Items**

A. VPAP Quarterly Report – Melissa Mace presented the quarterly report to the VEB.

B. SAVMA Meeting Update – Melissa Mace, Dustin Boyd, and Jonathan Bent will present an overview of the Veterinary Examining Board, the veterinary licensing process, and the veterinary complaint process to the University of Wisconsin – School of Veterinary Medicine chapter of the Student American Veterinary Medical Association (SAVMA). Hunter Lang, Alan Holter, and

Amanda Reese will attend as board representatives. Approximately 100 student participants are expected to attend.

- C. Board officers and committee appointments changeover – New officers and committee appointments will take effect at the July 17, 2024 quarterly meeting of the VEB.
- D. Complaints: Annualized Summary – Dustin Boyd presented the complaint summary to the VEB.
- E. Discipline: Administrative Warning vs. Final Decision & Order – Dustin Boyd explained how the two options have been used in past disciplinary cases. In 2023, the VEB issued 3 administrative warning and 43 final decision & orders.
- F. Per Diem Form – Angela Fisher was available for questions regarding the new per diem form.
- G. AABP Technician – Hunter Lang spoke on his work as part of a 20-person team of American Association of Bovine Practitioners (AABP) members to create a guideline for increasing the delegation of tasks to credentialed veterinary technicians in bovine practice. Alan Holter suggested sending an additional document to Wisconsin-licensed members of AABP clarifying which parts of the guideline are in line with Wisconsin statutes.
- H. Temporary Consulting Permit – In response to a letter from the Relief Veterinary Medical Association (RVMA), VEB staff reviewed the requirements and general timeline for issuing a consulting permit to practice veterinary medicine.

## **VII. Guidance Document (action item)**

- A. VCPR timely exams – The Board discussed the creation of an FAQ or a guidance document to better define acceptable lengths of time for a veterinarian-client-patient relationship (VCPR), noting the differences in types of treatments and in food animal vs small animal practices. Aaron O’Neil recommends inclusion of a definition in a guidance document. Alan Holter will consult with Melissa Mace on the creation of said guidance document.

**MOTION:** Alan Holter moved, seconded by Karl Solverson, to approve the creation of guidance on VCPR timely exams. Motion carried unanimously.

## **VIII. Licensing/Exam Inquiries**

- A. Credential Holder Summary
- B. NAVLE Update – Beginning with the November-December 2024 North American Veterinary Licensing Examination (NAVLE) testing window, the International Council for Veterinary Assessment (ICVA) will no longer require candidates to list a specific licensing board on their application and will also no longer allow candidates to change their selected licensing board (or option of not selecting a specific licensing board) after submitting their NAVLE application. Beginning with the October-November 2025 testing window, the NAVLE will shift to 3 testing windows: October 15-November 15, 2025, March 1-March 21, 2026, and July 13-August 8, 2026. Application timeframes will be determined and conveyed to licensing boards by June 2024. Score reports will still be released approximately 4 to 5 weeks after the end of each testing window.

## **IX. American Association of Veterinary State Boards (AAVSB) Matters**

- A. Recap AAVSB Spring Executive Directors Meeting Kansas City MO April 10-11 – Melissa Mace reported that the meeting was a chance for Executive Directors from multiple jurisdictions

to get together and discuss shared issues. Topics included stakeholder interactions, working with boards not under the same state agency, adding a survey to the renewal process, veterinary shortages in emergency care, CVT utilization, and including public records of discipline in newsletters.

- B. Board Basics & Beyond Training, Kansas City MO April 12-13 – Stephanie Miesen reported an appreciation of the training and encourages board members to continue their participation in it.
- C. AAVSB Annual Meeting & Conference, San Diego, CA Sept. 25-28 – AAVSB covers the cost for attendance of 2 board members, but this is not a limit on participation. Leslie Estelle has expressed interest in attending.
- D. Nominations – Nominations for AAVSB positions are due May 29, 2024.

#### **X. Administrative Code**

- A. Approve Statement of Scope (**action item**) – The statement of scope was approved by the governor’s office, and a public meeting was held with no comments.

**MOTION:** Amanda Reese moved, seconded by Karl Solverson to approve the statement of scope SS109-23  
Motion carried unanimously

#### **XI. Legislative and Policy**

- A. Legislative update – No relevant bills have made it to the governor’s desk. Angela Fisher believes that some of the relevant bills may be re-introduced to in the next legislative session.

#### **XII. Strategic Goals**

- A. 2023 Goals (informational) – Melissa Mace reviewed the 2023 goals, making a note of which were met. Dustin Boyd presented the compliance data from 2023, noting which goals were met.
- B. 2024 Changes (discussion) – Dustin Boyd expressed interest in adapting data-tracking to better reflect how complaint data is currently logged, including recidivism and on-site visits. He is interested in receiving board member input on future compliance goals. Melissa Mace shared goals for adding two full-time positions, one focused on VPAP and assisting Angela Fisher, and the other an additional compliance investigator. She also encouraged board members to submit ideas for 2024 strategic goals before the July VEB meeting. Hunter Lang expressed interest in an annual presentation to SAVMA.

#### **XIII. Future Meeting Dates and Times**

- A. Next Board Meeting – July 17, 2024 – Leslie Estelle reported that she will be unable to attend the July meeting.

#### **XIV. CONVENE TO CLOSED SESSION (ROLL CALL VOTE)**

*CONVENE TO CLOSED SESSION to deliberate on cases following hearing (§ 19.85 (1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.).*

**MOTION:** Hunter Lang moved, to deliberate on cases following hearing (§ 19.85 (1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations

with administrative warnings (§ 19.85 (1) (b), Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.). Roll Call Vote: Amanda Reese – yes; Alan Holter – yes; Karl Solverson – yes; Hunter Lang – yes; Lyn Schuh – yes; Stephanie Meisner – yes; Leslie Estelle - yes

**XV. Deliberation on Licenses and Certificates**

A. Prior Conviction SL

**XVI. Deliberation on Compliance Matters**

A. Proposed Administrative Warnings

B. Proposed Stipulations, Final Decisions and Orders

1. 23 VET 037 CH
2. 23 VET 107 MG
3. 23 VET 123 VS
4. 23 VET 124 JS
5. 23 VET 125 RP
6. 24 VET 007 BL
7. 23 VET 077 MC
8. 23 VET 072 NG

C. Orders Granting Full Licensures

1. 16 VET 032 BK

D. Investigations Recommended for Closure

1. 24 VET 003 EH

E. Suspension Orders

1. 24 VET 048 PB

**XVII. Review of Veterinary Examining Board Cases**

A. Licenses Returned to Full Status

B. Pending Case Status Report

**XVIII. RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION**

**XIX. Open Session Items Noticed Above Not Completed in the Initial Open Session**

**XX. Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate**

**MOTION:** Lyn Schuh moved, seconded by Hunter Lang to proceed with credentialing process in the cases of: Conviction Vet Tech SL. Motion carried unanimously.

**MOTION:** Karl Solverson moved, seconded by Leslie Estelle to accept stipulations and final decision orders in the cases of: 23 VET 037 CH; 23 VET 107 MG; 23 VET 123 VS; 23 VET 124 JS; 23 VET 125 RP; 24 VET 007 BL; 23 VET 077 MC; 23 VET 072 NG  
Motion carried unanimously.

**MOTION:** Alan Holter moved, seconded by Hunter Lang, to accept orders granting full licensure in the cases of: 16 VET 032 BK  
Motion carried unanimously.

**XXI. Ratification of Licenses and Certificates**

*To delegate ratification of examination results to DATCP staff and to ratify all licenses and certificates as issued.*

**MOTION:** Leslie Estelle moved, seconded by Hunter Lang, to delegate ratification of examination results to DATCP staff and to ratify all licenses and certificates as issued. Motion carried unanimously.

**XXII. ADJOURNMENT**

**MOTION:** Leslie Estelle moved, seconded by Hunter Lang to adjourn. Motion carried unanimously.

The meeting adjourned at 11:13 am.



**VETERINARY EXAMINING BOARD**

**May 7, 2024**

**12:00pm**

**Contact: Melissa Mace 608-279-3861**

**MEMBERS PRESENT:** Alan Holter, DVM; Lyn Schuh, CVT; Karl Solverson, DVM; Leslie Estelle, DVM; Stephanie Miesen, DVM; Amanda Reese.

**STAFF PRESENT,** Department of Agriculture, Trade and Consumer Protection (DATCP): Melissa Mace, VEB Executive Director; Aaron O'Neil, DATCP Attorney; Axel Candelaria Rivera, DATCP Attorney; Liz Kennebeck, Attorney; Dustin Boyd, Compliance Supervisor; Jonathan Bent, Licensing Associate.

Alan Holter, Vice Chair, called the meeting to order at 12:03 pm. A quorum of six (6) members was confirmed.

**AGENDA**

**A. 12:00 P.M. OPEN SESSION – CALL TO ORDER – ROLL CALL**

**II. Approval of the Agenda (action item)**

**MOTION** Lyn Schuh: moved, seconded by Amanda Reese, to approve the agenda. Motion carried unanimously

**III. Public Comments**

*Each speaker is limited to five minutes or less, depending on the number of speakers. Each speaker must fill out and submit an appearance card to the Board clerk.*

Dr. Burch provided comment on her actions that were called into question via the petition.

**IV. Future Meeting Dates and Times**

**A.** Next Board Meeting – July 17, 2024

**V. CONVENE TO CLOSED SESSION (ROLL CALL)**

*CONVENE TO CLOSED SESSION to deliberate on cases following hearing (§ 19.85 (1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.).*

**MOTION:** Leslie Estelle moved, seconded by Amanda Reese to move to closed session to deliberate on cases following hearing (§ 19.85 (1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§

19.85 (1) (g), Stats.). Roll Call Vote: Amanda Reese – yes; Alan Holter – yes; Karl Solverson – yes; Lyn Schuh – yes; Stephanie Miesen – yes; Leslie Estelle - yes

A. Suspension Orders 24 VET 048 PB

**VI. Review of Veterinary Examining Board Cases**

**VII. RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION**

**MOTION:** Stephanie Miesen moved, seconded by Amanda Reese, to reconvene to open session. Motion carried unanimously.

**VIII. Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate**

**MOTION:** Amanda Reese moved, seconded by Karl Solverson, to deny the petition for summary suspension of the license of PB in the case of 24 VET 048 PB. Motion carried unanimously.

**IX. Ratification of Licenses and Certificates**

*To delegate ratification of examination results to DATCP staff and to ratify all licenses and certificates as issued.*

**MOTION:** Stephanie Miesen moved, seconded by Leslie Estelle, to delegate ratification of examination results to DATCP staff and to ratify all licenses and certificates as issued. Motion carried unanimously.

**X. ADJOURNMENT**

**MOTION:** Karl Solverson moved, seconded by Leslie Estelle to adjourn. Motion carried unanimously.

The meeting adjourned at 12:33pm.

## Veterinary Examining Board Agenda Request Form

<b>Meeting Date</b>	7/17/2024
<b>Requestor Name</b>	Melissa Mace
<b>Item Title for the Agenda</b>	Reappointments and Officer/Liaison/Committee turnover
<b>Should this be in Open or Closed Session?</b>	Open
<b>Is this an Action Item or for Information Only?</b>	Information
<b>Are there Attachments?</b> (If yes, include file names)	No
<b>Is a Public Appearance Anticipated?</b>	
<b>Description of the Agenda Item</b>	
<p>Congratulations to Dr. Holter and Amanda Reese on their reappointments to the Board! Their terms go thru July 1 2028.</p> <p>Dr. Solverson and Dr. Estelle are in the last year of their terms.</p> <p>July is the changeover for Board officers and Liaisons, see the attached for the 2024 board officers and liaisons and committee appointments.</p>	

## 2024 Elections and Appointments (effective July 1, 2024)

<b>2024 Election Results</b>		
<b>Office</b>	<b>Description of Role</b>	<b>Member Name</b>
Board Chair	Highest ranking officer. Manages meetings. Delegated authority to sign documents on behalf of the Board. In order to carry out duties of the Board, the Chair has the ability to delegate this signature authority to the Board's Executive Director for purposes of facilitating the completion of assignments during or between meetings.	Dr. Hunter Lang
Vice Chair	Serves as backup for the Board Chair.	Dr. Alan Holter
Secretary	Serves as secondary backup for the Board Chair.	Amanda Reese

<b>2024 Liaison Appointments</b>		
<b>Liaison</b>	<b>Description of Role</b>	<b>Member Name</b>
Continuing Education and Exams Liaison	Consultation on CE questions (type of CE, acceptable as CE, etc.) Review and consult on questions regarding adequacy of Exams and Exam questions as appropriate.	Primary: Dr. Hunter Lang
		Alternate: Lyn Schuh

<b>2023 Committee Appointments</b>		
<b>Committee</b>	<b>Description of Role</b>	<b>Member Name</b>
Screening Committee	Delegated authority to open cases for investigation or closes cases inappropriate for further action. Delegated authority to consider questions related to scope of practice of veterinary medicine and veterinary technicians. The Committee may	Dr. Alan Holter
		Dr. Miesen
		Lyn Schuh
		Dr. Leslie Estelle

	<p>choose to approve or reject a particular practice, or bring the matter to the full Board. Chair manages Committee meetings.</p>	<p>Amanda Reese</p>
		<p>Dr. Karl Solverson</p>
<p>Credentialing Committee</p>	<p>Delegated authority to address all issues related to credentialing matters, <b>except potential denial decisions</b> should be referred to the full Board for final determination. Delegated authority to employ a “passive review” process for background checks, whereby if no Committee member requests a meeting on the materials within five business days after receiving them, the application would be considered cleared to proceed through the process. Chair manages Committee meetings.</p>	<p>Dr. Hunter Lang</p>
		<p>Lyn Schuh</p>
		<p>Dr. Karl Solverson</p>
<p>Administrative Rules Committee</p>	<p>Meet in between quarterly meetings to discuss administrative rules and guidance documents. The Committee’s role is to expedite the process of drafting documents. Final drafts will go to the full Board for approval. Chair manages committee meetings and is the primary contact for simpler administrative rule questions.</p>	<p>Dr. Leslie Estelle</p>
		<p>Dr. Hunter Lang</p>
		<p>Amanda Reese</p>

## Veterinary Examining Board Agenda Request Form

<b>Meeting Date</b>	July17, 2024
<b>Requestor Name</b>	
<b>Item Title for the Agenda</b>	AAVSB Matters
<b>Should this be in Open or Closed Session?</b>	open
<b>Is this an Action Item or for Information Only?</b>	informational
<b>Are there Attachments?</b> (If yes, include file names)	AAVSB call for Nominations
<b>Is a Public Appearance Anticipated?</b>	No
<b>Description of the Agenda Item</b>	
<p>The AAVSB meeting will be held in sunny San Diego CA Sept. 25-28. AAVSB pays reasonable expenses (travel, hotel, registration) for two voting delegates to attend. Dr. Estelle has expressed interest.</p> <p>AAVSB presentation on</p> <ul style="list-style-type: none"> <li>• RACEtrack</li> <li>• Vault</li> <li>• Other services</li> </ul>	





## Review Model Documents

Dear AAVSB Member Boards,

The AAVSB is initiating the review of the 2020 AAVSB Model Regulations: Scope of Practice for Veterinary Technicians and Veterinary Technologists and Appropriate Use of Opioids. As part of this initial research period, the Regulatory Policy Committee(RPC) is submitting these model documents for Member Board commentary.

