

THE SPECTRUM OF CARE EDUCATION MODEL

Preparing graduates to practice across the spectrum of care (SOC) advances the mission of veterinary medical programs to develop compassionate leaders equipped to navigate the complexities of evolving veterinary medical care, client relationships, and business sustainability.

The SOC Education Model was created to support veterinary medical programs and the broader veterinary education community in preparing graduates for SOC practice. In recognition that SOC is practiced across clinical contexts and areas, the Model is intended to help facilitate and bolster collaboration among all clinicians engaged in this endeavor (Warman et al., 2023).

Upon graduation, a SOC-ready graduate can confidently and competently offer a range of high-quality, evidence-based care options tailored to clients' and patients' unique circumstances (Fingland et al., 2021; Stull et al., 2018). This enhances their ability to meet the growing societal demand for accessible veterinary healthcare and build financially successful practices that positively impact their communities without subsidizing care (Salois, 2023).

Below, we summarize the key information about SOC practice that informed the development of the SOC Education Model. We also briefly describe the structure of the Model, how it was developed, and recommended uses.

BRIEF BACKGROUND ON SPECTRUM OF CARE PRACTICE

The term "spectrum of care" (SOC) has only somewhat recently been defined in the veterinary literature as the wide range of care options that veterinarians can provide (Stull et al., 2018). These care options span the continuums of cost, technical complexity, resource needs, and required skill level (Fingland et al., 2021). While SOC as a term is relatively new, practicing across the spectrum of care is not a novel approach to veterinary practice. Many veterinarians are experienced in offering a range of care options, working with clients to develop a care plan aligned with the case's unique circumstances, and iteratively adjusting the care plan based on the patient's response and client input. As demand for accessible veterinary healthcare continues to grow, veterinary medical programs are striving to enhance the preparedness of their graduates for SOC practice.

SOC practice has also been referred to as "contextualized care" because care decisions are tailored based on contextual factors (Skipper et al., 2021; Stull et al., 2018). In addition to patient factors, influential contextual factors include client factors (e.g., goals, abilities, resources), veterinarian factors (e.g., skillset, biases and assumptions, adaptability), and veterinary practice factors (e.g., healthcare team, policies, resources) (Englar, 2023a). In keeping with evidence-based medical practice, the range of appropriate care options is also informed by findings from outcomes-based research whenever possible (Evason et al., 2023).

In SOC practice, multiple care options are considered appropriate and acceptable, and the care option that best meets the unique needs of each patient and client is not necessarily the “gold standard” option (Englar, 2023a; Skipper et al., 2021). A care plan can differ from the gold standard while still meeting the acceptable standard of care, provided that client discussions and decisions are properly documented (Block, 2021; Englar, 2023b).

Shifting from prioritizing gold standard care to a SOC approach can help increase access to veterinary care and strengthen the health and welfare of humans, animals, and communities (Blackwell & O'Reilly, 2023; Brown et al., 2021; Roberts et al., 2023). Being able to provide care to more patients without subsidizing costs also maintains the profitability of veterinary practices, especially during periods of economic inflation when clients are not able to spend as much on veterinary care (Benson & Tincher, 2023; Salois, 2023). In practice, a SOC approach provides a framework to help navigate complex clinical decisions and contexts, while providing acceptable outcomes for patients and clients. This approach has the potential to support the development of veterinarians' professional identity (e.g. values and goals) in a way that helps them value the many and varied contextual challenges inherent to daily clinical practice (Armitage-Chan & May, 2018).

THE SOC EDUCATION MODEL

The SOC Education Model provides an outcomes-focused framework for helping veterinary medical programs prepare students to practice across the spectrum of care options. This approach aligns with the growing adoption of competency-based education in veterinary medicine (Banse et al., 2023). The desired competencies, or abilities, of all new veterinarians have already been described in the Competency-Based Veterinary Education Framework (AAVMC Working Group on Competency-Based Veterinary Education et al., 2018). While most healthcare tasks require veterinarians to use multiple competencies, the Framework identifies these competencies individually to guide the design of veterinary curricula.

The SOC Education Model introduces eight competencies that describe the observable abilities of new veterinarians who are prepared specifically for SOC practice. These SOC competencies integrate into the CBVE Framework as illustrative sub-competencies, which veterinary medical programs may choose to adopt to enhance curricular focus on SOC outcomes.

