

Code of Practice for the Welfare of Dogs in the ACT

Submission of the Australian Veterinary Association Ltd

August 2025



About the Australian Veterinary Association (AVA)

The AVA is the peak professional body representing veterinary professionals and students across Australia. For more than 100 years we have been the united voice of the veterinary profession.

Veterinarians are among Australia's most trusted and respected professionals, dedicated to safeguarding animal health and welfare and supporting the communities they live in.

Our vison and purpose

Vision A thriving veterinary profession

Purpose Building a vibrant future for veterinary professionals.

At the AVA we champion the veterinary community, advance professional excellence, foster connectivity, and deliver exceptional member experiences to achieve our vision of a thriving profession.

Essential role of the veterinary profession

Veterinary services are essential to Australia's animal health, food security, and economy. They help secure Australia's animal health and livestock supply chain, protecting hundreds of thousands of jobs and easing cost of living pressures through a safe and reliable food supply.

Beyond agriculture, veterinarians support companion animals and their owners, strengthening the human-animal bond and promoting the associated mental and physical health benefits of pet ownership. Animals are not just a part of the Australian way of life; they are deeply embedded in it - socially, culturally, environmentally, and economically, and veterinarians are an essential part of every vibrant Australian community.

Veterinarians play a pivotal role in maintaining the social licence of animal industries, ensuring animal health and welfare meets community expectations. Like human healthcare and education, veterinary services provide both private benefits to individuals and critical public benefits to society, in areas like biosecurity surveillance, wildlife treatment and health and emergency animal disease management.

Recognised among Australia's most ethical and trusted professionals, veterinarians are highly respected and trusted members of their communities. The Governance Institute of Australia's 2023 Ethics Index ranked veterinarians among the nation's top 10 ethical occupations¹.

1. Governance Institute 2023 (https://governanceinstitute.com.au/app/uploads/2023/11/2023-ethics-index-report.pdf)

AVA Statement of principles with respect to Animal Welfare

Animals are sentient beings that are conscious, feel pain, and experience emotions. Animals and people have established relationships for mutual benefit for thousands of years.

Humans have a duty of care to protect animals. Where a person does not meet his or her obligations to animals in his or her care, animals may suffer. When this happens, the law must be able to adequately intervene to enforce compliance and prevent suffering.



Animals have intrinsic value and should be treated humanely by the people who benefit from them. Owned animals should be safe from physical and psychological harm. They need access to water and species-appropriate food and shelter and should be able to fulfil their important behavioural and social needs. They must receive prompt veterinary care when required and have as painless and stress-free a death as possible.

Animals can be used to benefit humans if they are humanely treated, but the benefit to people should be balanced against the cost to the animal. They should not be used in direct combat or for purposes where suffering, injury or distress is likely to be caused.

Humans should strive to provide positive experiences to promote a life worth living for the animals in their care. We should strive for continuous and incremental improvement in the treatment and welfare of animals.

Humans have a responsibility to care for the natural environment of free-living native animals. People should take steps to preserve endangered species and protect native animals from disease where possible.

Executive Summary

The AVA welcomes the ACT Government's Draft Code of Practice for the Welfare of Dogs. The Draft Code already contains several strong welfare protections - e.g. explicit recognition of sentience and the Five Domains, mandatory microchipping and registration, robust transport rules, controls on debarking, temperature safeguards, and clear expectations for control and supervision.

To strengthen clarity, enforceability and alignment with current veterinary science and AVA policy, we recommend the following priority amendments:

- Training & equipment: Explicitly prohibit aversive training methods and pain or fear-based devices (e-collars, prong/choke/check chains used to choke, citronella/air-blast collars). Recommend positive-reinforcement training as best practice.
- **Tethering:** Confirm tethering as temporary only (short, closely supervised periods). Prohibit tethering for puppies under four months; prescribe a minimum three-metre radius and practical hardware standards for safety.
- Companionship & '3 hours' rule: Retain the obligation for daily, meaningful human interaction, but reframe the numeric three-hour minimum to an outcomes-based Standard (or convert to a Guideline) to improve practicality and enforcement while preserving welfare intent.
- Environment & heat/cold risk: Keep the <5 °C / >30 °C trigger thresholds and add breed/health modifiers and a simple heat-stress/cold-stress plan requirement for high-risk dogs (e.g. brachycephalics, geriatrics).
- **Desexing/sterilisation:** Maintain the legal requirement to desex by six months unless exempted, but add clinical discretion on timing and method (including recognised gonad-



sparing options) based on individual risk-benefit, and strengthen owner education rather than one-size-fits-all timing.

