



Recruitment and Training (SQPs)

In my last article we were pleased to introduce the suitably qualified person (SQP) and the licensing, regulation, training and qualifications required to prescribe licensed animal medicines at the POM-VPS and NFA-VPS distribution category. The recruitment and training of SQPs in the UK is at an all-time high, with over 6350 on the register and a further 1000 in training for the examination. We see more and more now working in vet practices, with over 700 providing a valuable role in routine front-of-house prescribing.

Readers will probably be aware that the EU is revising the current regulation for all animal medicines and medicated feeds. AHDA exists to ensure its member SQPs can continue to prescribe under EU law, and has been closely involved with the committee deliberations for both sets of legislation. AHDA is working with MEPs and allies of our system through many twists and turns as other member states pitch in with their opinions and attempts to have EU law fit their preferred distribution systems. The revised drafts never attempted to change distribution rights and the original text was clear on this matter – that member states' national law distribution arrangements should be maintained.

Sadly this has not been the case and since September 2014, the committee readings have constantly thrown up obstacles which, if adopted, would remove the right of the SQP to prescribe. A direct result of such actions would immediately affect the UK's 8 million cat and dog owners, the 1.2 million horse owners and every livestock and smallholder farmer in the UK. The owners would find themselves with reduced access to advice and availability, and would face increased costs to a range of essential medicines that do not require a veterinary diagnosis. This would also be a massive blow to the rural economy and rural employment; all such issues would be acutely embarrassing to a UK government determined to ensure the UK remains inside the EU with the forthcoming referendum in June 2016.

Only the UK and Republic of Ireland have this system of distribution, and so we are in a minority when up against the other 26 member states. They themselves do not have a uniform distribution system, which is partly why the EU draft legislation wanted to leave this sensitive and complex area well alone. However, those 26 member states all support their own system and with democratic licence are campaigning for a system across the EU that fits their own nation and not that of others.

Another complication is that of commercial interests. The Federation of Vets in Europe (FVE) have seized on the issue to campaign for all medicines to become vet

only, thereby gifting the UK vets with the 25% of the market currently held by SQP prescribers. To help achieve their aim from their permanent offices and seven staff in Brussels, misinformation has been publicly circulated inferring SQPs prescribe and sell antibiotics and antimicrobials. SQPs never have done, do not and never will prescribe these medicines. They require veterinary diagnosis and a diagnosis is the clear domain of the veterinary surgeon. The impact this information had on MEPs was quite significant and required a lot of meetings and clarification to get our message across about these classes of animal medicines in particular.

Attacks then switched away from trying to ban the SQP distribution system to trying to redefine the requirements of a prescription by ensuring a veterinary diagnosis and examination were required with each prescription. Here, SQPs would be prevented from prescribing as they are not qualified to make a diagnosis or examine animals. Another attempt was to draft amendments to ensure set categories of animal medicines could only be prescribed by vets. An example of this was that 'anabolic, anti-inflammatory, anti-infectious, anti cancer, hormonal or psychotropic medicines should only ever be vet only prescribed.' This, on the surface, would appear to be fine as all these require vet diagnosis, but the anti-infectious group includes anthelmintic so, again, work had to be done to ensure these are excluded from this amendment.

Medicated feeds have had an equally hard, if not harder, passage for SQPs. The only medicines prescribed by SQPs in medicated feeds are pig and poultry anthelmintic with small bags of ready-formulated feeds sold only with SQP supervision. These are particularly important for the vibrant smallholder, outdoor and free-range pig and poultry owners. The hotly debated forums concerning antibiotic in feeds particularly for mono-gastric species has presented new definitions of prescription criteria, particularly with examination and diagnosis, and it has been difficult for British MEPs to table amendments to allow anthelmintics to continue in this way.

Another frustration for our industry is finding us under attack when there is no technical or scientific evidence to support such a dramatic change.

The main purpose of this article is to highlight just how difficult your particular situation can be when working with 27 nations who naturally have self-interest at heart. Implications from decisions taken without accurate and detailed knowledge can have far-reaching and unforeseen consequences at national level and subsequent negotiations end up with diluted compromises that sometimes suit nobody.



At this stage, both the agriculture and the environment committees have voted with the main VMR also voted at plenary. The amendments tabled would enable SQP distribution to continue. Debate now moves to the Council of Ministers – consisting of government officials from all members (in our case the VMD) who are working much behind schedule on both sets of legislation. Their deliberations will be lined up alongside those of the committees and the original commission draft (trilogue). The final sets of legislation may completely up-end the lengthy and careful stages of committee work that have already been voted and accepted and which would, in turn, make a nonsense of a lot of the work of elected committees of MEPs.

The legislation still has some way to travel until all is said and done. We hope it does not stray too far from its original stated objectives. Committee rapporteurs will still have their considerable influence to use at trilogue stages – probably early 2017 – and all parties will be watching carefully to see how the final stages of negotiation proceed.

Why does all this matter? Writing as a consultant to AHDA and with nine years leading this association, you may well think a question such as this would have a bias as we need to move to protect the viability of our members. Looking outside this box, there is widespread recognition that the ready availability, trained advice at point of sale, complying with regulations bound by UK law and choice of product provided by the SQP all play a vital role in animal welfare. Owners who find keeping pet medicines too

expensive or find access to routine medicines requiring regular use restricted, will attempt short-cuts or illegal access to medicines. Livestock farmers in remote locations increasingly find access to large animal veterinarians becoming more difficult, whereas companion animal and equine vets have much better cover. Our members offer a range of essential livestock farm products such as feed, supplements, grassland production, livestock handling, bio security, fencing and clothing ranges alongside medicines with excellent delivery and stores distribution to serve the whole livestock farming population in the UK. To see the EU prevent this industry from continuing to prescribe licensed animal medicines would seriously damage the rural economy and add to the crisis in milk and meat production as more and more farms sell up and go out of business.



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