Each SOC sub-competency is accompanied by examples of course-level learning outcomes describing the skills, knowledge, and attributes / behaviors that students should develop to meet these competencies at graduation. These outcomes can also help guide the addition or revision of assessments and learning experiences to scaffold students' development of the sub-competencies across the curriculum. Ideally, curricula should include multiple, increasingly complex opportunities for students to acquire, practice, and integrate the knowledge, skills, and attributes / behaviors that comprise the SOC sub-competencies (Fingland et al., 2021; Harden & Stamper, 1999; May & Silva-Fletcher, 2015).

The SOC sub-competencies and learning outcomes are intended to be applicable for caring for patients across species. The term “care options” is used to refer to diagnostic and treatment options for preventative, therapeutic, and behavioral care. The term “client” is used in reference to the individual or organization that is the primary caretaker for the patient(s).

In recognition of the diverse landscape of veterinary education, the SOC Education Model was designed to be applicable across curricular models and learning contexts. The Model is intended to be evergreen and avoids mention of specific frameworks or jargon. The Model will continue to evolve as additional information and feedback becomes available.

Table 1 presents the SOC sub-competencies and course-level learning outcomes, and their alignment with the competencies and domains in the CBVE Framework.

ALIGNMENT WITH THE CBVE FRAMEWORK

The decision to align the SOC competencies as sub-competencies of the CBVE Framework was made in recognition of veterinary medical programs' growing use of the CBVE Framework to structure curricula (Banse et al., 2023). This alignment allows programs to seamlessly integrate the SOC competencies into their adoption of the CBVE Framework. Additionally, to assess these sub-competencies, programs can leverage resources that have already been developed for the competencies and domains of the CBVE Framework. These include entrustable professional activities (EPAs), developmental milestones, and an assessment toolkit available on the CBVE website (www.cbve.org).

HOW TO USE THE SOC EDUCATION MODEL

The SOC Education Model can be used by veterinary medical programs and the broader veterinary education community to guide the development of new veterinary curricula that prepare graduates to practice across the spectrum of care options.

The SOC Education Model can also be used to guide changes in existing curricula. Mapping courses or entire curricula to the SOC sub-competencies can provide evidence of strengths and areas of improvement in current SOC training (Harden, 2001). Integrating multiple, increasingly complex opportunities for students to acquire, practice, and integrate the knowledge, skills, and attributes / behaviors that comprise the SOC sub-competencies provides a concrete strategy for addressing gaps identified through mapping.

DEVELOPMENT OF THE SOC EDUCATION MODEL

The SOC Education Model was developed by the AAVMC Spectrum of Care Initiative (SOI). With support from The Stanton Foundation, the SOI was founded in 2021 to provide the infrastructure, guidance, and assistance for an inclusive and collaborative approach to supporting and enhancing SOC training in veterinary education. The SOI is spearheaded by the AAVMC SOI team with the guidance of a Task Force representing a variety of veterinary education stakeholders, including national and international academic leaders, educators, and practitioners in both academia and private practice.

The SOC Education Model was developed using an evidence-based approach that drew on information gathered from international competency frameworks, peer-reviewed literature, and interviews and focus groups. This information was reviewed, synthesized, and refined via expert consensus. Feedback was also collected and integrated from the broader veterinary education community.

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MORE INFORMATION

Please contact soci@aavmc.org for more information about the SOC Education Model and SOCI. We welcome your questions and comments!

SUGGESTED CITATION

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TABLE 1: SPECTRUM OF CARE (SOC) SUB-COMPETENCIES AND LEARNING OUTCOMES ALIGNED WITH THE CBVE FRAMEWORK

This table presents the SOC sub-competencies (i.e., program-level outcomes), course-level learning outcomes (LOs), and their alignment with competencies and domains in the CBVE Framework (AAVMC Working Group on Competency-Based Veterinary Education, 2018).

SOC sub-competencies and LOs are in **blue**.

The SOC sub-competencies and LOs are intended to be applicable for caring for patients across species. The term “care options” is used to refer to diagnostic and treatment options for preventative, therapeutic, and behavioral care. The term “client” is used in reference to the individual or organization that is the primary caretaker for the patient(s).