- Breeding standards: Insert clear, enforceable requirements to avoid heritable disorders (e.g.
 BOAS, vertebral malformations in brachycephalics); require pre-breeding veterinary screening
 and record-keeping. Consider a phased, evidence-based conformational program (e.g. muzzleto-skull ratio and vertebral imaging where appropriate).
- Socialisation & habituation: Embed a concise, practical early socialisation Standard aligned with the sensitive period, and promote veterinary-led puppy classes and ongoing owner education.
- **Electronic identification:** Retain mandatory microchipping and add a best-practice registry/handover workflow (scan on intake/admission, scan at annual health checks, ensure registry data are current on ownership transfer).
- Transport & vehicles: Keep strong transport provisions and add a short hyperthermia alert clause referencing rapid in-vehicle temperature rise; provide clear authority for immediate removal of animals at evident risk.
- Shelter/pound interface: Encourage veterinary leadership in design, biosecurity, vaccination, behavioural triage, and rehoming suitability assessments for animals entering shelters and municipal pounds.
- **Puppy farming:** Support enforceable breeder licensing, traceability and inspection, with microchip-linked breeder ID in all advertisements and points of sale.
- **Debarking/persistent barking:** Retain the last-resort safeguard, require evidence of behavioural assessment and structured positive training prior to considering surgery, and prohibit aversive collars in behaviour plans.

AVA's Overarching Principles (context for recommendations)

- Animals are sentient and have intrinsic value; humans owe them a duty of care to protect their physical and psychological welfare.
- Welfare regulation should emphasise positive experiences and the avoidance of fear, pain and distress.
- Education and enforceable standards are both essential. Clear, outcome-focused requirements minimise ambiguity for keepers and inspectors.
- Regulation must remain behaviour-based (not breed-based) for public safety and animal welfare.



Structured Feedback by Code Section (with suggested drafting)

How to read this submission: "Support" = AVA supports the clause/section as drafted. **"Support with ..."** = AVA supports the clause/section and recommends targeted changes. Headings mirror the Draft Code. Where we suggest precise wording, it appears under "Suggested drafting". Where we propose moving a clause from Standard to Guideline (or vice versa), we explain the welfare/enforcement rationale.

Introduction / Purpose / Welfare Framework / Objectives / Compliance / Structure / Relations to other Codes

Support. The Draft's alignment with the Five Domains and statutory duty-of-care framework is contemporary and appropriate.

Suggested drafting (add to Purpose or Welfare Framework):

 Best-practice husbandry includes positive-reinforcement training and the avoidance of aversive methods and devices that inflict pain, fear or distress.

Definitions

Support with minor clarifications. Add:

- Sterilisation/desexing (umbrella term): A general term referring to procedures that prevent reproduction. For the purposes of this Code, the following sub-categories apply.
 - Permanent surgical sterilisation gonad-removing: Castration (males) and ovariohysterectomy/ovariectomy (females). Prevents reproduction and mating; typically reduces many hormone-mediated behaviours (e.g. roaming/wandering, mounting, urine-marking in males).
 - Permanent surgical sterilisation gonad-sparing: Vasectomy (males) and ovarysparing spay / hysterectomy (females). Prevents reproduction but does not reliably prevent mating and does not reliably reduce hormone-mediated behaviours; animals remain hormonally intact.
 - Temporary fertility suppression: Deslorelin (Suprelorin®) implants or other time-limited methods that suppress fertility for a period. Reversible; does not constitute permanent sterilisation.
 - Interpretation note (legal requirements): Where legislation requires a dog to be desexed/sterilised, this submission interprets compliance as permanent surgical gonad-removing procedures (castration; ovariohysterectomy/ovariectomy), unless legislation explicitly provides otherwise. Gonad-sparing procedures and temporary



fertility suppression do not satisfy a legal requirement for permanent sterilisation.

