

DATE 25 September 2023

Supplementary Questions

- 1. Some witnesses have argued that the restrictions on animals travelling on public transport in NSW are an additional barrier to people being able to access veterinary services. Do you agree this is a barrier, and would you like to see reform to allow animals on public transport across NSW?**

The available evidence supports the position that the inability to transport animals on public transport is a barrier to accessing veterinary care. The 2018 Access to Veterinary Care report undertaken in the USA, found that not having a way to get an animal to the vet was reported by 11 – 15% of respondents. Similarly, approximately 15% of the clients assisted by RSPCA through the Access to Vet Care Program, last financial year, requested transport assistance in addition to the support for the veterinary costs.

RSPCA NSW would like to see reform to allow animals on public transport in NSW.

- 2. Your submission mentions a number of different programs that the RSPCA offers to assist people to access veterinary care – however, you are unable to keep up with demand. Would you like to see more Government funding for ‘access to veterinary’ care programs offered by RSPCA and other charitable organisations? If so, what benefits would this funding bring and if so, how much funding would you ask for?**

RSPCA NSW would like to see more government funding directed at access to veterinary care (AVC) programs. We believe this will assist veterinarians, in private practice, by reducing the psychological and, sometimes, financial burden of trying to negotiate acceptable outcomes for cost constrained clients and their animals. Veterinarians in NSW generally have large caseloads and long waiting times, so the ability to concentrate on clients with the means to pay for their services is in their interests.

Access to veterinary care programs are worthy of government contribution because they confer benefits to the whole community, not just animal owners. Accessible animal neutering programs are critical to addressing the overpopulation of cats and dogs in NSW. Roaming, unwanted or neglected animals are estimated to cost taxpayers \$43 million annually through council pound services. Additionally, they present public health risks through disease transmission and dog attacks. It is also expected that by reducing financial barriers to veterinary care, there will be a positive impact on the welfare of animals that would otherwise have been withheld care. RSPCA NSW investigates many thousands of complaints each year related to a failure to provide veterinary treatment to animals.

The AVC programs delivered by RSPCA NSW have demonstrated benefits to animals, their owners and to reducing shelter populations. If funding was increased, these benefits could be magnified.

Table 1 summarises the deliverables which would be achievable in the short to medium term following funding. These programs will immediately be able to deliver results. In summary, an annual recurrent contribution of approximately \$7.2 million would enable an estimated 18,780 clients, and their animals, to be assisted each year.

Table 2 provides medium to long term deliverables following the proposed funding. It is proposed that with annual funding of approximately \$5million, 14,500 clients could be assisted, following a once off infrastructure grant of \$16.2 million.

Explanations of programs are provided under the tables. They provide clarity on why some of the programs in table 1 are necessary to enable program 10, in table 2. Alternatively additional funding would be required to staff program 10.

Table 1: Phase 1 proposal

Program	Funding (annual recurrent)	Output (annual)
1. Access to Veterinary Care RSPCA Sydney Clinic (discounted and free veterinary care to eligible clients/animals including aged care, domestic and family violence and homelessness programs).	\$1.9 million	a. Employment of 3 veterinarians, 5 nurses and 1 administrative staff member for access to veterinary care work. b. Veterinary care for the animals of 3,600 clients at RSPCA Sydney veterinary clinic (cost of care, materials, medications, consumables etc).
2. Access to Veterinary Care RSPCA Hunter Clinic	\$1.9 million	a. Employment of 3 veterinarians, 5 nurses and one administrative staff member for access to veterinary care work. b. Veterinary care for the animals of 3,600 clients at RSPCA Hunter veterinary clinic (cost of care, materials, medications, consumables etc).
3. Access to Veterinary Care RSPCA Broken Hill Clinic	\$650,000	a. Employment of an access to veterinary care veterinarian and two nurses b. Veterinary care for the animals of 1,000 clients in the Broken Hill region.
4. Pet Emergency Treatment Fund (financial support for eligible clients of non-RSPCA veterinary clinics in NSW)	\$500,000	a. Veterinary care for 1,500 clients/animals across NSW
5. RSPCA NSW Community Outreach Programs (Veterinary advice, examination and core	\$680,000	a. 1,440 animals in regional, remote and disadvantaged communities provided desexing, vaccination, microchipping.