In addition, the RPC is seeking feedback on the opening statements for both the Practice Act Model and the Model Regulations. The goal for these model documents is to be a resource for AAVSB Member Boards to consult when that jurisdiction is considering changes to their Practice Act. Model documents are not intended to dictate to the Member Boards language that they should adopt. As such, the RPC desires feedback from Member Boards to ensure that these goals are reached.

Finally, The RPC is seeking feedback on selected sections of the AAVSB Practice Act Model (PAM). The PAM is a living document and requires regular review and updating.

Please use the attached [Form](#) to provide feedback on any of the attached documents below. One Form per numbered line is requested, but there is no limit to the number of forms that may be submitted. The RPC will again seek

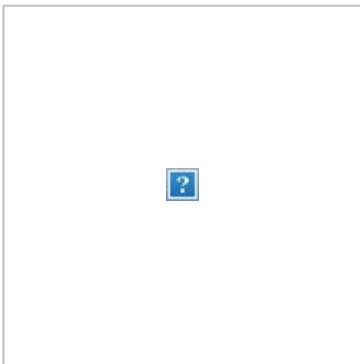


Member Board feedback on any final drafts. The deadline is **August 26, 2024**.

- [AAVSB Model Regulations Scope of Practice for Veterinary Technicians and Veterinary Technologists NUMBERED LINES](#)  
[AAVSB Model Regulations Appropriate Use of Opioids NUMBERED LINES](#)  
[Introductory language PAM NUMBERED LINES](#)  
[Introductory language Model Regulations NUMBERED LINES](#)  
[PAM Sections for Review NUMBERED LINES](#)

Please email Beth Venit, AAVSB Chief Veterinary Officer at [evenit@aavsb.org](mailto:evenit@aavsb.org) with any questions.

Thank you for your partnership as we develop these Model Documents.



**James T. Penrod, CAE, FASLA**

Chief Executive Officer  
American Association of Veterinary State Boards  
12101 W 110th Street, Suite 300  
Overland Park, KS 66210  
1.816.931.1504, ext. 224  
1.877.698.8482, ext. 224  
Fax: 1.816.931.1604  
Email: [jpenrod@aavsb.org](mailto:jpenrod@aavsb.org)  
Web: <https://www.aavsb.org>  
Facebook: <https://www.facebook.com/aavsb>  
Twitter: <https://twitter.com/aavsb>

## **Tuesday, September 24**

- Exam Development Workshop for VTNE® (closed session)

## **Wednesday, September 25**

- **Member Board Training** (optional)
- **Executive Directors' & Registrars' Summit** (optional)
- Committee Meetings
- Board of Directors Meeting

## **Thursday, September 26**

- **Member Board Training** (continued)
- **Executive Directors' & Registrars' Summit** (continued)
- AAVSB VTNE® Deep Dive
- ICVA NAVLE® Deep Dive
- Committee Meetings

## **Friday, September 27**

- **Business Session**
- **Education Sessions**

## **Saturday, September 28**

- **Business Session**
- **Education Sessions**

This year's Business Sessions will be broadcast virtually, while all educational sessions will be held in person.

Time is limited to take advantage of [the Delegate Funding Program](#). This policy covers all reasonable travel and lodging expenses for two Delegates (voting & alternate), so secure your Board's spots early.

**Register Now**

**Veterinary Examining Board  
Agenda Request Form**

<b>Meeting Date</b>	7/17/2024
<b>Requestor Name</b>	Melissa Mace
<b>Item Title for the Agenda</b>	AAVSB Program and Service
<b>Should this be in Open or Closed Session?</b>	Open
<b>Is this an Action Item or for Information Only?</b>	Information
<b>Are there Attachments?</b> (If yes, include file names)	No
<b>Is a Public Appearance Anticipated?</b>	
<b>Description of the Agenda Item</b>  Presentation on AAVSB Program and Services – Beth Venit VMD, MPH, DACVPM (she/her) Chief Veterinary Officer, American Association of Veterinary State Boards	

## Veterinary Examining Board Agenda Request Form

<b>Meeting Date</b>	July 17, 2024													
<b>Requestor Name</b>	M. Mace													
<b>Item Title for the Agenda</b>	VPAP Update													
<b>Should this be in Open or Closed Session?</b>	Open													
<b>Is this an Action Item or for Information Only?</b>	Information Only													
<b>Are there Attachments?</b> (If yes, include file names)	Yes													
<b>Is a Public Appearance Anticipated?</b>	No													
<b>Description of the Agenda Item</b>														
<p>VPAP Update; Utilization reports</p> <p>Hosted Webinars:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Date</th> <th style="width: 60%;">Title</th> <th style="width: 25%;">Attendance</th> </tr> </thead> <tbody> <tr> <td>June 27 Noon</td> <td>Working with Challenging Customer Behaviors</td> <td style="text-align: center;">33</td> </tr> <tr> <td>Sept 12 Noon</td> <td>Living Well with Stress</td> <td></td> </tr> <tr> <td>Nov 12 Noon</td> <td>Seasonal Stress</td> <td></td> </tr> </tbody> </table> <p>RFP for 2025 VPAP Host underway</p>			Date	Title	Attendance	June 27 Noon	Working with Challenging Customer Behaviors	33	Sept 12 Noon	Living Well with Stress		Nov 12 Noon	Seasonal Stress	
Date	Title	Attendance												
June 27 Noon	Working with Challenging Customer Behaviors	33												
Sept 12 Noon	Living Well with Stress													
Nov 12 Noon	Seasonal Stress													

[Overall Summary](#)[Trends](#)[Demographic](#)[Appendix](#)[Glossary](#)[Summary](#)[Participant](#)[Organization](#)

## Summary (April 2024 to June 2024)

### Utilization Overview

We are pleased to present you with the key indicators relating to usage of your program for eligible participants by:

#### **Veterinary Professional Assistance Program**

The period covered is from: April 2024 to June 2024

During this reporting period, the program covered a population of **6,870**, resulting in a utilization rate of **0.12%** and an annualized utilization of **0.47%**. This is below the same period twelve months prior with **0.29%**.

Utilization

Annualized Utilization

**0.12%**    **0.47%**[View Utilization Breakdown](#)

Counseling Services

**0.10%**

Work/Life Services

**0.01%**

### Organizational Cases

Management Consultations

**0**

Critical Incident Services

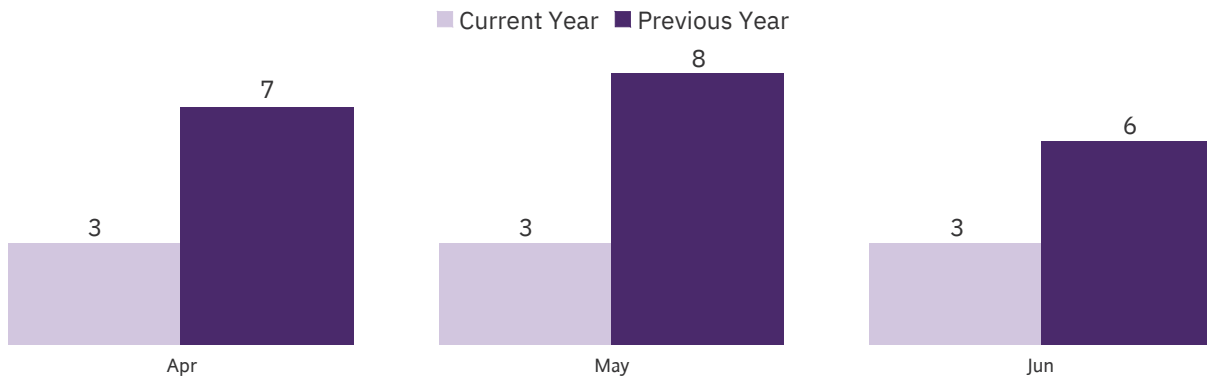
**0**

Workplace Support Programs

**0**

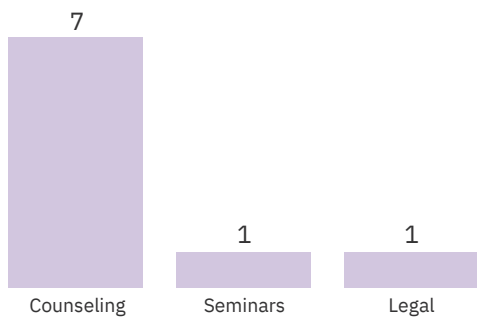
### Comparative Prior Year vs. Current Year

#### Cases by Month



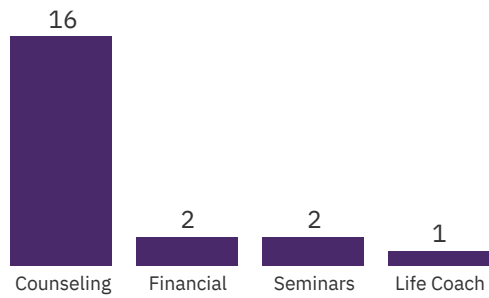
#### Case totals by top services

Current year



#### Case totals by top services

Previous Year



### Participant (April 2024 to June 2024)

Total number of unique participants

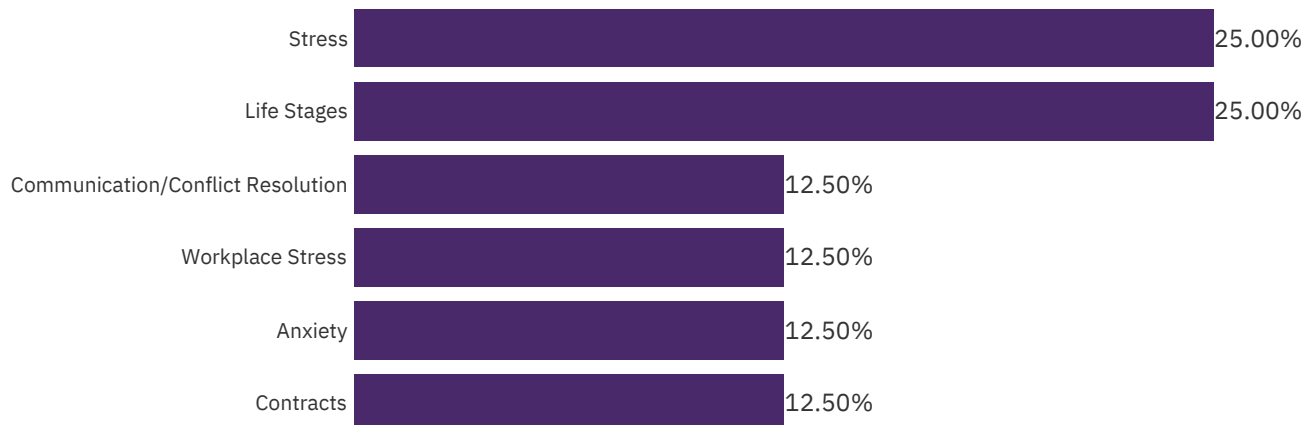
6

New  
5

Reaccess  
1

Participant Services	Q1	Q2	Q3	Q4	Current Total
<b>General Counseling</b>	<b>7</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>7</b>
Counseling	7	0	0	0	7
<b>Work/Life</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>
Legal	1	0	0	0	1
<b>Total</b>	<b>8</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>8</b>

### Issues



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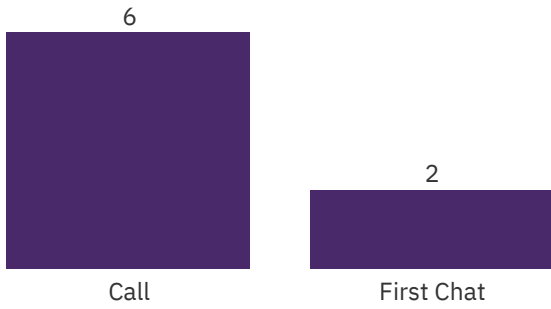
Summary