- **Positive-reinforcement training:** Reward-based training that reinforces desired behaviours without the use of pain, fear or startle.
- Aversive device: Any device designed to inflict pain, fear, startle or discomfort to suppress behaviour (e.g. electronic, prong/pinch, choke/check chain used to choke, ultrasound emitting collars, citronella/air-blast collars).
- **Sensitive period (puppies):** Approximately three to twelve weeks (may extend to fourteen to sixteen weeks depending on breed/individual).
- **Board / boarding:** Care of a dog by a person other than the owner, whether commercial (boarding/day-care) or non-commercial (in-home/pet sitters, family/friends).

1. Responsible Ownership

1.1 General

Support. Strengthen education messaging (veterinary-led guidance on nutrition, vaccination/parasites, behaviour and socialisation) to reduce nuisance and relinquishment.

Suggested drafting (Standard):

• Keepers must provide food, water, exercise, housing, hygiene, health care and enrichment that are suitable and sufficient for the individual dog's needs (age, breed/type, health and environment).

Suggested drafting (Guideline):

 Owners should seek veterinary advice on preventative health, nutrition and behaviour, including early socialisation and positive-reinforcement training, to reduce future behavioural problems and relinquishment risk.

1.2 Registration & 1.3 Identification

Support with best-practice workflow. Retain lifetime registration and mandatory microchipping. Add a scan-and-update workflow to keep registries accurate.

Suggested drafting (Standards):

- Where a collar is unsuitable (e.g. due to brachycephalic conformation, tracheal injury or medical reasons), a labelled, well-fitted harness providing effective control and identification is acceptable.
- All dogs residing in the ACT must be registered with the ACT Government and have their microchip and ownership details lodged with one of the four national, non-government



microchip registries to ensure rapid identification, reunification, and authorisation for treatment.

Microchip registry details must be kept current at all times, including at transfer of ownership. The ACT Government's dog registration database is not a microchip registry. The NSW and SA government registries are unsuitable for dogs residing outside those States due to access restrictions.

In line with AS 5019:2025 Electronic animal identification - Radiofrequency methods (ISO 11785:1996, MOD):

- Required registry information must be submitted electronically to a registry authorised in the animal's State or Territory within two business days of implantation.
- o The implantation fee must include lifetime registration on the selected registry.
- Transponders should be sold to implanters already linked to a lifetime listing on a registry approved for use in the animal's State or Territory.

Suggested drafting (Guidelines):

 Dogs should be scanned for a microchip at intake/admission (e.g. shelters, pounds, veterinary clinics) and at each veterinary visit (including annual health checks) to ensure details are upto-date.

Note: it is the owners responsibility to update the database, not the vet clinic, pound or shelter

Only devices compliant with relevant Australian Standards (AS 5018:2025 and AS 5019:2025) should be implanted; implantation should be conducted by a veterinarian.

1.4 Desexing/Sterilisation

Support with clinical discretion and owner education. Keep the statutory requirement to desex by six months unless exempted. Recognise that timing/method (including gonad-sparing) are clinical decisions guided by evidence.

Suggested drafting (Guidelines):

- Veterinarians should advise owners on individualised timing and method of sterilisation based on current evidence and the animal's breed, size, health and living circumstances (including recognised gonad-sparing procedures where appropriate).
- A veterinarian may certify delayed desexing beyond six months (e.g. twelve to twenty-four months) where clinically appropriate for the individual and consistent with legal requirements.
- Temporary contraception (e.g. deslorelin/Suprelorin® implants) does not satisfy any legal requirement for permanent sterilisation.



1.5 Training and Socialisation

Strengthen to reflect best practice and avoid harm.

Suggested drafting (Standard):

 Aversive training devices that inflict pain, fear, startle or discomfort (including electronic collars, prong/pinch collars, choke/check chains used to choke, citronella and air-blast collars) must not be used.

Suggested drafting (Guidelines):

- Training should be positive-reinforcement based and delivered by suitably qualified, force-free practitioners.
- Punishment/"balanced" methods are less effective and increase anxiety and behavioural risk and increase risk for aggressive behaviours or other negative behavioural outcomes such as avoidance.
- Use generic language such as low-fear handling/minimising fear rather than proprietary terms.

1.6 Socialisation of Puppies

Strengthen clarity and practicality.