veterinary services in regional and remote communities and areas of need in Sydney)		<ul style="list-style-type: none"> b. 8 Indigenous Community Companion Animal Health Programs in regional and remote areas without veterinary services c. 8 additional Community Animal Welfare Schemes (CAWS) in regional NSW run through local veterinary services d. RSPCA NSW vet sent to local vet clinics to assist with desexing and enhance local veterinary capacity, when required.
6. AVC Animal Transport service	\$160,000	<ul style="list-style-type: none"> a. Two animal transport officers to facilitate transport of animals for veterinary care at the Sydney and in the Hunter veterinary clinics.
7. Desexing services Western Sydney Spey Clinic	\$988,000	<ul style="list-style-type: none"> a. 3,600 animals desexed, vaccinated, microchipped. b. Spey clinic team of 2 vets, 4 nurses, 2 administrative staff. c. Average 3 days/week in Western Sydney. Deployed to regional desexing/community clinics 8 days/month
8. Telehealth service	\$250,000	<ul style="list-style-type: none"> a. Access to veterinary advice for 4,000 clients annually. b. Free on-line or telephone veterinary advice available 4 hours per day 6 days per week. c. Free behaviour hotline for animal behaviour advice. d. Use of telephone interpreting service where required.
9. Veterinary social worker	\$160,000	<ul style="list-style-type: none"> a. Employment of a social worker to support access to veterinary care clientele and staff. b. Certification of social worker as a veterinary social worker through the University of Tennessee Veterinary Social Work Certificate Program.
TOTAL	\$7.19million	18,780 clients assisted

Table 2 – Phase 2 proposal

Program	Funding	Output (annual)
10. Community Desexing clinics - Regional NSW	<ul style="list-style-type: none"> a. \$16.2million (single payment) b. \$1.2million (annual recurrent) c. \$360,000 (annual recurrent) 	<ul style="list-style-type: none"> a. Three regional vet clinic facilities for intensive desexing programs + community veterinary clinics as required (Illawarra, mid north coast, central west) regional NSW. b. Operational costs for three clinics to operate one week per month, initially. c. 4,500 animals desexed in regional NSW annually
11. Maximising AVC resources - RSPCA	\$3.4million (annual recurrent)	<ul style="list-style-type: none"> a. Redeployment of Sydney and Hunter veterinary staff from full fee paying

NSW veterinary team redeployment to 100% access to vet care private clientele.		veterinary work to AVC (approximately 30% workforce). b. Veterinary workforce and facilities to treat an additional 10,000 animals annually.
TOTAL	\$21.16 million (includes \$4.96 million annual recurrent)	14,500 clients assisted

Explanation

Phase 1

1. and 2. Access to Veterinary Care RSPCA Sydney/Hunter Clinics

The AVC programs provide a 35% discount on veterinary bills to eligible clients and multiple repayment methods. This substantial discount and ability to pay-off the account makes veterinary care accessible to these clients. Where animals are sick or injured to the extent that they require more costly investigation or treatment, and have a reasonable prognosis for recovery to a good quality of life, RSPCA NSW has provided fully subsidised veterinary care. The client is then asked to repay their bill incrementally in a way they feel is achievable with any recovered funds being reinvested into the program.

The average cost of the discount provided has been \$162/ client, and the average of the veterinary bills paid in full has been \$1,269/animal.