Participant

Organization

### Cases by intake type

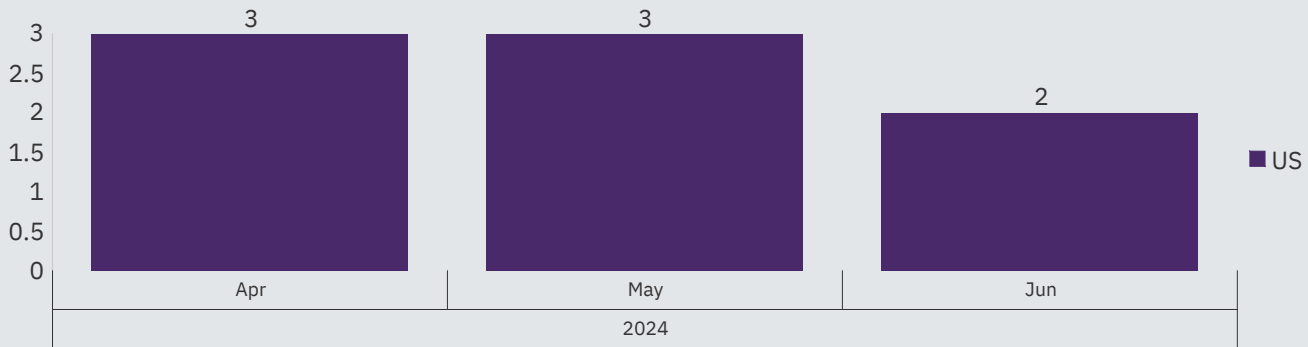
8



### Service inquiries by intake type

No Data Available

### Participant cases by month





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[Participant](#)

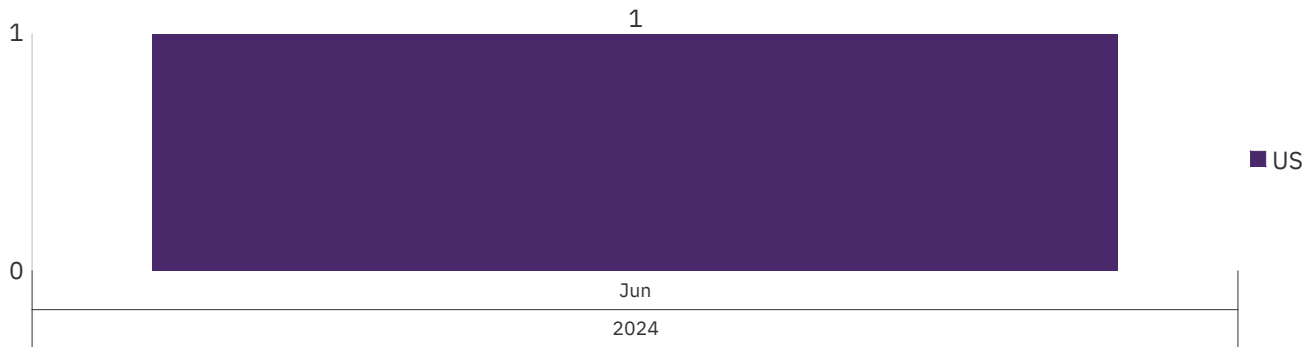
[Organization](#)

### Organization (April 2024 to June 2024)

Organizational Solutions	Q1	Q2	Q3	Q4	Current Total
Training	1	0	0	0	1
<b>Total</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>

[View Organizational Services Breakdown](#)

### Organization cases by month



\*Country assignment unavailable or service provided virtually across multiple countries.

### Emerging Issues (April 2024 to June 2024)

#### General Counseling

##### Top Issues



##### Top Modalities



Couple/Relationship	Q1	Q2	Q3	Q4	Current Total	Previous Year
Communication/Conflict Resolution	1	0	0	0	1	14.29%
Relationship - General	0	0	0	0	0	0.00%

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**Emerging Issues**

Utilization

Relationship Breakdown	0	0	0	0	0	0.00%	1	5.88%
<b>Total</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>14.29%</b>	<b>3</b>	<b>17.65%</b>

Personal/Emotional	Q1	Q2	Q3	Q4	Current Total		Previous Year	
Life Stages	2	0	0	0	2	28.57%	2	11.76%
Stress	2	0	0	0	2	28.57%	2	11.76%
Anxiety	1	0	0	0	1	14.29%	2	11.76%
Post Trauma	0	0	0	0	0	0.00%	2	11.76%
Grief	0	0	0	0	0	0.00%	1	5.88%
<b>Total</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>5</b>	<b>71.43%</b>	<b>9</b>	<b>52.94%</b>

Work Related	Q1	Q2	Q3	Q4	Current Total		Previous Year	
Workplace Stress	1	0	0	0	1	14.29%	5	29.41%
<b>Total</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>14.29%</b>	<b>5</b>	<b>29.41%</b>

	Q1	Q2	Q3	Q4	Current Total		Previous Year	
<b>General Counseling</b>	<b>7</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>7</b>	<b>100.00%</b>	<b>17</b>	<b>100.00%</b>

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Emerging Issues

Utilization

## Work/Life

### Top Issues



### Top Modalities



Financial	Q1	Q2	Q3	Q4	Current Total	Previous Year
Estate	0	0	0	0	0	1 50.00%
Divorce	0	0	0	0	0	1 50.00%
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2 100.00%</b>

Legal	Q1	Q2	Q3	Q4	Current Total	Previous Year
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[Utilization](#)

Contracts	1	0	0	0	1	100.00%	0	0.00%
<b>Total</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>100.00%</b>	<b>0</b>	<b>0.00%</b>

	Q1	Q2	Q3	Q4	Current Total	Previous Year	
<b>Work/Life</b>	1	0	0	0	1	100.00%	
						2	100.00%

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## Utilization (April 2024 to June 2024)

Weighted population for the report period was: 6,870

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Case Utilization	Q1	Q2	Q3	Q4	Current Quarter Utilization	Current Total	Utilization	Annualized Utilization
<i>Population</i>	6,870	0	0	0		6,870		
<i>General Counseling</i>	7	0	0	0	0.10%	7	0.10%	0.41%
<i>Work/Life</i>	1	0	0	0	0.01%	1	0.01%	0.06%
<b>Total</b>	<b>8</b>	<b>0</b>	<b>0</b>	<b>0</b>		<b>8</b>		

For any services that are counted at a ratio other than 1:1, the utilization above has been calculated based on the ratio. Population reflects the weighted average population of each quarter.

## Utilization by Region

Region	Population	Q1	Q2	Q3	Q4	Current Total	Utilization
North America	6,870	8	0	0	0	8	0.12%
<b>Overall</b>	<b>6,870</b>	<b>8</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>8</b>	

North America	Population	Current Total	Current Utilization	Previous Year Utilization
UNITED STATES OF AMERICA	6,870	8	0.12%	0.29%
<b>Overall</b>	<b>6,870</b>	<b>8</b>		

Overall Summary

Trends

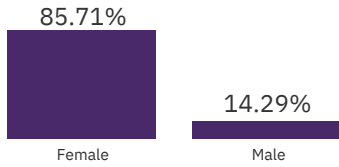
Demographic

Appendix

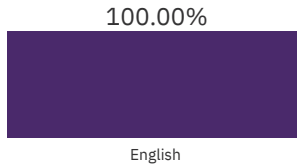
Glossary

Demographic (April 2024 to June 2024)

Gender



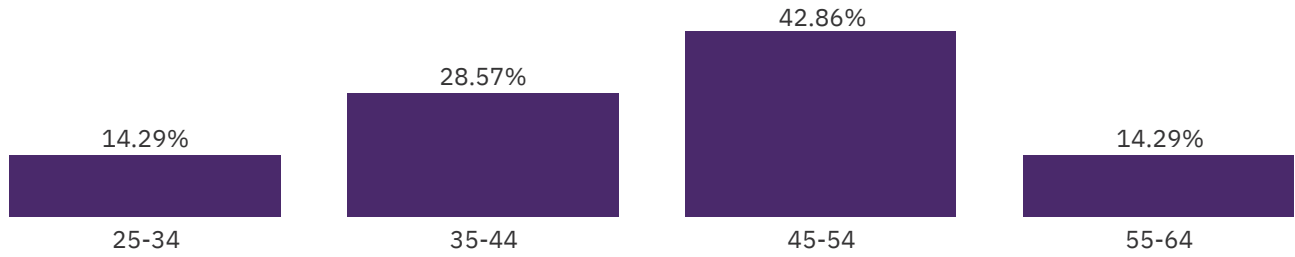
Language



Category



Age



Profile

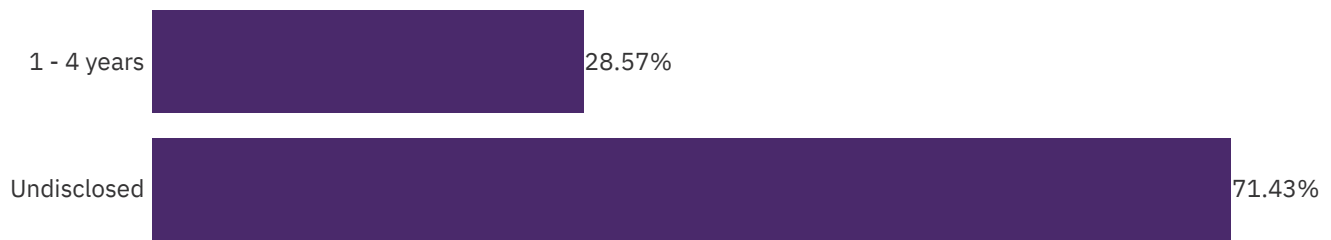
Employee/Member Status



### How did you hear about us?

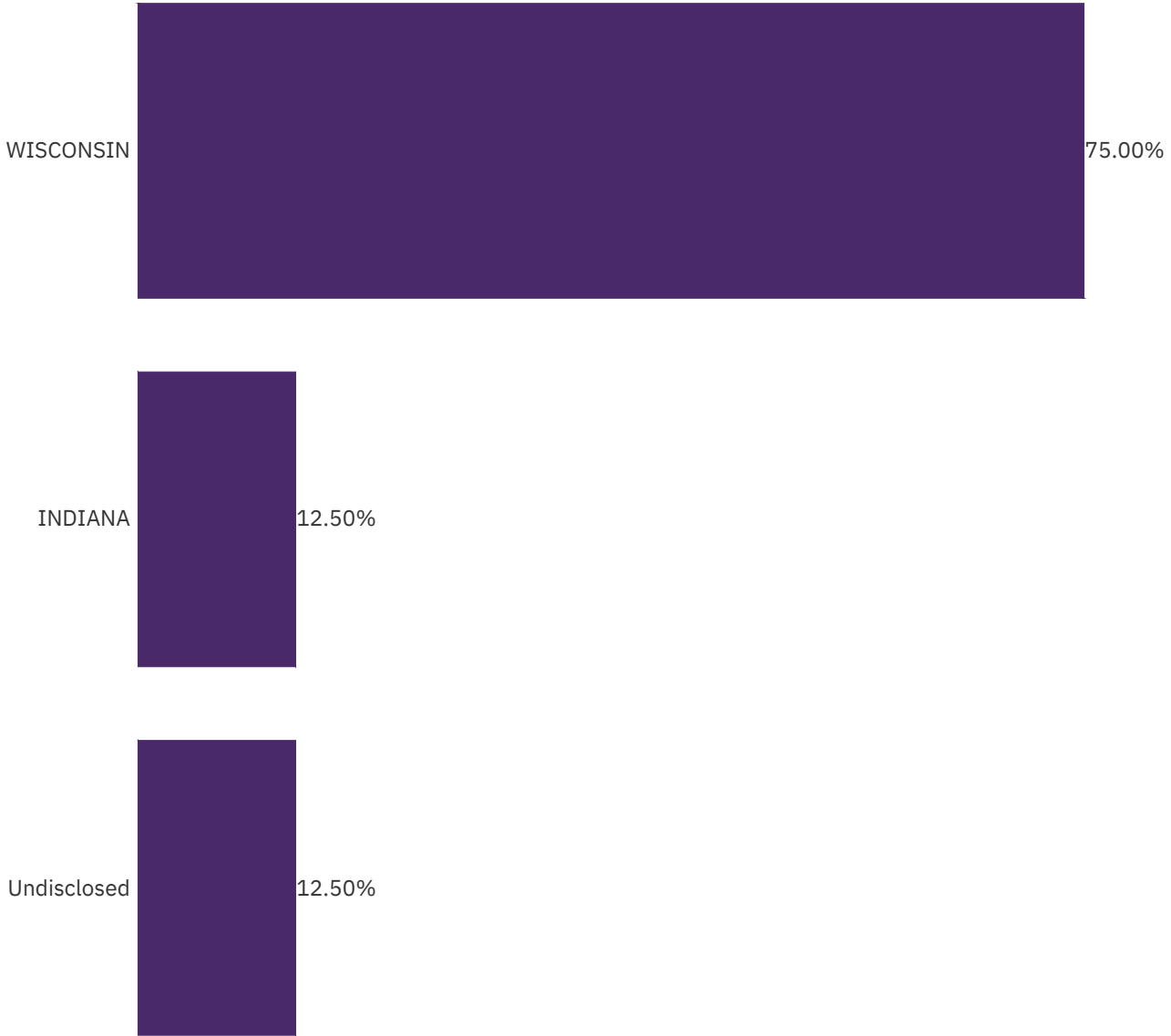


### Years of Service





### Cases by State/Province



### Province/State Legend

Province/State	Cases
INDIANA	1
Undisclosed	1
WISCONSIN	6

## Organization in Detail (April 2024 to June 2024)

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### Management Consultations

No Data Available

### Critical Incident Service

No Data Available

### Critical incident events

No Data Available

Training name	Training type	Date	City	Country
Working with Difficult customer behaviours	Stress Management	Jun 27, 2024	MADISON	US
Living Well with Stress	Stress Management	Sep 12, 2024	MADISON	US
Seasonal Stress	Stress Management	Nov 12, 2024	MADISON	US

## Glossary (April 2024 to June 2024)

Some features defined below may not be applicable to your program.