Suggested drafting (Standard):

Puppies must be safely socialised during the sensitive period. This must include regular,
positive exposure to a range of people, animals, environments, and everyday stimuli.
 Socialisation must protect the puppy's physical, medical, and emotional welfare, including only
interacting with healthy, appropriately vaccinated dogs and being monitored to avoid fear or
distress.

Suggested drafting (Guidelines):

- The sensitive period for puppies is approximately three to twelve weeks (may extend to fourteen to sixteen weeks). Structured, positive socialisation and habituation should commence with breeders and continue with new owners.
- Prior to full vaccination, socialisation should occur in low-risk environments (e.g. indoors, suitably qualified/accredited puppy classes; contact with healthy, vaccinated dogs). Allow the puppy to withdraw when anxious; resume gradually.
- Socialisation requires positive or neutral exposures to novel stimuli; exposure alone (especially if frightening) risks worsening fear.



1.7 Control and Supervision

Support. Emphasise effective control and early behavioural referral; avoid punishment.

Suggested drafting (Guidelines):

- Handlers are responsible for maintaining effective control at all times, including when using retractable leads; be aware of hazards (e.g. long leads wrapping around legs/fingers, dogs running into danger).
- For brachycephalic dogs or where a collar is medically unsuitable, a well-fitted harness that provides effective control is preferred.
- Dogs displaying fear, anxiety or aggression should be assessed early by a veterinarian/behaviour professional; aversive methods are contraindicated (see §1.5).

1.8 Cleaning up after your dog & 1.9 Keeping multiple dogs

Support with practical clarity.

Suggested drafting (Standards/Guidelines):

- Faeces must be disposed of safely (sealed bag to an appropriate bin or taken home for disposal) especially where public bins are scarce.
- Licences for keeping more than the permitted number of dogs should be obtained from ACT Domestic Animal Services (DAS).
- Compatibility should consider medical and behavioural factors. Assessments are not static compatibility can change over time due to the dogs' experiences, ageing, health and pain
 status, and other external factors. Ongoing observation is required, and intervention may be
 necessary. Seek veterinary and/or behavioural advice where aggression, anxiety, or other
 compatibility issues occur.

1.10 Persistent Barking / Debarking

Support with behavioural pathway clarity. Keep debarking as a last resort; set a clear clinical pathway.

Suggested drafting (Guideline):

• Excessive barking can indicate stress, pain, poor welfare, unmet needs or inadequate enrichment. Owners and regulators should address underlying causes through management, environment, training and veterinary care. Debarking reduces noise but does not resolve the underlying motivation or behaviour, and may mask welfare problems.

Suggested drafting (Standard):

Before bark-reduction surgery is considered, the owner must provide evidence of:



- (a) a veterinary behavioural assessment;
- (b) a documented positive-reinforcement training, enrichment, and management plan which may include appropriate veterinary care and medication of at least six weeks under veterinary supervision; and
- (c) failure of all reasonable interventions.

2. Nutrition

Support. Add water guidance, diet selection advice and dental care notes.

Suggested drafting (Guidelines):

- Owners should ensure continuous access to fresh water, adjusted for the dog's needs, diet
 and environment, using clean, spill-resistant containers placed so access cannot be blocked;
 check and refresh at least twice daily. Dogs on wet diets may drink less than dogs on dry diets.
- Dogs have specific nutritional needs most easily met by complete and balanced commercial diets chosen for life stage, breed/size and health (e.g. weight control, dental care).
 Prescription diets should be used under veterinary guidance. Feed to maintain a lean body condition; manufacturer guides are starting points only.
- Some grain-free formulations have been associated with nutritional deficiencies and dilated cardiomyopathy (DCM); seek veterinary advice when selecting diets.
- For large/deep-chested breeds at risk of gastric dilatation-volvulus (bloat), avoid feeding
 around exercise/excitement; feed two or more meals per day; slow-feeder bowls may help
 some dogs.
- During late pregnancy and lactation, energy needs increase; use a complete, balanced puppy diet under veterinary advice.
- Daily preventative dental care (tooth-brushing, VOHC-cretified diets/chews/additives) is recommended; avoid hard objects (including bones) due to fracture risk.

3. Environment and Housing

3.1 General (including temperature thresholds)

Support with targeted risk management. Retain <5 °C/>30 °C triggers; add a short heat/cold plan for at-risk dogs (brachycephalics, geriatrics, neonates, medically compromised dogs).