It is estimated that both the Sydney and Hunter veterinary clinics have the physical capacity to accommodate three additional veterinarians, requiring the assistance of six additional support staff, to undertake access to veterinary care services full time. One of the risks to this proposal is the potential challenge in recruiting veterinarians and nurses during the current shortage. Currently, both sites are fully recruited within the organisation's budget constraints. Based on recent interest, and retention rates, it is considered feasible to recruit these positions if current RSPCA vet and nurse remuneration rates are increased by approximately 10%. If there were difficulties recruiting to fill the proposed positions, RSPCA could ensure the funding is still successfully allocated to supporting animals and owners with barriers to accessing vet care by redirecting money to support clients at other veterinary clinics around NSW (see Program 4).

These proposed RSPCA NSW AVC teams could assist approximately 7,200 owners/animals in total across the two sites each year. The proposed funding allocation of \$2million per site is to cover the people and non-people costs associated with the care of these animals.

3. Access to Veterinary Care RSPCA Broken Hill Clinic

Recruitment remains the greatest challenge to expanding the veterinary services in the Broken Hill community, and necessitates a greater salary package to attract staff. The clinic is currently undergoing renovation to increase the capacity of the facility. The employment of an additional veterinarian and two veterinary nurses, at a cost of \$370,000 would accommodate the delivery of AVC services to 1,000 animals a year with a cost of treatment of approximately \$280,000.

4. Pet Emergency Treatment Fund

RSPCA NSW provides financial support for eligible clients of non-RSPCA veterinary clinics in NSW. The aim is to increase the reach of its access to veterinary care programs and to assist private veterinarians to resolve difficult situations for cost constrained owners and their animals.

Historically, there has been an average contribution required of \$333/animal. RSPCA is regularly contacted by clients and vets for this assistance. With no attempt to promote this program due to funding constraints, 150 clients were assisted by RSPCA NSW through this program in the last financial year. Based on the uptake of the AVC program across the two RSPCA locations (in excess of 1,000 clients in a year), we propose that there would be a very real need to support the veterinary costs of 1,500 clients' animals in locations around NSW in a year. This would also have meaningful impact on a number of vets around the state who would be enabled to assist these animals.

5. RSPCA NSW Community Outreach Programs

RSPCA Community Outreach Program are the drivers of community change. Outreach supports priority communities and prevents animal cruelty by providing core preventative veterinary services, resources and information that assist people to care for and value animals and strengthen the human-animal bond and keep companion animals at home. Our schemes offer a range of services including community education, subsidised desexing, microchipping, vaccination, and providing resources such as pet food, leads, cat carriers, and parasite prevention. These services are targeted to areas of need in Sydney and regional and remote areas of NSW. These services are generally run in conjunction with social housing services, human service providers, local councils and veterinary services.

Our Indigenous Community Companion Animal Health Program (ICCAHP) improves the health and safety of Aboriginal children and families in remote communities by improving the health and welfare of their companion animals. We provide veterinary services to communities who might otherwise not be able to access them. We also provide education relating to animal and human health and wellbeing and good pet ownership. Studies show that improvements in animal health and welfare can directly affect the health and welfare of humans. Humane dog population control also reduces the number of associated problems, such as the spread of disease from faeces, dog bites, excessive noise and stock attacks. The recurrent, annual government funding previously allocated to this program has not been renewed this financial year.

Through the addition of two employees to the outreach team, an outreach officer and an outreach veterinarian, funding of \$680,000 would allow for core preventative health services (vaccination, microchip, parasite control, neutering and health and behaviour advice) to be provided each year to 720 members of Indigenous communities at eight additional ICCAHP visits and 720 clients through eight additional Community Animal Welfare Schemes (CAWS) focused on regions of need in NSW. As the CAWS delivery often relies on private veterinary practices to deliver the RSPCA subsidised care, limitations have been experienced due to the current vet workforce shortages. The RSPCA employed outreach veterinarian could be deployed to regional practices to provide additional veterinary assistance at local vet clinics involved in CAWS. This is a model which has been successfully employed by RSPCA NSW previously whereby the local veterinarian receives the payment for the veterinary work undertaken (for example the desexing procedure) while RSPCA NSW provides the human resources to undertake the work. This capacity building assists regional vets and the local community.