### Overall Summary

#### Summary

Participants & Participant Cases	Participants are eligible individuals who have accessed services within the reporting period. Participant cases includes: Counseling, Work/Life (i.e. legal, financial), Community Services. Except where explicitly stated as closed cases, the counts are based on cases opened during the reporting period.
Organization & Organization Cases	The number of organizational cases (including Critical incidents, trainings, workplace support programs, management consults) and other organization authorized services. Except where explicitly stated as closed cases, the counts are based on cases opened during the reporting period.
Population	Total lives that are covered within the reporting period. Population is averaged over time.
Utilization (%)	This is a measure to capture program usage by taking the total of cases as a proportion of the overall covered population. This reflects all cases contracted to count toward utilization. Calculated As: $SUM = (\text{number of cases} / \text{Population}) * 100$
Annualized Utilization (%)	This is the projected annualized utilization if the reporting period selected is less than 12 months. Calculated As: $SUM = (\% \text{ of case utilization} / \text{the number of months in the reporting period}) * 12$
EMEA	Europe, Middle East & Africa
NA	North America
APAC	Asia-Pacific
LATAM	Latin America
Country, Region, Global Benchmark	Overall benchmarking utilization percentages. Country benchmark is displayed if report is run for an individual country. Region benchmarks is displayed if report is run for countries only within the same region. Global benchmarks is displayed if report is run for more than one country in different regions. Calculated As: $SUM = (\text{total cases} / \text{total covered population}) * 100$
Industry Benchmarks (Country, Region & Global)	Industry Benchmarks (Country, Region & Global)

#### Participant

Total number of unique participants	The number of distinct participants who have accessed services during the reporting period.
New participants	This is the number of unique participants who accessed services in the defined reporting period and have not previously accessed services within the reporting period.
Reaccess Participants	This is the number of unique participants who have reaccessed services within the reporting period. In other words, total participants who have accessed the services more than once within the reporting period.
Cases by intake type	The method by which the participant contacted the program to access services.
Service inquiries by intake type	Service inquiries are brief calls that do not result in a case as no service was delivered. Intake type is the method by which a participant initiated a service inquiry.

#### Organization & Organization Cases

The number of organizational cases (including Critical incidents, trainings, workplace support programs, management consults) and other organization authorized services. Except where explicitly

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stated as closed cases, the counts are based on cases opened during the reporting period.

Workplace Support Programs

Workplace Support Programs

Critical Incident Services

In the aftermath of an incident, our experts will design an immediate, global response that takes care of your people and your organization.

Management Consultations

Service delivered to the organization's people leaders to support with participant issues and how to have difficult conversations. The service is delivered by the program's clinical staff.

Training

Total training sessions conducted. Sessions can be short seminars, longer workshops offered onsite, online and self-directed. Topics can include mental health, resiliency, retirement/finances, nutrition/fitness and more.

## Trends

Emerging Issues

Provides details on the counseling and work/life services opened during the reporting period. The presenting issues are self-identified by the participant at the time of intake.

Benchmarks

Provides comparative benchmarks between the organizational case distribution and the experience of other organizations within the same country, industry, or region. If the report is run for multiple countries, global benchmark comparison will also be available.

Modalities

The method by which the participant received their service.

## Demographic

Gender

This is a breakdown of participant self-identified gender during the intake process. This information is only collected from covered participants and not family member participants.

Language

This is a breakdown of participant self-identified preferred language for service delivery purposes.

Category

This is a breakdown of participant self-identified category during the intake process.

Age

This is a breakdown of participant self-identified age group during the intake process. This information is only collected from covered participants and not family member participants.

Employee/Member Status

This is a breakdown of employee/member self-identified status during the intake process. This information is only collected from covered participants and not family member participants.

Management Status

This is a breakdown of participant self-identified job category during the intake process.

How did you hear about us?

This is a breakdown of participant self-reported detail on how they heard about the program.

Are you calling us as a result of COVID-19?

This is a breakdown of participant self-reported to identify those who were calling as a result of the Covid-19 pandemic.

Years of Service

This is a breakdown of participant self-reported detail on how long the participant has been part of the organization. This information is only collected from covered participants and not family member participants.

Cases by Country

This is a map of the world to showcase the breakdown of case percentages by country.

## Appendix

### Report Information

Organization

The name of one or more organizations for the report run. Data on the report is aggregated for all selected organizations.

Report Run Date

The date that the report was generated.

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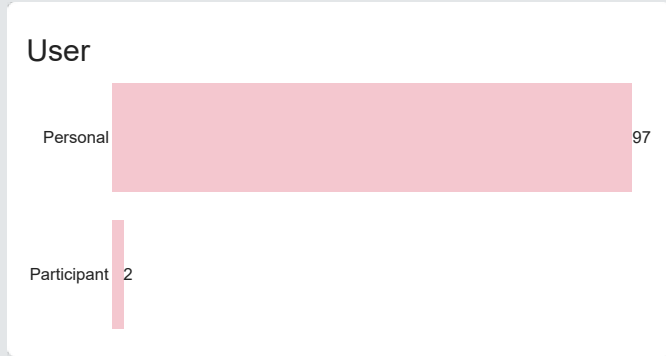
[Glossary](#)

Country	Name of one or more countries represented in the report. Data on the report is aggregated for all selected countries.
Region	Name of one or more regions represented in the report. Data on the report is aggregated for all selected regions.
Participant Category	Name of one of more participant category represented in the report. Data on the report is aggregated for all selected participant categories.
Optional Answers	List of one or more custom answer options represented in the report. Data on the report is aggregated for all selected answer options.
Consortium or Partner Name	Name of the Alliance Partner, Group, or Consortium name represented in the report.

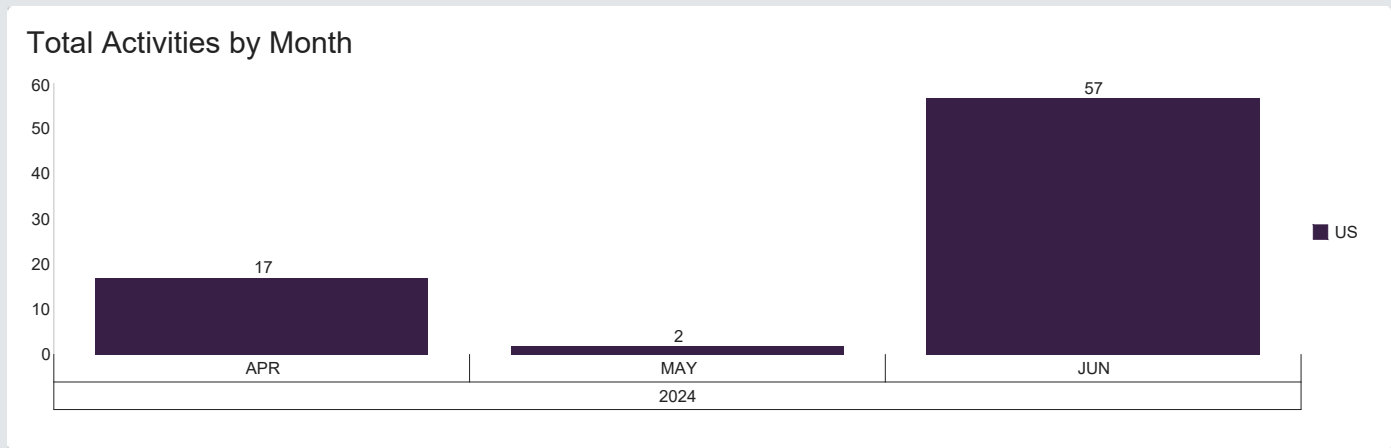
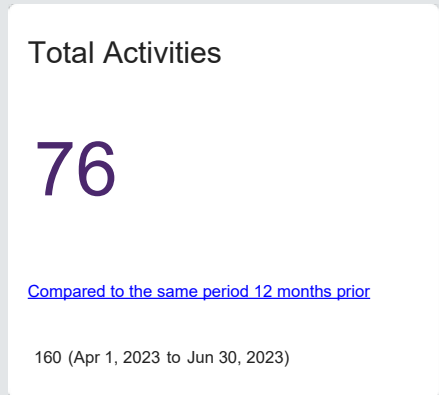
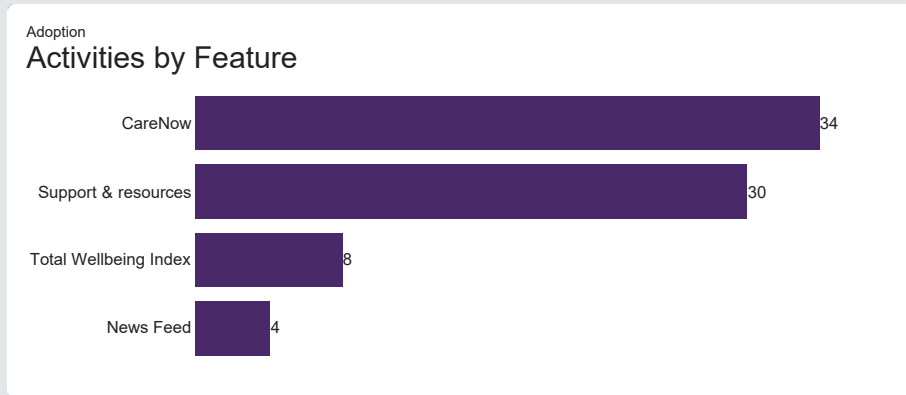
### Organizational Units Breakdown

Association, Companies, Branches & Divisions	Organizations for the program can be set up in hierarchical manner to support with breaking down utilization data at more granular levels. Services and cases are booked at the lowest level. The four possible levels in descending order are Association, Company, Branch and Division. Though cases are booked at the lowest level, they are also rolled up to the higher levels to provide aggregated organizational usage details.
Partner/Group	Partner is the name of the Alliance Partner for which the report was run. Group is the name of the group for which the report was run.

Overall Summary (Apr 1, 2024 to Jun 30, 2024)



Overall Engagement



### Total Activities by Country



#### Activities by Group

### Company & News Feed Posts

Number of  
company posts

**4**

CareNow

Total Wellbeing Index

Challenges

Tiering

CareNow (Apr 1, 2024 to Jun 30, 2024)

Adoption

Total users who started a program

**3**

Adoption

Average # of programs started per user

**1**

Task success

Total users who completed a module

**2**

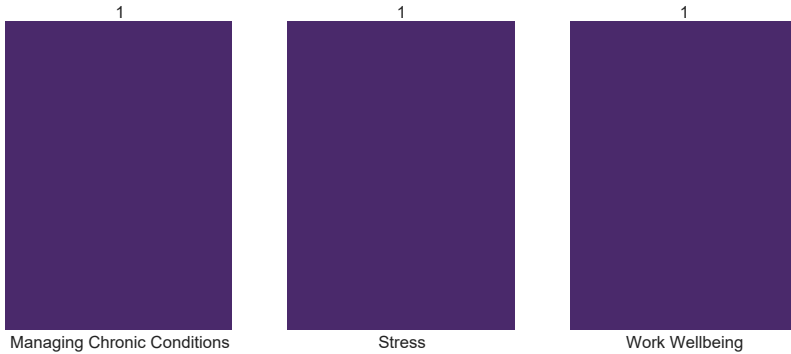
Task success

Average # of modules completed per user

**15**

Adoption

Total programs started





Total Wellbeing Index (Apr 1, 2024 to Jun 30, 2024)

TWI Score

**56**

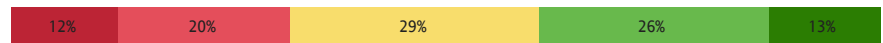
This is your Total Wellbeing Index score  
 The median benchmark score is: 63  
 The top performing score is: 76

Distribution of Risk

Current



Benchmark



■ At Risk ■ Problem ■ Strained ■ Active ■ Optimal

Mental

**42**

Median benchmark: 56  
 Top performing score: 72

Physical

**41**

Median benchmark: 59  
 Top performing score: 69

Social

**57**

Median benchmark: 68  
 Top performing score: 79

Financial

**60**

Median benchmark: 71  
 Top performing score: 85

Total Participation

**5 of 102**

**5%**  
 of Registered Users

Completions by Assessment



Number of Assessment Completed per Person

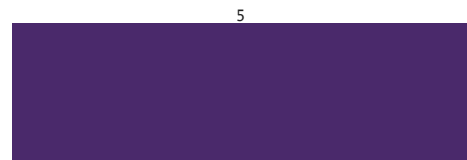


Age Bands



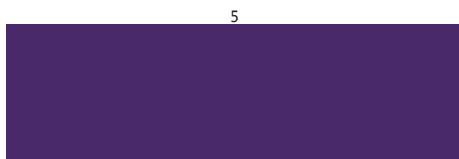
Undisclosed

Generation



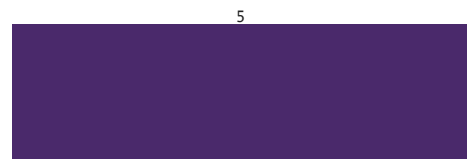
Undisclosed

Gender



Undisclosed

Tenure



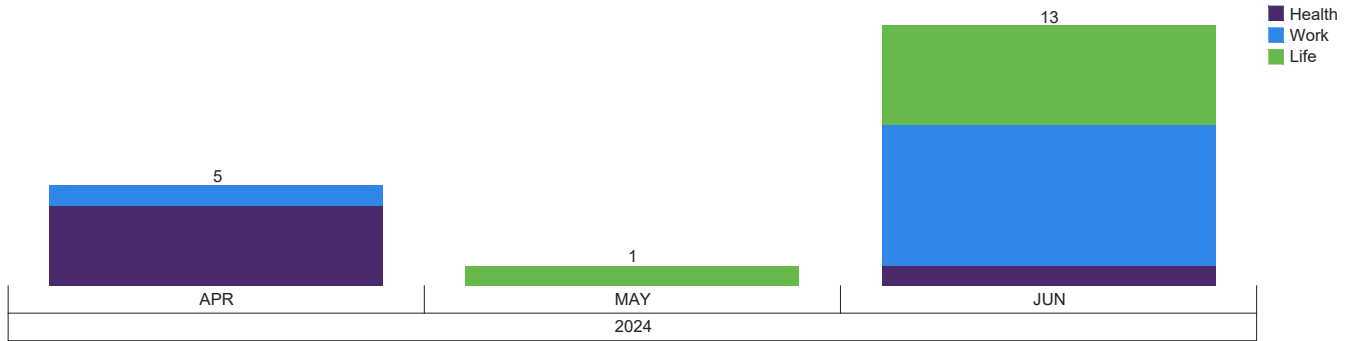
Undisclosed

[See All](#)