Suggested drafting (Guideline):

• For dogs at elevated risk of heat or cold stress (e.g. brachycephalic breeds, geriatrics), owners should implement a simple heat/cold-stress plan (shade, cooling/insulation, ventilation, altered exercise times, constant water access).



- Define "accommodation" (yard, house, run/pen, crate) and prefer observable, outcome-based wording over terms such as "relaxed" or "adequate."
- Recognise that behavioural signs (including distress) can be context-dependent and influenced by medical issues.
- Include specific risk notes for brachycephalic and obese dogs in hot/cold conditions.

3.2 Companionship & 'Human contact: three hours'

Retain intent; refine enforceability. Keep daily, meaningful human interaction as a Standard; move the "three hours" to a Guideline or adopt outcomes-based wording.

Suggested drafting (Standard):

• Dogs must receive daily, meaningful human interaction, environmental enrichment, and opportunities for rest and play consistent with age, breed and health.

Suggested drafting (Guidelines):

- As a guide, most companion dogs benefit from multiple periods of human interaction across the day, totalling several hours, alongside independent rest and sleep.
- In multi-species households, provide prey species (e.g. rabbits, guinea pigs) opportunities to avoid dog-related stress (e.g. scent/sound barriers, separate zones, retreat spaces). Educate owners on species-specific fear signs.

3.3 Tethering

Strengthen as temporary only; align safety details.

Suggested drafting (Standards):

- Tethering must be temporary only and closely supervised; provide alternative secure confinement for routine management.
- Puppies under four months must not be tethered.
- A tether point must provide a minimum three-metre radius (six-metre run), be free of entanglement and hanging hazards, and provide continuous access to water, shade and shelter.

3.4 Sleeping areas & 3.5 Outdoor enclosures

Support with clarity on size and seasonal needs; ensure compatible co-housing.



4. Exercise

Support. Add nuance for life-stage/breed limits and fear-based cases.

Suggested drafting (Guideline):

- Exercise plans should consider age, breed/size, health and temperament; enrichment (e.g. scenting, puzzle-feeders, training games) complements physical exercise. Replace "scared" with "anxious" and "obey commands" with "respond to cues".
- Provide or reference ACT Government information on the locations and conditions for on- and off-leash areas. Dogs should not use off-leash areas until they are socially mature enough to cope with multiple unfamiliar dogs.

5. Hygiene

Support. Emphasise safe use of disinfectants and parasite controls per label/veterinary advice.

6. Health Care

6.1 Prevention of Disease

Support. Encourage vaccination and parasite-control plans; avoid raw offal unless it has been frozen at -18 °C for a minimum of 6–9 hours, which has been found to effectively kill all protoscoleces present in hydatid liquids.; reinforce travel-related parasite prevention (e.g. paralysis ticks on the east coast).

6.2 Disease and III Health

Support with observable indicators.

Suggested drafting (Standards/Guidelines):

- Do not rely solely on the animal's "usual" behaviour as a health indicator, as this may reflect
 underlying anxiety, stress, or other abnormal states that the owner has not recognised.
 Monitor appetite, activity, toileting, and social interaction against species-typical healthy
 behaviour, and seek veterinary assessment where concerns arise.
- Define halitosis (offensive breath odour often indicating dental disease and commonly associated with pain and suffering).



7. Transport

7.1 Vehicles / 7.2 Cages & Containers / 7.3 Food, Water & Exercise / 7.4 Medications / 7.5 International Travel

Support with hyperthermia alert and medication caution.

Suggested drafting (Standard – Vehicles 7.1):

 Animals must not be left unattended in vehicles where there is a foreseeable risk of heat stress, noting that internal temperatures can rise rapidly to lethal levels even in mild conditions and with windows partly open.

Suggested drafting (Guideline – Medications 7.4):

- Medication (e.g. anxiolytics) for transport should only be used under veterinary direction after pre-travel assessment.
- Sedation (air travel). Under the IATA Live Animals Regulations, sedation/tranquillisation of
 dogs is not recommended. In exceptional cases, and only under veterinary direction, sedation
 may be used; the drug name, time, and route of administration must be recorded and clearly
 marked on the container, and accompany the shipment documents. Owners should prioritise
 behavioural conditioning and veterinary behaviour plans; check the operating airline's policy,
 as some carriers prohibit sedation entirely.