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CBVE DOMAIN 1: CLINICAL REASONING AND DECISION-MAKING

CBVE Competency 1.1 Gathers and assimilates relevant information about animals

CBVE Sub-competency 1.1a Collects history

CBVE Sub-competency 1.1b. Performs physical examination

CBVE Sub-competency 1.1c. Interprets diagnostic test results

CBVE Sub-competency 1.1d. Performs necropsy examination

CBVE Competency 1.2 Synthesizes and prioritizes problems to arrive at differential diagnoses

CBVE Sub-competency 1.2a. Identifies problems

CBVE Sub-competency 1.2b. Creates refined problem list

CBVE Sub-competency 1.2c. Prioritizes differential diagnoses

CBVE Competency 1.3 Creates and adjusts a diagnostic and/or treatment plan based on available evidence

CBVE Sub-competency 1.3a. Appraises available clinical information and acts accordingly despite uncertainty

CBVE Sub-competency 1.3b. Explains justification for plan

CBVE Sub-competency 1.3c. Re-evaluates animal or population in a timely manner to adjust plan

CBVE Sub-competency 1.3d. Uses critical thinking to determine appropriate action when unexpected outcomes occur (e.g., complications, changed diagnosis)

SOC Sub-competency 1.3e. Integrates information about the patient with client circumstances to identify a range of appropriate care options and to adjust the care plan

- Knowledge LO 1. Lists the client-specific factors (e.g., expectations, goals, resources, abilities, beliefs) that may impact the client's ability or desire to pursue care options for their animal.
- Skill LO 1. Elicits information from the client about factors that may affect their ability or motivation to pursue care for their animal.
- Skill LO 2. Explains the importance of a follow-up plan to the client.
- Skill LO 3. Uses follow-up plan to determine treatment response and client perspectives and adapts as appropriate.
- Attribute / Behavior LO 1. Demonstrates empathy and respect during discussions relating to client circumstances.
- Attribute / Behavior LO 2. Demonstrates active listening to identify and clarify factors that may affect the client's ability or motivation to pursue care for their animal.

CBVE Competency 1.4 Incorporates animal welfare, client expectations, and economic considerations into the diagnostic or treatment plan

CBVE Sub-competency 1.4a. Considers disease in context of the whole animal and client

CBVE Sub-competency 1.4b. Presents a range of options to the client

CBVE Sub-competency 1.4c. Considers euthanasia as a management option when appropriate

SOC Sub-competency 1.4d. Offers a range of care options that are tailored to the unique circumstances of each patient and client

- Knowledge LO 1. Explains why offering a range of care options is appropriate and integral to veterinary practice.
- Knowledge LO 2. Defines the terms "spectrum of care", "contextualized care", "standard of care", and "gold standard care".
- Knowledge LO 3. Gives examples of how offering a range of care options can impact a client's ability to attain care for their animal.
- Knowledge LO 4. Draws on scientific evidence to identify examples in which offering a range of care options improved patient outcomes and reduced euthanasia or surrender of animals.
- Knowledge LO 5. Identifies and weighs the practitioner and practice factors that impact the range of care options for a patient.
- Skill LO 1. Prioritizes and tailors care options to align with the client's circumstances.
- Attribute / Behavior LO 1. Demonstrates patience and flexibility to identify multiple care options that align with patient needs and client factors, despite uncertainty.

SOC Sub-competency 1.4e. Facilitates client decision-making regarding care by presenting the costs, risks, benefits, and evidence-base of care options

- Knowledge LO 1. Defines the characteristics of "shared decision-making".
- Knowledge LO 2. Explains the costs, benefits, limitations, uncertainties, and care-giving responsibilities associated with a range of care options, including not proceeding with further veterinary care.
- Skill LO 1. Invites a discussion of which care options may best align with a client's expectations and capabilities.
- Skill LO 2. Communicates aspects of care options that may have an uncertain outcome, steps that will be taken to reduce uncertainty, and that plans for care may change as new information becomes available.
- Attribute / Behavior LO 1. Demonstrates confidence and empathy when responding to clients' requests regarding alternative options.
- Attribute / Behavior LO 2. Demonstrates regard for client's autonomy with decision-making when choosing which care options align most closely with the client's capabilities.
- Attribute / Behavior LO 3. Demonstrates willingness to execute additional care options beyond the initial recommended care plan.