Support & Resources (Apr 1, 2024 to Jun 30, 2024)

Support & Resource Activities

\* Other resources are not included in this total



Top Categories

Total Activities 19

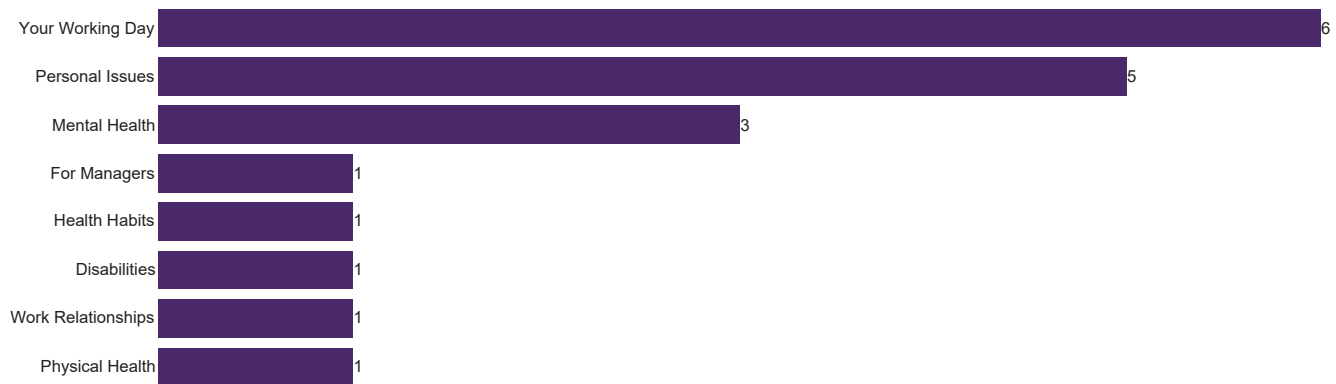
\* Other resources are not included in this total



Top Subcategories

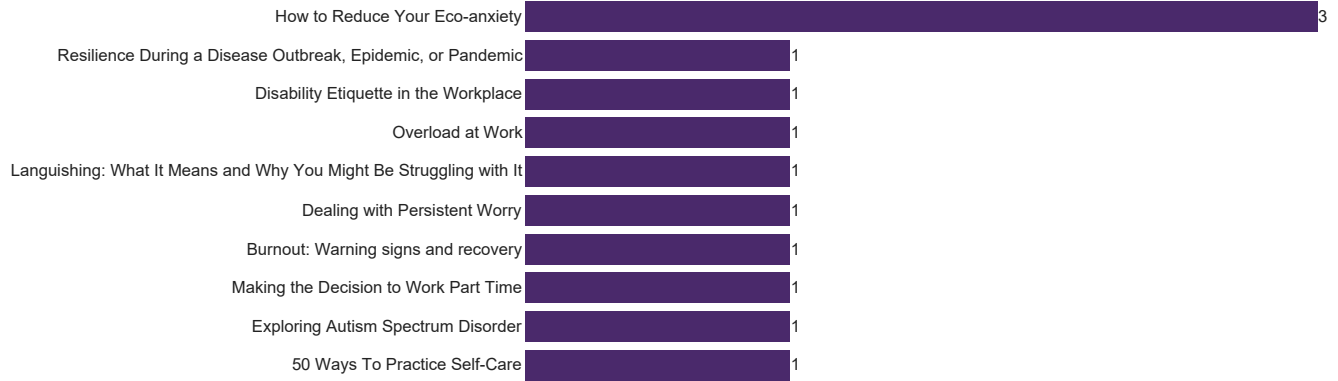
Total Activities 19

\* Other resources are not included in this total



### Top Articles

Total Activities 17 of 19



### Top Audios

Total Activities 2 of 19



### Top Videos

Total Activities 0 of 19

No Data Available

### Top Manager Resources

Total Activities **1**

\* Total reflects a subset of the top categories.

Making the Decision to Work Part Time

1

### Other Resources

#### Other resources accessed

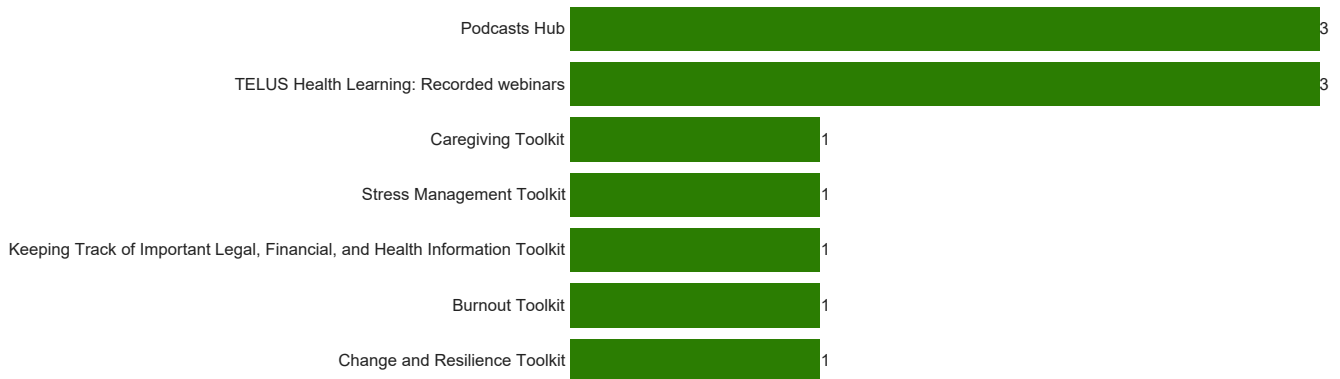
Total Activities **11**

Toolkits

11

### Top Toolkits

Total Activities **11 of 11**



## Glossary (Apr 1, 2024 to Jun 30, 2024)

Some features defined below may not be applicable to your program.

### Overall Summary

#### Adoption

Registration	A user creates an account and accepts the terms and conditions for using the TELUS Health platform.
User	All individuals who have created an account and accepted the terms and conditions for using the TELUS Health platform. This can include a participant, family, admin or personal account.
Participant	The user is invited to the platform by the Admin or signed up via CSV by our onboarding team. The user completes the sign up process and creates a profile on the platform.
Family	These accounts are friends or family members invited to the platform by a Participant via the "Family" feature in the Profile section. The user completes the sign up process and creates a profile on the platform.
Admin	The designated platform Administrators are granted access to certain features beyond those associated with a user. Administrators have access to the Admin Panel — the organization's dashboard and administrator tools – which will include an overview of recent activities and summary statistics.
Personal	A personal account is created when a participant who has logged into the platform under a shared/group login creates a personal profile to access certain features requiring registration.
Pending	These accounts are individuals who have been invited to join the platform but have yet to register, either from an eligibility list or through an invitation from an admin.

#### Overall Engagement

Activities	Measuring the general depth of use of the platform. The sum total of user activities on the platform. Activities include: -viewing content (e.g. articles) -liking company posts -creating newsfeed posts -posting a recognition -purchases made using Perks -views and participation in wellbeing activities including: -joining a challenge -tracking your habitude or steps -completing assessments -completing a module or program, or starting a program within CareNow
% of users with at least one activity	The percentage of users that have had an activity on the platform, out of all of the users who have completed the registration and profile creation process.

#### Compared to the same period 12 months prior

Where available the footnote number in the bottom left corner showcases the data from the same time period twelve months prior.	
Compared to the same period 12 months prior	Example 1: If report period is March 2020 then the data showcased in the bottom left corner is for March 2019. Example 2: If report period is November 2019 to January 2020 then the data showcased n the bottom left corner is for November 2018 to January 2019.

#### Company & News Feed Posts

Average likes per company posts	News Feed posts that are created by a platform Admin The average number of likes for all company posts.
Average comments per company posts	The average number of comments on all posts.

#### Recognitions

Recognitions	Posting a recognition (submitting text and selecting a badge) for one or more other users that is posted to your company's News Feed.
Total number of initial recognitions received	This represents the users receiving an initial recognition.
Total Initial Recognitions	This represents the process of creating a recognition (submitting a story and selection a badge) for one or more other users that will be posted to your company's News Feed.
Users Who Gave Recognitions	This represents the users giving an initial recognition.
Re-recognitions	Number of recognitions given by using the 'Re-recognize' button in the News Feed section of the platform.

### Wellbeing

#### CareNow

Modules Completed	Each CareNow program has multiple modules or chapters to complete. Each module focuses on a specific area. A
-------------------	--

module is completed when all content is viewed within the module.

Total programs started

Total number of times a CareNow program was started.

**Total Wellbeing Index**

The scores reported for each pillar are based on those that completed that pillar's assessment; however, all TWI related scores require completion of all four assessments.

The Total Wellbeing Index (TWI) is a scale aggregating behavioral assessment data from the four pillars of total health: Mental, Physical, Social and Finance.

Mental:

This pillar includes questions covering various areas of mental health, including anxiety, depression, coping skills, burnout, and general mental health.

Physical:

This pillar includes questions covering various areas of physical health, including physical activity, medical health, biometric awareness, lifestyle choices, sleep, and nutrition.

Social:

This pillar includes questions covering various areas of work-life, relationships, and work.

Financial

This pillar includes questions covering various areas of financial health, including debt, savings, and general financial behavior.

Score:

A number from 0 to 100, which represents the average of all employee responses in a particular area.

Risk distributions:

Individuals completing the full TWI assessment and each pillar assessment are categorized into different risk groups (below). The percentage of the population falling into each category is displayed in the risk distributions.

Optimal Health (score from 81-100)

Individuals in this category are doing well in balancing the demands of life and work. Their Total Wellbeing (Mental, Physical, Social and Finance) collectively is quite good. Based on the information reported, individuals in this group should focus on sustaining optimal health.

Active Health (score from 71-80)

Individuals who fall in this category are doing reasonably well overall. In general, their total well-being is not an issue; however, there are areas upon which focus can help improve the individual's overall quality of life.

Strained Health (score from 61-70)

Individuals who fall in this category are currently experiencing some level of strain in one or more of the four total wellbeing areas. The challenge is to help and support these individuals in the areas they are feeling strain so that they can be improved into Active or Optimal Health and avoid dipping into Problem or At Risk Health.

Problem Health (score from 51-60)

Individuals who fall into this category are typically experiencing some physical, psychological, or financial symptoms that are having a negative impact on their total wellbeing and productivity. Individuals in this group typically require support to make changes that improve their total wellbeing.

At Risk Health (score from 0-50)

Individuals in this category are at risk for significant health issues in many or all of the key pillars of wellbeing: Mental, Physical, Social and Finance. These individuals are often off work or on the verge of being off work. Access to support services is essential to get them back on the right track.

Benchmark:

A standard or point of reference against which scores can be compared. The value of benchmarking is to measure the organization's performance/results against the standard. The benchmark/standard is based on the 50th percentile (middle value of all organizations) of collective scores of all organizations that have completed the TWI.

Top Performing (Employers) score:

Refers to scores at or above 90 per cent of the total TWI completions; only 10 per cent of total scores are above this threshold.

Generation:

Generations are defined by birth year. Regardless of age, individuals always belong to the generation into which they were born. Generations tend to experience similar life issues. By reporting on generations, organizations are able to compare results against other generations at a different place in the life cycle.

Generation breakdown  
 Generation Z: born in 1996 or later  
 Millennials: born from 1980 to 1995  
 Generation X: born from 1965 to 1979  
 Baby boomers: born from 1946 to 1964  
 Traditionalists: born in 1945 or earlier

**Assessments**

Assessments

A thematic assessment available in the wellbeing section of the platform.

Outcome

The calculated level of risk or impact pertaining to that area of the user's health, as determined by the overall score of their responses to the assessment.

Full HRA

The HRA (health risk assessment) is the completion of all the health and biometric assessments.

Precontemplation

User is not ready to engage in change and does not intend to take action in the next six months.

Contemplation

User is ready to consider change and does not intend to take action in the next six months.

Preparation

User is preparing to change and ready to take action within the next 30 days.

Action	User has started to engage in change.
Maintenance	User is continuing to engage in change after six months.
<b>Challenges</b>	
Challenges	A personal or organization program that promotes activities related to improved health. This may include step and habitude challenges.
Personal	Challenges available to users to earn platform points as they progress towards long term healthy lifestyle choices. These challenges do not have a public leaderboard.
Corporate	Challenges created on behalf of your organization to promote engagement and health.
Habit	A specific behavior that a user is looking to improve.
Step	A measurement of the action of taking a step.
Started or joined	The number of users who accepted or joined a personal or organization challenge.
Goal attained	This represents the number of users who have completed a challenge and met the target goal of the challenge.