8. Breeding

Strengthen to prevent heritable harm and improve early-life welfare.

Suggested drafting (Standards):

- Pre-breeding veterinary screening: Breeding animals must be fit for breeding and screened for heritable disorders relevant to the breed/type (e.g. BOAS, vertebral malformations in brachycephalics, hip/elbow dysplasia, eye conditions), using an accepted protocol where available. Records must be retained.
- Health-based selection: Animals displaying extreme conformations that compromise breathing, thermoregulation, locomotion, vision, skin or ear health, or whelping must not be used for breeding. Breeding selection must prioritise functional health and welfare, and breed standards alone are insufficient to assure welfare.
- Clinically significant disease: Animals with clinically significant disease that would compromise their welfare or that of offspring must not be bred.
- Early-life care (birth to eight weeks): Breeders must implement structured socialisation and habituation appropriate to age (positive/neutral exposures, gentle handling, enrichment) and provide written guidance to new owners to continue this safely through the sensitive period.



- **Rehoming age:** Puppies must not be rehomed before eight weeks of age and must be microchipped and recorded in accordance with §1.3.
- Record-keeping & traceability: Each puppy's microchip record must link to the breeder's
 identifier. Where microchip registries do not currently store breeder information, traceability
 should be achieved by requiring that all advertisements include both the puppy's individual
 microchip number(s) and the breeder's current ACT (or other State/Territory) breeding licence
 or registration number. Breeders must retain records of matings, litters, health screening
 results, and veterinary clearances, and make these available for inspection by the relevant
 authority.

Suggested drafting (Guidelines):

- Conformational improvement: Consider evidence-based improvement programs for extreme brachycephalics (e.g. muzzle-to-skull ratio criteria; vertebral screening or validated genetic tests where available).
- Shows and awards: Encourage show/awards criteria that prioritise functional health and welfare over extreme features.

9. Unwanted Dogs & 10. Lost Dogs

Support with veterinary leadership and scanning workflow.

Suggested drafting (Guideline):

• A person who finds a dog should take it to a veterinarian, animal shelter or Domestic Animal Services (DAS) so it can be scanned for a microchip and the owner contacted. A microchip number alone is generally not actionable by the public.

Note: AVA suggests requiring immediate scanning on intake (strays/surrenders) and repeat scanning before transfer; uphold the seven-day statutory hold for strays (where applicable). Promote owner education to prevent repeat escapes (escape-proof fencing, enrichment, behaviour plans).

11. Additional Responsibilities

11.1 Dangerous Dogs

Support. Retain a behaviour-based approach (not breed-based), with muzzling, signage and strict control measures where required. Encourage behavioural assessment/training under veterinary guidance rather than punitive methods.



• In **S11.1.4**, emphasise clarity by emboldening "must only."

11.2 Attacks on Stock / 11.3 Security Dogs / 11.4 Assistance Dogs

Support. Emphasise secure confinement of working dogs when not in use; confirm that assistance dogs have public access rights and must still meet welfare requirements. Manage security dogs under dangerous-dog controls due to elevated public-safety risk.

12. Euthanasia and humane killing

Support with decision-making guidance.

Terminology note:

• Use **euthanasia** for killing in the animal's best interest (to relieve suffering); use **humane killing** for other lawful reasons.

Suggested drafting (Guideline):

- Euthanasia decisions should follow a quality-of-life and welfare-risk assessment under veterinary guidance, and aim to prevent or end intractable suffering.
- Where a Standard mirrors existing S12.2, clarify that a veterinarian must be engaged to perform the procedure.

Implementation, Education and Review

- Education & outreach: Support a government-led public education programme (co-badged with veterinary/welfare stakeholders) on heat risk, enrichment, socialisation and positive-reinforcement training.
- **Inspectorate guidance:** Provide concise enforcement notes on key standards (e.g. tethering, training devices, temperature, transport) with photo examples where helpful.
- **Transition:** Where new prohibitions are introduced (e.g. training devices), provide a reasonable transition period and education before penalties.

Review: Commit to a twenty-four-month post-implementation review to incorporate new evidence and stakeholder feedback.



Contact

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