CBVE Competency 1.5 Prioritizes situational urgency and allocates resources

CBVE Sub-competency 1.5a. Triage cases to address most urgent and important problems first

CBVE Sub-competency 1.5b. Recognizes emergent situation and directs action

CBVE Sub-competency 1.5c. Recognizes and responds to reportable, transboundary, epizootic, and emerging/re-emerging diseases

CBVE Competency 1.6 Adapts knowledge to varied scenarios and contexts

CBVE Sub-competency 1.6a. Extrapolates knowledge to novel species or situations

CBVE Sub-competency 1.6b. Adjusts existing protocol or procedure when standard measures are unavailable

CBVE Competency 1.7 Recognizes limitations of knowledge, skill and resources and consults as needed

CBVE Sub-competency 1.7a. Identifies situations in which referral is warranted

CBVE Sub-competency 1.7b. Consults experts both within and outside the veterinary profession

CBVE DOMAIN 2: INDIVIDUAL ANIMAL CARE AND MANAGEMENT

CBVE Competency 2.1 Performs veterinary procedures and post-procedural care

CBVE Sub-competency 2.1a. Performs elective procedures (e.g., castration)

CBVE Sub-competency 2.1b. Performs routine therapeutic procedures (e.g., administer fluids)

CBVE Sub-competency 2.1c. Performs emergency procedures (e.g., establish an airway)

CBVE Sub-competency 2.1d. Provides analgesia and postoperative care

CBVE Sub-competency 2.1e. Anesthetizes and recovers patients

CBVE Sub-competency 2.1f. Manages patient comfort

CBVE Competency 2.2 Promotes comprehensive wellness and preventive care

CBVE Sub-competency 2.2a. Recommends disease prevention measures

CBVE Sub-competency 2.2b. Provides nutritional counseling appropriate to life stage and health status

CBVE Sub-competency 2.2c. Advises clients regarding routine dental care

CBVE Sub-competency 2.2d. Educates clients on prevention of common behavioral problems

CBVE Sub-competency 2.2e. Counsels clients about husbandry and welfare needs

CBVE DOMAIN 3: ANIMAL POPULATION CARE AND MANAGEMENT

CBVE Competency 3.1 Applies population management principles in compliance with legal regulations and economic realities

CBVE Sub-competency 3.1a. Recommends disease prevention measures

CBVE Sub-competency 3.1b. Advises on nutritional management

CBVE Sub-competency 3.1c. Recommends housing and husbandry protocols

CBVE Sub-competency 3.1d. Designs therapeutic plans for disease management

SOC Sub-competency 3.1e. Provides a range of appropriate care options for animal populations that considers animal welfare, lifestyle, economics, societal interests (e.g. food animal industry, animal activism) and public and environmental health concerns

- Knowledge LO 1. Describes and prioritizes the factors (e.g., animal welfare, societal, economic, public health and environmental) that influence decisions regarding care for animal populations.
- Knowledge LO 2. Lists the client-specific factors (e.g., expectations, goals, resources, abilities, beliefs) that may impact the client's ability or desire to pursue care options for their animals.
- Skill LO 1. Identifies, assesses, and prioritizes factors that may impact the range of care options offered for an animal population.
- Skill LO 2. Designs feasible care plans that integrate population and client-specific factors.
- Attribute / Behavior LO 1. Demonstrates empathy and respect during discussions with colleagues and clients relating to care of animal populations, including food production animals.

CBVE Competency 3.2 Recommends and evaluates protocols for biosecurity

CBVE Sub-competency 3.2a. Develops isolation protocols

CBVE Sub-competency 3.2b. Selects disinfection protocols

CBVE Sub-competency 3.2c. Recommends protocols for animal movement

CBVE Competency 3.3 Advises stakeholders on practices that promote animal welfare

CBVE Sub-competency 3.3a. Advocates for animal welfare through communication of the physical, affective and natural needs of the animal. Explains ethical and welfare-related aspects of production processes and slaughter

CBVE Sub-competency 3.3b. Recognizes proper handling and/ or adequate production facilities by interpretation of appropriate animal behaviors. Advises on animal husbandry and transport