**Wellness Tiers**

Points	Users earn points by completing various activities on the platform or by taking actions outside of the platform (that are tracked within the TELUS Health platform) to positively influence their overall wellbeing.
Tiers	There are 4 tiers that can be achieved by earning platform points. Within each tier, users can access specially-curated wellness rewards. These tiers are: Bronze (5), Silver (2,500), Gold (5,000), and Platinum (10,000)

**Promoted Activities**

Promoted Activity	An activity selected to promote to your user population. These include: Biometric Screening, Medical Event or Check-up, Preventive Screening, Training or Benefit Event, Competition or Athletic Event, Volunteering, Fitness or Sports, Gym or Workout, LIFT Challenge.
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## Support & Resources

Support & Resource Activities	The platform's Support & Resources section includes 1,800+ articles, podcasts, and toolkits. This report section shows the content viewed and which categories, subcategories, and specific content items are most popular. Viewing content counts as an activity.
Top Categories	There are five categories within Support & Resources: Family, Health, Life, Money, Work.
Top Subcategories	The subset of categories from within the five categories from Support & Resources feature.
Total Activities	Total content views for each modality. The charts display up to ten most popular resources.

## Perks

**Summary**

Total Perks transactions	Number of individual transactions completed on the Perks section of the platform.
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**Gift Cards**

Gift cards transactions	Purchase of a single gift card through the Perks section of the platform.
Total gift card value	The redeemable value of the gift cards purchased.
Total gift card spend	The purchase price of the gift card paid by the user.
Gift card savings	The total savings divided by the total value of the gift cards purchased.

**Cashback**

Cashback Transactions	A single purchase (regardless of the # of products involved) from a partnered vendor's site.
Total cashback spend	The pre-tax purchase value of the transaction made with the vendor.
Total cashback	The total currency returned to the user who made the purchase, which is credited to the user's platform wallet. Upon confirmation from the vendor, the amount is eligible to be withdrawn by the user.
Average savings %	The portion of the total spending that is credited to the user's platform wallet.
Merchants	A 3rd party company that has an agreement with TELUS Health to provide cashback to TELUS Health' users

**Cinemas**

Cinema Transactions	Purchase of cinema tickets at a discount through the Perks section of the platform.
Cinema Value	The redeemable value of the cinema tickets purchased.
Cinema Spend	The purchase price of the cinema tickets paid by the user.
Cinema Saving	The difference between the value and the purchase price of the cinema tickets

## Appendix

**Report Information**

Organization	Name of one or more organizations for the report run. Data on the report is aggregated for all selected organizations.
Country	Name of one or more countries represented in the report. Data on the report is aggregated for all selected countries.
Group	Name of one or more groups selected for the report run. Data on the report is aggregated for all selected groups.
Report Run Date	Name of one or more groups selected for the report run. Data on the report is aggregated for all selected groups.



**Veterinary Examining Board  
Agenda Request Form**

<b>Meeting Date</b>	7/17/2024
<b>Requestor Name</b>	Melissa Mace
<b>Item Title for the Agenda</b>	Emergency Care - Complaint
<b>Should this be in Open or Closed Session?</b>	Open
<b>Is this an Action Item or for Information Only?</b>	Information
<b>Are there Attachments?</b> (If yes, include file names)	No
<b>Is a Public Appearance Anticipated?</b>	Unknown
<b>Description of the Agenda Item</b>  <p><b>From:</b> Jenni Stoltenberg &lt;<a href="mailto:jstoltenberg1@gmail.com">jstoltenberg1@gmail.com</a>&gt; <b>Sent:</b> Monday, June 3, 2024 9:24 PM <b>To:</b> Carter, Erin E - DATCP &lt;<a href="mailto:Erin.Carter@wisconsin.gov">Erin.Carter@wisconsin.gov</a>&gt; <b>Subject:</b> Re: FW: Wisconsin Veterinary Complaint</p> <p>This complaint is not against a specific individual. This complaint is against the emergency veterinary shortfall and the horrible situations this has created and will continue to create for pets and pet owners, if something isn't done about this. There should be absolutely no reason to have 1 emergency vet office available in over a 3 1/2 hour radius. Animals/pets are suffering and/or dying because of the lack of treatment available. Doctors and dentists are required to provide emergency services, why isn't this mandatory for vets as well? This is inhumane and not acceptable. If you are not able to process this complaint because it is not directed to 1 specific person, then please tell me who handles this type of complaint so it can be taken care of.</p> <p>Thank you kindly, Jenni Stoltenberg</p>	

## Veterinary Examining Board Agenda Request Form

<b>Meeting Date</b>	7/17/2024
<b>Requestor Name</b>	Hunter Lang, DVM
<b>Item Title for the Agenda</b>	AVMA HOD Report
<b>Should this be in Open or Closed Session?</b>	Open
<b>Is this an Action Item or for Information Only?</b>	Informational
<b>Are there Attachments?</b> (If yes, include file names)	No
<b>Is a Public Appearance Anticipated?</b>	No
<b>Description of the Agenda Item</b>	
<p>The AVMA House of Delegates met in Austin on June 20-21st. Summary of the highlights:</p> <p>A resolution approving the Principles of Veterinary Medical Ethics was the biggest item and garnered the most discussion before being passed. Another resolution that passed was about the transport of animals and it is written such that the species specific guidelines will be developed/referenced later. The last resolution was added very late but it updated the previous AVMA support statement for uniformed veterinarians (plus their families) that serve domestically and abroad.</p> <p>Veterinary Information Forums:</p> <p>Liability: What keeps you up at night? Who is responsible in corporate practices particularly around protocols vs standards of care?</p> <p>Technology – AI Integration – Recording and transcribing software, Dx apps, Radiology interpretation, and others. AVMA is going to assemble a group of experts from veterinary medicine, human medicine, ethics, legal and industry to come up with some guidelines for members</p> <p>Model Veterinary Practice Act (MVPA) – several years in the process and will start the review process in another 18 months for the next one. Much discussion on states that have enacted virtual VCPR’s, technician utilization, license portability, residency requirement to serve on VEB, standards of care and VEB’s. VEB’s took a bit of a hit in the member comments. An example:          “It is no secret that VCA and other corporations are stacking the VMBs so they can influence policy in ways that will make their shareholders more money, with no regard for the health of pets, the fairness to consumers, and the long term health of our profession.”</p> <p>Xylazine bill is still working its way through the legislature in DC. The DEA urged Congress to pass the bill in its annual report, it is rare occurrence when the DEA recommends a bill be passed in a report.</p>	

**Veterinary Examining Board  
Agenda Request Form**

<b>Meeting Date</b>	7/17/2024
<b>Requestor Name</b>	Hunter Lang, DVM
<b>Item Title for the Agenda</b>	AABP Technician Guidelines vs WI VE 1.44
<b>Should this be in Open or Closed Session?</b>	Open
<b>Is this an Action Item or for Information Only?</b>	Information
<b>Are there Attachments?</b> (If yes, include file names)	No
<b>Is a Public Appearance Anticipated?</b>	No
<b>Description of the Agenda Item</b> I took on the task of comparing the AABP CVT Guidelines for use in Food Animal Practice with Wisconsin delegation guidelines.  I will circulate a draft of a comparison for review by the end of July. The thought is to provide something we can include in a newsletter to our credential holders. Feedback from our staff will be greatly appreciated so that I do not put anything in print that would be construed as endorsing a task for a CVT that is not legal.	

**Veterinary Examining Board  
Agenda Request Form**

<b>Meeting Date</b>	7/17/24
<b>Requestor Name</b>	Angela Fisher
<b>Item Title for the Agenda</b>	VCPR Recently Timely
<b>Should this be in Open or Closed Session?</b>	Open
<b>Is this an Action Item or for Information Only?</b>	Action Item
<b>Are there Attachments?</b> (If yes, include file names)	VEB-GD-007 VCPR Recently Timely
<b>Is a Public Appearance Anticipated?</b>	No
<b>Description of the Agenda Item</b>  Action Item: Approve or modify the attached draft guidance document.  Attached is a draft guidance document with changes from the April VEB meeting.	



State of Wisconsin

## Veterinary Examining Board

2811 Agriculture Drive • PO Box 8911 • Madison, WI 53708-8911 • Wisconsin.gov

### Guidance Document VEB-GD-007 VCPR Recently Examineds and Timely Visits

Wis. Stat. § 89.02 (8)  
4/25/20/24 DRAFT

#### Topic

This guidance document clarifies the meaning of “recently examineds” and “timely visits” for the purposes of the veterinarian-client-patient relationship (VCPR).

**Commented [OARD1]:** I assume we want this since this is the phrase in the statute.

#### Relevant Statutes and Administrative Code

Wis. Stat. § 89.02 (8) defines “veterinarian-client-patient relationship” as a relationship between a veterinarian, a client and the patient in which all of the following apply:

- (a) The veterinarian has assumed the responsibility for making medical judgments regarding the health of the patient and the patient’s need for medical treatment, and the client has agreed to accept those medical judgments and to follow the related instructions of the veterinarian.
- (b) The veterinarian has sufficient knowledge of the patient to initiate a general or preliminary diagnosis of the medical condition of the patient because the veterinarian has recently examined the patient or has made medically appropriate and timely visits to the premises on which the patient is kept.
- (c) The veterinarian is readily available for follow-up treatment of the patient if the patient has an adverse reaction to veterinary treatment.

#### Board Position

For the purposes of § 89.02 (8) (b), the VEB generally considers “recently examined” and “timely visits” to mean within the last 12 months, ~~or~~ The timeframe is based on each veterinarian’s professional judgement and should be less than 12 months when circumstances warrant. The VEB may deviate from these guidelines based on the review of specific case information.

**Veterinary Examining Board  
Agenda Request Form**

<b>Meeting Date</b>	7/17/24
<b>Requestor Name</b>	Angela Fisher
<b>Item Title for the Agenda</b>	VE 1 Evaluation
<b>Should this be in Open or Closed Session?</b>	Open
<b>Is this an Action Item or for Information Only?</b>	Action Item
<b>Are there Attachments?</b> (If yes, include file names)	VE 1 Vet Licensing Process Evaluation VE 1 Statement of Scope
<b>Is a Public Appearance Anticipated?</b>	No
<b>Description of the Agenda Item</b>  Action Item: Discuss and propose changes to VE 1 within the statement of scope.  Attached is a summary of an initial VE 1 Vet Licensing Process Evaluation drafted by DATCP staff, including questions for VEB members' discussion and input. The approved statement of scope is also attached for reference. The Board may also discuss whether to convene the Admin Rules Committee to discuss further.	

## Subchapter III – Licensure

**VE 1.12 License exemptions.** No veterinary license or permit is required for the following veterinarians:

- (1) Employees of the federal government while engaged in their official duties.
- (2) Employees of an educational or research institution while engaged in teaching or research, except if employed by a school of veterinary medicine in this state and the employee practices veterinary medicine on privately owned animals.
- (3) Graduates of schools outside the United States and Canada who are enrolled in the educational commission for foreign veterinary graduates certification program of the AVMA or the program for the assessment of veterinary education equivalence offered by the AAVSB while completing the required year of clinical assessment under the supervision of a veterinarian.

**History:** [CR 21-062](#); cr. [Register July 2022 No. 799](#), eff. 8-1-22.

**VE 1.14 Qualifications for licensure; examination or endorsement.** The board may issue a license to practice veterinary medicine to an applicant who satisfies all of the following:

- (1) Submits an application form provided by the board which includes the applicant's notarized signature.

**Note:** Applications are available upon request to the board office located at 2811 Agriculture Drive, P.O. Box 8911, Madison, WI 53708-8911 or at the website at [www.datcp.wi.gov](http://www.datcp.wi.gov).

- (2) Successfully completes an examination on state laws and rules related to the practice of veterinary medicine.

**Note:** The examination on state laws and rules is separate from the NAVLE and the national board examination and clinical competency test.

- (3) Provides proof of graduation through one of the following means:

- (a) A certificate of graduation from a veterinary college which shall be signed and sealed by the dean of the school and submitted directly to the board by the school. The certificate may be provided by electronic means if the seal is visible.

- (b) Certification of graduation provided by the AAVSB.

- (4) Does not have a conviction record or pending criminal charge relating to an offense the circumstances of which substantially relate to the practice of veterinary medicine. An applicant who has a conviction record or pending criminal charge shall request appropriate authorities to provide information about the record or charge directly to the board in sufficient specificity to enable the board to make a determination whether the record or charge substantially relates to the practice of veterinary medicine.

- (5) Provides all documents in English.

- (6) Satisfies the requirements for either licensure by examination or licensure by endorsement. Applicants who have never previously been licensed in any jurisdiction must apply by examination. Applicants who have previously been licensed in Wisconsin or any other jurisdiction must apply by endorsement.

**History:** [CR 21-062](#); cr. [Register July 2022 No. 799](#), eff. 8-1-22.

**VE 1.16 Qualifications for licensure by examination.** Applicants for licensure by examination shall satisfy all of the following:

- (1) Passed the NAVLE within the last five years.

- (2) For applicants who graduated from a veterinary college which is not board approved, provide proof of graduation required under s. [VE 1.14 \(3\)](#), and evidence of successful completion of either the educational commission for foreign veterinary graduates certification program or the program for the assessment of veterinary education equivalence offered by the AAVSB which shall be submitted directly to the board by the AVMA or the AAVSB.