6. AVC Animal Transport Service

The inability to transport an animal is a reported barrier to animal owners accessing veterinary care. Approximately 15% of RSPCA AVC clients required assistance transporting their pets to and from the RSPCA NSW veterinary hospitals. RSPCA NSW desexing programs have also had to assist clients to transport their cats to ensure they were able to proceed with the desexing procedures. If AVC funding was to be increased, an increased capacity would be required to assist clients with animal transportation. These transport officers could also deliver resources needed for veterinary visits, such as leads, harnesses and carry cages. The absence of these resources is another reported barrier to seeking veterinary care that could be simply addressed.

7. Desexing services Western Sydney Spey Clinic

Dog and cat desexing is a core preventative health measure which is essential for population management of cats and dogs in NSW. Finances are a barrier to people accessing desexing services, as are transportation and other logistical barriers, like sufficient resources (carriers, leads etc).

The availability of low cost/no cost desexing has the very real potential to reduce stray and roaming cats and the wildlife predation and public nuisance associated, reduce the burden and costs on pounds and shelters, reduce the incidence of animal hoarding and reduce the public health risks of roaming and straying dogs. The first draft recommendation of the OLG Rehoming Report is:

The NSW Government to establish an ongoing funding arrangement for a community cat program which councils can apply to and could be run in partnership with the RSPCA or a similar experienced body. This would be targeted to councils with the highest cat intakes. Councils would need to show that they can target the areas with the highest problems and to report on outcomes. The expected cost of a program that would reduce cat euthanasia by one third is \$2 million per year on average, initially run over a five year period. Councils would benefit financially from this through reduced pound intakes. However, rather than seeking co-funding from councils, this cost saving would allow councils to redirect resources into increasing adoption rates for remaining animals.

RSPCA NSW was a successful applicant for a 2022 Westinvest grant to construct a spey clinic in Western Sydney. To maximise the benefits of this acquisition, without impinging on other RSPCA NSW welfare veterinary services, a modest team of veterinarians, nurses and administrative staff is required to operate the clinic. The operational plan includes the employment of two veterinarians, four veterinary nurses and two administrative staff (\$600k) supported by veterinary and nursing volunteers to neuter on average 25 animals per day. Asset operating costs are estimated at \$100,000 annually. The non-people costs for microchipping, vaccinating and neutering animals is estimated at an average of \$80/animal.

Clients benefiting from the service would include cost constrained owners, rescue groups, council pounds and councils facilitating their own community desexing programs.

The proposal is for the Western Sydney Clinic to initially operate for three days per week, freeing up members of the team to travel to other areas of NSW to deliver much needed desexing programs.

8. Telehealth service

Barriers to accessing veterinary care include finances, transport, resources (cages and leads) and language barriers. As veterinary services contract through closure of clinics, distance has also become a significant barrier outside of major cities. A telehealth veterinary service could provide some alleviation of these issues by providing veterinary advice, suggesting over-the counter medications where appropriate and referral to partner veterinary practices where diagnostics or treatments are considered necessary. Clients may then tap into one of the other RSPCA NSW access

to veterinary care programs (e.g The Pet Emergency Treatment Program or RSPCA Access to Veterinary Care Program) where they are eligible and can not afford the necessary care.

Animal behavioural problems are a common cause of fracture to the human-animal bond and an indication of significant welfare compromise to an animal. There is an intimate relationship between the physical and psychological health of an animal and a comprehensive health care approach is critical to effectively addressing behavioural presentations. Veterinarians are frequently consulted for these issues, where an owner can afford to, but they are often lengthy consultations and are not in every vet's interest area or skill set. A telehealth service would be most impactful if it adopted a comprehensive health care approach with access to general practice veterinarians, behaviour vets and behaviour trainers.

Funding for this service should also encompass the use of telephone translation services to remove an additional barrier to vet care and support culturally and linguistically diverse pet owners.