CBVE DOMAIN 4: PUBLIC HEALTH

CBVE Competency 4.1 Recognizes zoonotic diseases and responds accordingly

CBVE Sub-competency 4.1a. Identifies the clinical signs, clinical course, transmission potential and pathogen(s) associated with zoonotic diseases

CBVE Sub-competency 4.1b. Responds to zoonotic disease diagnosis through owner education, reporting, quarantine, and disinfection

CBVE Competency 4.2 Promotes the health and safety of people and the environment

CBVE Sub-competency 4.2a. Makes recommendations for management of animal waste, carcasses, and by-products

CBVE Sub-competency 4.2b. Implements safety and infection control practices

CBVE Sub-competency 4.2c. Advises on disaster/emergency preparedness and response

CBVE Sub-competency 4.2d. Practices responsible use of antimicrobial agents

CBVE Sub-competency 4.2e. Describes the role of the veterinarian in food safety

CBVE DOMAIN 5: COMMUNICATION

CBVE Competency 5.1 Listens attentively and communicates professionally

CBVE Sub-competency 5.1a. Communicates with diverse audiences (e.g., demonstrates empathy, uses terminology appropriate to listener)

CBVE Sub-competency 5.1b. Utilizes a variety of communication platforms (e.g., email)

CBVE Competency 5.2 Adapts communication style to colleagues and clients

CBVE Sub-competency 5.2a. Demonstrates client-centered communication

CBVE Sub-competency 5.2b. Elicits client goals, expectations, perspectives and constraints, considering the human-animal bond

CBVE Sub-competency 5.2c. Engages clients in difficult conversations such as financial decisions and end-of-life care (e.g., palliative care and euthanasia)

CBVE Competency 5.3 Prepares documentation appropriate for the intended audience

CBVE Sub-competency 5.3a. Documents care and communication using professional terminology

CBVE Sub-competency 5.3b. Ensures documentation fulfills professional and legal requirements

CBVE DOMAIN 6: COLLABORATION

CBVE Competency 6.1 Solicits, respects and integrates contributions from others

CBVE Sub-competency 6.1a. Invites input from others irrespective of role, hierarchy or background

CBVE Sub-competency 6.1b. Acknowledges input and incorporates into ongoing plan of action

CBVE Sub-competency 6.1c. Leverages own role and roles of others to achieve shared goals

CBVE Competency 6.2 Functions as leader or team member based on experience, skills and context

CBVE Sub-competency 6.2a. Applies principles of teamwork

CBVE Sub-competency 6.2b. Bases action on collaborative input

CBVE Sub-competency 6.2c. Manages conflict

CBVE Competency 6.3 Maintains ongoing relationship to provide continuity of collaborative effort

CBVE Sub-competency 6.3a. Follows up to determine if collaborator can implement the plan

CBVE Sub-competency 6.3b. Provides support through encouragement, education, or redirection to refine the plan of action

CBVE Competency 6.4 Demonstrates inclusivity and cultural competence

CBVE Sub-competency 6.4a. Demonstrates respect for diversity

CBVE Sub-competency 6.4b. Encourages diverse contributions within the workplace

CBVE DOMAIN 7: PROFESSIONALISM AND PROFESSIONAL IDENTITY

CBVE Competency 7.1 Adopts an ethical approach to meeting professional obligations

CBVE Sub-competency 7.1a. Applies an ethical approach to professional decision-making

CBVE Sub-competency 7.1b. Recognizes and responds to evidence of neglect and abuse

CBVE Competency 7.2 Practices time management

CBVE Sub-competency 7.2a. Recognizes impact of time management on stakeholders

CBVE Sub-competency 7.2b. Prioritizes and completes tasks according to importance and urgency

CBVE Competency 7.3 Reflects on personal actions

CBVE Sub-competency 7.3a. Invites and responds to constructive feedback on performance

CBVE Sub-competency 7.3b. Critiques decision-making process and its outcomes

SOC Sub-competency 7.3c. Demonstrates regard for previous care decisions made by colleagues and clients

- Knowledge LO 1. Identifies strategies to discuss client and patient factors that may have influenced decision-making.
- Knowledge LO 2. Lists strategies for guiding client conversations around previous care decisions.
- Skill LO 1. Elicits whether a client's expectations were met during previous care and if not, why.
- Skill LO 2. Maintains appropriate verbal and non-verbal communication composure when reviewing previous care options.
- Attribute / Behavior LO 1. Demonstrates non-judgement regarding prior options given and decisions made.