- (3) Pay the nonrefundable application fee of \$115.

History: [CR 21-062](#); cr. [Register July 2022 No. 799](#), eff. 8-1-22; correction in (2) made under s. [35.17](#), Stats., [Register July 2022 No. 799](#).

**VE 1.18 Qualifications for licensure by endorsement.** Applicants for licensure by endorsement shall satisfy all of the following:

- (1) The applicant has not previously failed the NAVLE, unless the applicant has subsequently retaken and passed the NAVLE.
- (2) The applicant holds a current license to practice veterinary medicine in another state or U.S. territory or province of Canada.
- (3) The applicant has satisfied the qualifications for licensure, in s. [VE 1.16](#), within the last 5 years or has actively practiced for 4000 hours during the 5 years preceding application.
- (4) For an applicant holding a current unrestricted license to practice veterinary medicine in a country other than the United States or Canada, who is not a graduate of an approved veterinary college, in addition to the requirements of sub. (3), submit evidence that the applicant has successfully completed either the certification program of the educational commission for foreign veterinary graduates of the AVMA or the program for the assessment of veterinary education equivalence offered by the AAVSB.
- (5) For an applicant holding a current unrestricted license to practice veterinary medicine in a country other than the United States or Canada, who is a graduate of a school of veterinary medicine approved by the board, in addition to the requirements of sub. (3), submit the following:
  - (a) Evidence satisfactory to the board that the requirements for initial licensure in the country where the applicant was originally licensed, including examination requirements, are substantially equivalent to the requirements for graduates of schools of veterinary medicine approved by the board who are seeking initial licensure in this state; or
  - (b) Before November 1, 2000, evidence that the applicant has successfully completed the national board examination and the clinical competency test. On or after November 1, 2000, evidence that the applicant has successfully completed the NAVLE.
- (6) Provides verification of licensure records and status which has been provided directly to the board by every state or country in which the applicant has ever held a license or certificate to practice veterinary medicine or by the AAVSB.
- (7) Pays the nonrefundable application fee of \$185.

History: [CR 21-062](#); cr. [Register July 2022 No. 799](#), eff. 8-1-22.

**VE 1.20 Licensure review by board.** The board may determine that an applicant is not eligible for licensure if any of the following apply:

- (1) The applicant has a conviction record or pending criminal charge relating to an offense the circumstances of which substantially relate to the practice of veterinary medicine.
- (2) The applicant has been disciplined by the veterinary licensing authority in any other state, territory or country.
- (3) The applicant is a party in pending litigation in which it is alleged that the applicant is liable for acts committed in the course of practice which evidence a lack of ability or fitness to practice, as determined by the board.
- (4) The applicant is currently under investigation by another veterinary licensing authority, for acts, related to the license to practice veterinary medicine, which may provide a basis for disciplinary action in this state, as determined by the board.
- (5) The applicant has been found liable for damages for acts committed in the course of practice of veterinary medicine which evidenced a lack of ability or fitness to practice, as determined by the board.
- (6) The applicant has had United States drug enforcement administration privileges restricted or revoked.



- (7) The applicant has had physical or mental impairment, including impairment related to drugs or alcohol, which is reasonably related to the applicant's ability to adequately undertake the practice of veterinary medicine in a manner consistent with the safety of a patient or the public.

History: [CR 21-062](#); cr. [Register July 2022 No. 799](#), eff. 8-1-22.

#### **VE 1.22 Reciprocal credentials for service members, former services members, their spouses.**

- (1) The board shall grant a license or permit to an individual who the board determines meets all of the requirements under s. [89.073](#), Stats.
- (2) A person applying for a reciprocal credential under s. [89.073](#), Stats., shall pay one of the following nonrefundable fees as applicable:
- (a) \$40 for a service member or former service member.
- (b) \$141 for a spouse as defined by s. [89.073 \(1\) \(c\)](#), Stats.

History: [CR 21-062](#); cr. [Register July 2022 No. 799](#), eff. 8-1-22; correction in (1), (2) (intro.), (b) made under s. [35.17](#), Stats., [Register July 2022 No. 799](#).

#### **VE 1.24 Issuing a license.**

- (1) The board shall review its records to determine eligibility of the applicant for licensure. Within 30 business days of determining an applicant is eligible for licensure, the board shall issue a license to the applicant.
- (2) The board shall inquire as to whether the applicant is competent to practice as a veterinarian in this state and shall impose any reasonable conditions in issuing the license, including reexamination, as the board deems appropriate, if any of the following apply:
- (a) The applicant has not previously been licensed in any jurisdiction and passed the NAVLE more than 5 years ago.
- (b) The applicant was previously licensed in Wisconsin or another jurisdiction and has not been licensed in any jurisdiction for more than 5 years.
- (c) The board has reviewed the application under any provision in s. [VE 1.20](#).

History: [CR 21-062](#); cr. [Register July 2022 No. 799](#), eff. 8-1-22.

#### **VE 1.26 Administrative fees.**

- (1) A person requesting a printed license shall pay a nonrefundable fee of \$10.
- (2) A person requesting verification of licensure to another state or organization shall pay a nonrefundable fee of \$10.

History: [CR 21-062](#); cr. [Register July 2022 No. 799](#), eff. 8-1-22.

#### **VE 1.28 Renewal of license.** A license expires if not renewed by January 1 of even-numbered years. A licensee who allows the license to expire may apply to the board for renewal of the license as follows:

- (1) If the licensee applies for renewal of the license less than 5 years after its expiration, the license shall be renewed upon payment of the renewal fee, payment of the late fee if applicable, and fulfillment of 30 hours of continuing education required under s. [VE 1.30](#) completed before the license renewal.
- (2) If the licensee applies for renewal of the license 5 or more years after its expiration, in addition to requiring the licensee to pay the renewal fee and late fee, and to fulfill the continuing education hours required under s. [VE 1.30](#) completed before the license renewal, the board shall inquire as to whether the applicant is competent to practice as a veterinarian in this state and shall impose any reasonable conditions on reinstatement of the license, including reexamination, as the board deems appropriate. An applicant under this subsection is presumed to be competent to practice as a veterinarian in this state if at the time of application for renewal the applicant holds a full unexpired license issued by a similar licensing board of

another state or territory of the United States or of a foreign country or province whose standards, in the opinion of the board, are equivalent to or higher than the requirements for licensure in this state.

Notwithstanding any presumption of competency under this subsection, the board shall require each applicant under this subsection to pass the examination specified under s. [VE 1.14 \(2\)](#).

- (3)** The licensee shall pay a nonrefundable renewal fee of \$160.
- (4)** A licensee who submits a license renewal after January 1 of even numbered years shall pay, in addition to the renewal fee under sub. [\(3\)](#), a nonrefundable late fee of \$25.

## VEB Vet Licensing Process Evaluation

Last Updated: 7/1/24

### Applicant with No Prior Veterinary License in Any Jurisdiction

- Currently license by examination
  - o s. 89.06, Wis. Stat.
  - o s. VE 1.14 and VE 1.16, Wis. Admin. Code

### Applicant Previously Licensed in Wisconsin

- Currently license renewal
  - o s. 89.062, Wis. Stat.
  - o s. VE 1.28, Wis. Admin. Code
    - Active Wisconsin license holders: s. VE 1.28 (intro.)
    - Applicants whose Wisconsin license lapsed less than 5 years ago: s. VE 1.28 (1)
    - Applicants whose Wisconsin license lapsed 5 or more years ago: s. VE 1.28 (2)

#### - Questions and Proposals:

- o Propose amending s. VE 1.14 (6) to account for renewals. The current s. VE 1.14 (6) requires applicants who have previously been licensed in Wisconsin to apply by Endorsement, but s. VE 1.28 allows these applicants to apply for renewal.
- o Does VEB want to make s. VE 1.28 only apply to applicants who have not been licensed in another state since the lapse in Wisconsin license? The renewal requirements under s. VE 1.28 do not consider discipline in other states.

### Applicant from another Jurisdiction

- Currently license by endorsement
  - o s. 89.072, Wis. Stat.
  - o s. VE 1.14 and VE 1.18, Wis. Admin. Code
  - o Applicants that have been licensed in another jurisdiction must apply by endorsement, under s. 89.072, if they are not currently under investigation and have never been disciplined by the licensing authority in the other state, territory or country, have not been found guilty of a crime the circumstances of which are substantially related to the practice of veterinary medicine, is not currently a party in pending litigation in which it is alleged that the applicant is liable for damages for acts committed in the course of practice and has never been found liable for damages for acts committed in the course of practice which evidenced a lack of ability or fitness to practice. If the applicant has prior discipline from another jurisdiction, the applicant must apply by endorsement under VE 1.14(6), , with the addition that VEB asks the applicant to get a new license in another jurisdiction and have no discipline in that new jurisdiction, and then apply to Wisconsin. This is based on legal advice that Wis. Stat. s. 89.072 says that the applicant has never been disciplined in “the” other jurisdiction and not “any” other jurisdiction.
  - o If the applicant has been found guilty of a crime, is currently a party in pending litigation, or has been found liable for damages, then the application goes to the Credentialing Committee for review to determine if the circumstances are

**Commented [OARD1]:** Do we ask them to get licensed in another jurisdiction and then apply? My recollection was if someone is licensed in multiple jurisdictions but has no discipline in one, then we can consider them applying from that jurisdiction.

**Commented [MMA2R1]:** This isn't posted anywhere, but there has been an individual or two where they have had discipline in the State they are currently licensed in and I have indicated the only way we could license them is if they were to license in another State, receive no discipline, and then apply to WI.

substantially related to the practice of veterinary medicine or evidence a lack of ability or fitness to practice.

- Applicants who are not currently licensed in another jurisdiction with no prior discipline cannot apply through s. 89.072, Wis. Stat. However if they have ever previously been licensed in another jurisdiction they cannot apply by examination.
- Current rule requires the applicant to currently have a license in another jurisdiction, and does not have a process for those previously licensed in another jurisdiction but currently not holding an active license.
- If an applicant has not passed the NAVLE in the past 5 years, and has not practiced 4,000 hours in the past 5 years, the applicant needs to retake the NAVLE.

- Questions and Proposals:

- Would statute allow (and VEB be interested in) the creation of an additional licensing process for applicants who were previously licensed in another state or have complications in their application?
  - Examples:
    - An applicant who has prior discipline,
    - An applicant who was previously licensed in another jurisdiction but is not currently licensed in any jurisdiction,
    - An applicant who passed the NAVLE more than 6 years ago and has not practiced 4,000 hours in the past 5 years
- If additional processes are created, propose amending s. VE 1.14 (6) to account for all licensing processes.

**Commented [OARD3]:** I think this would require a statutory change. Will look into it more before the meeting.

89.072 is very strict about having no discipline, convictions, or civil liability. And I don't think it can be read to include people not currently licensed anywhere.

**Applicant who is a Service Member, Former Service Member, or their Spouse**

- Currently Reciprocal Credentials
  - s. VE 1.22, Wis. Admin. Code
  - s. 89.073, Wis. Stat.

**General Discussion Items:**

- Propose amending s. VE 1.14 (6) to include all licensing processes: "Satisfies the requirements for either licensure by examination or licensure by endorsement under one of the following categories: examination, endorsement, or review. Applicants who have never previously been licensed in any jurisdiction must apply by examination. Applicants who have previously been are currently licensed in Wisconsin or any other jurisdiction other than Wisconsin, and who are not currently licensed in Wisconsin, must apply by endorsement. Applicants who have any of the items listed in s. VE 1.20 may apply for review by the board."
  - There are also processes for renewals (s. VE 1.28) and for reciprocal credentials (s. 89.073, Stat.), but those do not seem to be relevant to reference under s. VE 1.14 (6), since s. VE 1.14 is specific to applications by examination and endorsement.
- Propose amending s. VE 1.18 (2) to be consistent with other sections (such as s. VE 1.18 (4) and (5)): "The applicant holds a current license to practice veterinary medicine in

another state or U.S. territory or province of a jurisdiction within the United States or Canada.”

- Propose amending s. VE 1.18 (6) to change “state or country” to “jurisdiction.”
  - o Potential language change: “Provides verification of licensure records and status which has been provided directly to the board of every ~~state or country~~ jurisdiction in which the applicant has ever held a license or certificate to practice.”

# STATEMENT OF SCOPE

## Veterinary Examining Board

**Rule No.:** Ch. VE 1, Wis. Admin. Code (Existing)

**Relating to:** Veterinarians

**Rule Type:** Permanent

### 1. Finding/nature of emergency (Emergency Rule only):

Not applicable.

### 2. Detailed description of the objective of the proposed rule:

The objective of the proposed rule is to evaluate veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types.

### 3. Description of the existing policies relevant to the rule, new policies proposed to be included in the rule, and an analysis of policy alternatives:

#### *Existing Policies Relevant to the Rule:*

Under s. 89.06 (1), Stats., except as provided under ss. 89.072 and 89.073, veterinary licenses shall be issued only to persons who successfully pass an examination conducted by the examining board and pay the fee established under s. 89.063. An applicant for an initial license shall be a graduate of a veterinary college that has been approved by the examining board or have successfully completed either the educational commission for foreign veterinary graduates certification program of the American Veterinary Medical Association or the program for the assessment of veterinary education equivalence offered by the American Association of Veterinary State Boards.

Under s. 89.072 (1), Stats., upon application and payment of the fee established under s. 89.063, the examining board may issue a license to practice veterinary medicine to any person licensed to practice veterinary medicine in another state or territory of the United States or in another country if the applicant is not currently under investigation and has never been disciplined by the licensing authority in the other state, territory or country, has not been found guilty of a crime the circumstances of which are substantially related to the practice of veterinary medicine, is not currently a party in pending litigation in which it is alleged that the applicant is liable for damages for acts committed in the course of practice and has never been found liable for damages for acts committed in the course of practice which evidenced a lack of ability or fitness to practice.