9. Veterinary Social Worker

Despite the passion held by RSPCA NSW veterinarians for assisting the pets of disadvantaged people, the work is inherently at risk of causing significant emotional fatigue. Vulnerable members of our community seeking veterinary advice may be over-represented for a range of mental and physical health challenges and there is an ever present risk of encountering animal neglect or the intersecting issues of human and animal violence. In addition, the clients themselves will be experiencing the stress and potential grief associated with their pets' illness or death.

The University of Tennessee has identified the very real demand in this space to have professionals trained to support both the clients and the veterinary teams. The certification in veterinary social work is available on-line to postgraduates with a social sciences/psychology degree and includes a requirement to achieve competency in the areas of compassion fatigue and conflict management, the link between human and animal violence, animal assisted interventions and animal related grief and bereavement. There is an ethical responsibility to invest in the necessary expertise to support veterinary teams and animal owners when working with vulnerable members of our community.

Phase 2

10. Community/spey clinics – regional NSW

Regional NSW is experiencing some of the greatest impacts from the veterinary industry shortage. As veterinarians across the state are overwhelmed with case load, and several clinics have shut down, RSPCA has not consistently been able to find clinics able to support community desexing programs despite having funding to allocate to the cost of the procedures.

It is proposed that three clinic facilities are set up in north, south and western NSW to facilitate this work and to expand, as needed by the community and the local vets, to provide a regular community clinic to consult and treat the animals of cost constrained clients, referred by local veterinarians. Clients could include cost constrained owners, rescue groups, council pounds and councils facilitating their own community desexing programs, pending consultation with local veterinarians.

Although there is a substantial initial outlay in establishing and fitting out three clinics, staffing costs are proposed to be initially covered by the veterinary teams employed in proposals 5 and 7. This would initially allow for approximately 5 days of operation at each regional site per month which would be sufficient to undertake impactful intensive desexing programs and accept referrals from local clinicians. This model addresses the issue of being unable to recruit vets to work in the country

as staff and volunteers from the RSPCA NSW network can be drawn upon to regular provide this service.

The costs associated with this proposal relate to one off costs of:

- Property and renovation - \$5million - \$6million per site
- Equipment - \$400,000 per site

Annual recurrent costs of:

- Asset operating expenditure \$200,000 per site annually
- Desexing non-people costs \$80/animal

11. Maximising AVC resources - RSPCA NSW veterinary team redeployment to 100% access to vet care private clientele.

It is estimated that RSPCA NSW Sydney and Hunter Veterinary practices could support the expansion of services by approximately three veterinarians (and support staff). The Hunter practice has recently completed an upgrade which has increased the footprint of the clinic to accommodate additional services. The Sydney practice is constrained for space. However, there remains some capacity which will increase with the opening of the Western Sydney Spey Clinic. The large number of desexing programs currently supported at the Yagoona site can be undertaken in the new spey clinic, freeing up surgical and procedural capacity at Yagoona.

It is also estimated that recruitment efforts could be successful to that extent (three vets at each site). However, neither the RSPCA NSW infrastructure in Sydney and Hunter, nor the ability to recruit veterinary staff in the current climate, would allow for growth of access to veterinary care programs beyond what is proposed in programs 1 – 10.

A way to address this would be the redeployment of staff and facilities from private full fee-paying work to access to vet care programs. The availability of facilities and human resources would immediately increase if existing RSPCA NSW veterinary staff ceased private full fee-paying work to commit to AVC clientele. Currently, the RSPCA Rutherford and Sydney veterinary clinics dedicate approximately 30% of staff time to private services to generate approximately \$3.4million. This revenue is critical to offsetting the cost of running the two veterinary clinics which run at a net operating deficit of approximately \$5million. If this loss of revenue was offset, it would justify the reallocation of staff time to free and discounted service delivery. By freeing up RSPCA vet teams to dedicate this time to access to vet care would make available an estimated additional 10,000 consults, surgeries and procedures across the two practices each year.