SOC Sub-competency 7.3d. Reflects on one's own professional identity in relation to providing a spectrum of care

- Knowledge LO 1. Explains how a veterinarian's personal values, goals, and prior experiences can influence care decisions.
- Skill LO 1. Reflects on own values, goals, and prior experiences in relation to care decisions.

CBVE Competency 7.4 Engages in self-directed learning and career planning

CBVE Sub-competency 7.4a. Engages in self-directed learning as a foundation for life-long learning

CBVE Sub-competency 7.4b. Identifies and undertakes professional development to meet learning needs

CBVE Sub-competency 7.4c. Uses appropriate resources for learning and decision making (e.g., information technology, consultation with colleagues)

CBVE Sub-competency 7.4d. Compares career paths and weighs professional and personal rewards (e.g., financial implications)

SOC Sub-competency 7.4e. Pursues opportunities to expand skill set to offer a broader range of care options

- Skill LO 1. Recognizes own limitations and next steps for development.
- Skill LO 2. Identifies training opportunities to undertake next steps for development of new or unfamiliar skills and procedures, with appropriate support.

CBVE Competency 7.5 Attends to wellbeing of self and others

CBVE Sub-competency 7.5a. Recognizes sources of workplace stress and acts to remedy adverse situations

CBVE Sub-competency 7.5b. Recognizes signs of stress in self and colleagues, engages in self-care and recognizes when professional support is appropriate for self or others

CBVE Sub-competency 7.5c. Manages expectations of client and self

CBVE DOMAIN 8: FINANCIAL AND PRACTICE MANAGEMENT

CBVE Competency 8.1 Weighs economic factors in personal and business decision-making

CBVE Sub-competency 8.1a. Applies financial principles to professional decisions (e.g., debt repayment plan)

CBVE Sub-competency 8.1b. Explains work-related insurance (e.g., personal, professional, patient)

CBVE Sub-competency 8.1c. Describes relationship between revenue generation, expense categories, and compensation including benefits

SOC Sub-competency 8.1d. Provides a range of care options to a diverse clientele in a manner that fosters financial viability of the practice

- Knowledge LO 1. Identifies components of the practice's profits and losses as they relate to providing care options.
- Knowledge LO 2. Explains how providing a range of care options can have a positive financial impact on the practice.

CBVE Competency 8.2 Delivers veterinary services compliant with legal and regulatory requirements

CBVE Sub-competency 8.2a. Acts in accordance with codes of professional practice, veterinary practice acts and licensing board regulations (e.g., veterinarian-client-patient relationship)

CBVE Sub-competency 8.2b. Acts in accordance with legal and regulatory requirements (e.g., reportable diseases, animal cruelty, waste disposal)

CBVE Sub-competency 8.2c. Selects drugs in accordance with regulatory and legal requirements (e.g., controlled substances, extra-label, or off-label drug use)

CBVE Competency 8.3 Advocates for the health and safety of patients, clients, and members of the team within the workplace

CBVE Sub-competency 8.3a. Complies with workplace health and safety regulations (e.g., radiation safety, infection control)

CBVE Sub-competency 8.3b. Applies safe practices for handling hazardous materials (e.g., administration of chemotherapeutic agents)

CBVE DOMAIN 9: SCHOLARSHIP

CBVE Competency 9.1 Evaluates health-related information

CBVE Sub-competency 9.1a. Retrieves and evaluates information based on research principles

CBVE Sub-competency 9.1b. Analyzes information for accuracy, reliability, validity and applicability

CBVE Competency 9.2 Integrates, adapts, and applies knowledge and skills

CBVE Sub-competency 9.2a. Formulates questions and customizes solutions, drawing on personal experience and available evidence

CBVE Sub-competency 9.2b. Applies literature to solve clinical or scientific problems (e.g., evidence-based practice)

CBVE Sub-competency 9.2c. Applies creativity to develop innovative solutions

CBVE Competency 9.3 Disseminates knowledge and practices to stakeholders

CBVE Sub-competency 9.3a. Develops and disseminates educational material

CBVE Sub-competency 9.3b. Explains evidence-based recommendations