Veterinary licensing processes are contained in ch. VE 1. Under s. VE 1.14 (6), applicants who have never been previously licensed in any jurisdiction must apply by examination, and applicants who have previously been licensed in Wisconsin or any other jurisdiction must apply by endorsement. Under s. VE 1.28, applicants who have previously been licensed in Wisconsin and allowed the license to expire may apply for renewal of the license.

There are unintentional gaps and inconsistencies in licensing processes. For example, the current rules do not have a clear process for applicants who have been disciplined by a licensing authority in the past. Under s. 89.072, the applicant cannot be licensed by endorsement, but under s. VE 1.14 (6) the applicant cannot be licensed by examination. As another example, VE 1.14 (6) requires applicants who have

previously been licensed in Wisconsin to apply by endorsement, but VE 1.28 allows these applicants to apply for renewal.

*New Policies Proposed to be Included in the Rule and Analysis of Policy Alternatives:*

The VEB proposes evaluating veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. Without the proposed rule, there would continue to be unintentional gaps in veterinary licensing processes.

**4. Detailed explanation of statutory authority for the rule (including the statutory citation and language):**

Section 89.03, Stats., authorizes the VEB to promulgate rules as follows:

**89.03 Rules.**

- (1) The examining board shall promulgate rules, within the limits of the definitions under s. 89.02 (6), establishing the scope of practice permitted for veterinarians and veterinary technicians and shall review the rules at least once every 5 years to determine whether they are consistent with current practice. The examining board may promulgate rules relating to licensure qualifications, denial of a license, certification, or temporary permit, unprofessional conduct, and disciplinary proceedings.
- (2) The examining board shall promulgate rules requiring training and continuing education sufficient to assure competency of veterinarians and veterinary technicians in the practice of veterinary medicine, except that the board may not require training or continuing education concerning the use, handling, distribution, and disposal of pesticides other than for disciplinary purposes.
- (3) The examining board shall promulgate rules specifying a procedure for addressing allegations that a person licensed or certified by the veterinary examining board under this chapter has practiced as a veterinarian or veterinary technician while impaired by alcohol or other drugs or that his or her ability to practice is impaired by alcohol or other drugs, and for assisting a person licensed by the veterinary examining board under this chapter who requests to participate in the procedure or who requests assistance in obtaining mental health services. In promulgating rules under this subsection, the examining board shall seek to facilitate early identification of chemically dependent veterinarians or veterinary technicians and encourage their rehabilitation. The rules promulgated under this subsection may be used in conjunction with the formal disciplinary process under this chapter. The examining board may contract with another entity to administer the procedure specified under the rules promulgated under this subsection.

**5. Estimate of amount of time that state employees will spend developing the rule and of other resources necessary to develop the rule:**

DATCP estimates that it will use approximately 200 staff hours to develop this rule. This estimate includes time required for the investigation and analysis, rule drafting, preparing related documents, holding public hearings, and communicating with affected persons and groups. DATCP will use existing staff to develop this rule.

**6. List with description of all entities that may be affected by the proposed rule:**

Entities impacted by this rule include veterinarians, veterinary clinics, and consumers of veterinary services.

**7. Summary and preliminary comparison with any existing or proposed federal regulation that is intended to address the activities to be regulated by the proposed rule:**

The proposed rule is specific to Wisconsin statutes. There is not a federal licensing process for veterinarians.

**8. Anticipated economic impact of implementing the rule (note if the rule is likely to have a significant economic impact on small businesses):**

The proposed rule would evaluate VEB licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. Most affected entities are small businesses, pursuant to the definition under s. 227.485 (1) (c), Wis. Stats. The overall anticipated economic impact is minor.

**Contact Person:** Angela Fisher (Angela.Fisher1@wisconsin.gov); Phone (608) 219-5761

Signed this \_\_\_\_ day of \_\_\_\_\_ 2023

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Hunter Lang, DVM  
Chair  
State of Wisconsin Veterinary Examining Board



## Veterinary Examining Board Agenda Request Form

<b>Meeting Date</b>	7/17/2024
<b>Requestor Name</b>	Melissa Mace
<b>Item Title for the Agenda</b>	Biennial Budget
<b>Should this be in Open or Closed Session?</b>	Open
<b>Is this an Action Item or for Information Only?</b>	Information
<b>Are there Attachments?</b> (If yes, include file names)	No
<b>Is a Public Appearance Anticipated?</b>	No

### Description of the Agenda Item

Review of Biennial Budget Process  
Brief discussion on a VEB budget request.

Division of Animal Health staff submitted a request for 2.0 FTEs for VEB work. The request is being reviewed by the Office of the Secretary for possible activity in the biennial budget process. 1.0 FTE was requested for investigation, monitoring, and effective enforcement by the VEB, and 1.0 FTE was requested for program and policy analysis for the VEB.

2.0 FTE positions were requested in the 2021-23 biennial budget, and 1.0 FTE was granted. At the time of that request, only data through calendar year 2018 was available, and workload has nearly doubled since then. Updated data through calendar year 2023 is shown below:

CY	2016	2017	2018	2019	2020	2021	2022	2023
# Complaints Received	59	71	94	148	111 (COVID Closures)	151	152	162

There is now currently 1.0 FTE and two part-time LTE positions tasked with this work. The number of veterinary-related complaints are anticipated to continue increasing, further necessitating a second FTE. The requested FTE position would also allow the Department to discontinue the two LTE positions.

A 1.0 FTE is also requested for program and policy analysis work for the VEB. The position would work on communications for the Veterinary Professional Assistance Program, participate in the Wisconsin Veterinary Medical Association mental health group, and scheduled webinars. The position would provide support for VEB rules, legislation, and other guidance creation. The VEB is statutorily required to do a rule review every five years. The position would assist in the review of application processes and identifying efficiencies to process applications quicker. The position would modify forms, work on getting all application types online, develop a more user friendly online licensing list and discipline list. The position would streamline processes, such as the process for providing verification letters.

**Veterinary Examining Board  
Agenda Request Form**

<b>1) Meeting Date</b>	July 17, 2024
<b>2) Requestor Name</b>	M. Mace
<b>3) Item Title for the Agenda</b>	Strategic Plan
<b>4) Should the Item be in Open or Closed Session?</b>	Open
<b>5) Are there Attachments?</b> (If yes, include file names)	2023 Strategic Goals 2024 Strategic Plan Draft.
<b>6) Is a Public Appearance Anticipated?</b>	N
<b>7) Description of the Agenda Item</b>	Informational:  2023 Strategic Goals progress reviewed.  Discuss changes for 2024



# VEB



## VISION:

Setting the standard of forward thinking veterinary regulation.

## MISSION:

To protect the public through a fair regulatory process that instills public confidence in our licensees while remaining agile to the constant advancement of veterinary medicine.

## CORE VALUES

**ProteCting the public**

**TrAnsparency**

**IntegRity**

**HonEsty**

## 2023 VEB Strategic Goals

Effective July 1, 2023 – June 30, 2024 VEB Full Board Meeting

Status updates thru June 2024

### 1. AAVSB involvement:

- a. Have an AAVSB presentation at a Board meeting regarding:
  - i. RACEtrack
  - ii. Vault
  - iii. Other services

Dr. Beth Venit will attend and present at the July meeting

- b. Have a minimum of one board member attend as a voting delegate for the AAVSB annual meeting.

Two board members attended the AAVSB annual meeting. -- Complete

### 2. Elevate the awareness and utilization of the VPAP program:

- a. Work closely with the WVMA mental health task force to provide focus for, and promotion of, the VEBs veterinary professional assistance program (VPAP)
  - i. Working on guidance clarifying that mental health is pertinent to veterinary medicine and education taken on mental health counts for non-scientific CE. -- Done
- b. Complete the bid process thru the state a secure a contract for a VPAP provider by Jan. 2024.
  - i. Extension of the Lifeworks contract thru 2024 obtained

### 3. Streamline Complaint process by ensuring that new complaints are addressed as quickly and simple cases are expedited as follows:

- a. Initiate the initial contact with the respondent within five business days of complaint receipt, on 90% of cases. This would not include cases where DEA is involved or a site-visit must be made, as those tasks normally exceed 5 days.
  - i. 4<sup>th</sup> Quarter totals (for complaints received 04/01/2024 – 06/30/2024): 82% of initial contacts made within 5 business days. *Note: this does include cases where there was a necessary & intentional delay due to a needed on-site visit, DEA involvement, etc. There is not an efficient way to delineate these cases from the data.*
  - ii. Year-end totals (for complaints received 07/01/2023 – 06/30/2024): 78% of initial contacts made within 5 business days. *Note: same note as above.*

- b. Have all complaints reviewed by the screening committee within 90 days of the initial contact with the respondent. This excludes cases where the respondent obtains legal counsel.  
*Respondents have up to 30 days to respond to the initial request. After that, the investigators must compile the materials and build the case. Cases that are presented to screening must be completed roughly two weeks prior to the committee meeting.*
  - i. 4<sup>th</sup> Quarter totals (for complaints received 04/01/2024 – 06/30/2024): 100% of all cases were reviewed by the Screening Committee within 90 days of the initial contact.
  - ii. Year-end totals (for complaints received 07/01/2023 – 06/30/2024): 90% of all cases were reviewed by the Screening Committee within 90 days of the initial contact. **100% of all cases where an extension was not requested by the respondent were reviewed by the screening committee within 90 days.**
  
- b. Send final stip/FDO for all “CE Only” cases to the Respondent within 60 days of screening committee opening the case. “CE Only” cases are cases where there were no violations found, except that the respondent failed to complete the proper number of CE hours in the prior licensing year.
  - i. 4<sup>th</sup> Quarter totals (for cases closed 04/01/2024 – 06/30/2024): 100% had the stipulation and FDO send to the respondent within 60 days of screening.
  - ii. Year-end totals (for cases closed 07/01/2023 – 06/30/2024): 100% had the stipulation and FDO send to the respondent within 60 days of screening.
  
- 4. Increase outreach to credential holders.**
  - a. Complete a biennial report that is distributed to credential holders and available on the website.
    - i. Need guidance on content.
  - b. Bulletin/Newsletter to credential holder addressing delegation of medical services, s. VE 1.44
    - i. **Completed 9/22/2023**

Credentials issued by biennium						
	VET	Percentage Increase	CVT	Percentage Increase	Total	Percentage Increase
2016-2017	2746		1541		4287	
2018-2019	3056	11%	1911	24%	4967	16%
2020-2021	3340	9%	2149	12%	5489	11%
2022-2023	3745	12%	2550	19%	6295	15%
2024-2025*	3885	4%	2803	10%	6688	6%

\*as of June 2024

Complaints and Investigations					
	Total Complaints	Complaints Open for Investigation	Percent of complaints open to investigation	Complaints as a percent of licensees	Investigations as a percent of licensees
2016-2017	130	41	32%	3%	1%
2018-2019	242	59	24%	5%	1%
2020-2021	262	68	26%	5%	1%
2022-2023	314	103	33%	5%	2%
2024-2025					

VPAP

Year	Avg. Employee Headcount	Utilization Rate	Activity
Jan 2023 to Dec 2023	6,672	0.69%	Counseling/Work-life
		7.61%	Website Resources/Trainings/Seminars/ManagerConsults/LifeCoach
Jan 2022 to Dec 2022	6,475	0.80%	Counseling/Work-life
		4.20%	Website/Trainings/Seminars/ManagerConsults/ LifeCoach
	6,476	0.80%	Counseling/Work-life

Jan 2021 to Dec 2021		7.60%	Website/Trainings/Seminars/ManagerConsults/ LifeCoach
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Rules

Jul-22 Implemented rule change to include telehealth regulations

Guidance

Jul-23 Updated the Guidance on Cannabis in veterinary care

Oct-23 Published Guidance on Interactive CE

Published Guidance on Renewing a credential after 5 years of non renewal

In consultation with the WVMA mental health task force, initiated draft

guidance on allowing Mental Health education as non scientific CE (Published

2023 Jan 2024)



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Tr**A**nsparency

Integ**R**ity

Hon**E**sty



## 2024-20253 VEB Strategic Goals

Effective July 1, 2024 – June 30, 2025 VEB Full Board Meeting

### Existing Goals

1. AAVSB involvement:
2. Elevate the awareness and utilization of the VPAP program:
3. Streamline Complaint process by ensuring that new complaints are addressed as quickly and simple cases are expedited as follows:
4. Increase outreach to credential holders.
  - a. Complete a biennial report that is distributed to credential holders and available on the website.

### Proposed Goals:

1. Complete a review of the license and exam process.
  - a. Update the State Exam
  - b. Update all licensure Forms
  - c. Update rules to create efficient licensing paths.
2. Update and enhance the current list of veterinary examining board disciplinary actions in the following ways:
  - a. Review the current discipline list's format to determine if there is a more presentation that provides clearer information to the public. (Current list contains the issuance of the FDO (no definitions included) and FLO (again not definitions), terminology is used inconsistently, it is also not sortable, or easily searchable.
  - b. Assess the viability of creating a portal where the public can easily download the referenced discipline.
3. Present a report on the top 5 violations resulting in discipline from the previous quarter.
4. Work with DATCP to create and support a budget request for 2.0 FTE to support the VEB in investigations, VPAP administrations, and policy and rule development.
5. VPAP:

- a. Complete the RFP process for a VPAP platform and have in place Jan 2025.
- b. Host 6 webinars.
- c. Send a monthly outreach to credentialing holders on VPAP services and the focus of the month.

**6. VEB Outreach (Public, Credential Holder, Student);**

- a.