



Inquiry into veterinary workforce shortages in NSW

Public Hearing Questions on Notice and Supplementary Question

Response from the
Australian Veterinary Association Ltd

September 2023

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The Australian Veterinary Association (AVA)

The Australian Veterinary Association (AVA) is the national organisation representing veterinarians in Australia. Our members come from all fields within the veterinary profession. Clinical practitioners work with companion animals, horses, livestock, laboratory animals, aquatic animals, exotic animals and wildlife. Government veterinarians work with our animal health, public health, and biosecurity and quarantine systems while other members work in industry, education and research, veterinary laboratory/pathology services and teaching. Veterinary students are also members of the Association.

The AVA would like to thank the Inquiry Committee and extend our sincere appreciation for the opportunity to participate in the recent Public Hearing. It was a privilege to discuss the AVA's submission in depth, to shed light on the challenges presently confronting the veterinary profession, and to engage in meaningful dialogue about potential pathways to address these issues.

Please find below our response and insights pertaining to the questions on notice that were raised during the Public Hearing, as well as our considered answer to the supplementary question presented to the AVA by the Inquiry Committee.

We trust that the information supplied will be useful in aiding the Inquiry Committee's understanding and subsequent deliberations. The AVA remains committed to this essential and critically important inquiry and look forward to any further opportunities for engagement.

Australian Veterinary Association Response to Committee Questions

After-hours

Transcript – Question on Notice:

The Hon. SARAH MITCHELL: In recommendation 7, you talk about a think tank to develop an after-hours model. I am interested if you've got any—even anecdotal—examples of places where you know that that's worked well. I was speaking to a vet recently from a regional community that has a vet nurse to take the call. This may be very common. They sort of triage as best they can so as not to disturb the vet on call unless it's absolutely necessary, which, again, may be very common practice. I'm happy for you to take this on notice, but are there any kind of standouts that you know amongst colleagues that would be something to feed into some kind of review on what best practice looks like in after-hour models of care?

CRISTY SECOMBE: Sure. There are examples of regional centres doing after-hours in a way that is sustainable for all of the veterinarians in the town, and we can provide some examples of that.



Thank you for allowing us the opportunity to provide more detailed insights on best practice after-hours models of care. The veterinary profession in NSW is regulated to only accept an animal for veterinary care if they are available for ongoing care of the animal, or if not available, to make arrangements for another veterinarian to take over care of the animal. This requires the provision of care outside business hours. The regulations encourage veterinary practices who do not provide an afterhours service to have formal arrangements with those practices that do. Given the evidence provided, it is clear that while after-hours services are crucial, the current models present significant challenges, particularly in terms of practitioner well-being, financial viability, and consistent delivery of care.

Existing Arrangements and Challenges:

- **Urban Companion Animal Practice:** Urban settings typically benefit from larger emergency centres operating on shift-based models. However, here the challenge is the pressure on these emergency centres to meet demand and ensure efficient communication of clinical notes with GP practices. There are challenges with communication between emergency centres ensuring that clients can be redirected once capacity is met. Redirection of patients has been increasingly common with staff shortages but is problematic when multiple emergency centres are simultaneously redirecting patients.
- **Rural and Large Animal Practice:** In rural areas, veterinarians usually provide practice-specific on-call service for ongoing care and emergencies. The unpredictability and added workload can be burdensome, leading to physical and mental exhaustion of veterinarians.
- **Digital Technologies:** Existing fee for service telehealth triage services offer some potential relief for practices that do not have access to emergency centres. These services are funded by individual businesses in addition to provision of veterinarians to undertake afterhours duties. This added business cost can be difficult to accommodate for small veterinary businesses.
- **Impacts on veterinarians:** The demands of after-hours work have notable effects on mental well-being and job satisfaction. This has repercussions on recruitment and retention, and thereby, the consistent availability of services to the community.
- **Safety risks:** Veterinarians frequently work alone during after-hours, exposing them to potential risks to their health and safety. In regions with elevated crime rates and antisocial activities, these risks are magnified. Yet, the option of having a colleague accompany an individual veterinarian for after-hours visits is often not financially feasible or readily available.

After hours models that are working well

- **Emergency centres servicing urban companion animal practice.** This model has improved the sustainability of companion animal veterinary practice, and from this perspective generally works well. However, there are challenges as outlined above.
- **Shared after-hours models encompassing large and small animals are very uncommon with rare examples of success.**
 - In Coffs Harbour veterinary practices have a successful example of shared after-hours through their *Coffs District Combined Veterinary After-hours service protocol* arrangement. The protocol has clear policies, pricing structures, and procedures for moving patient records. The arrangements have been working well for about 7 years however requires a lot of good will, trust, and fair collaboration to work well.

Considerations and Potential After-Hours Models for Best Practice:

- **Remote Telehealth Triage Services:** This service would evaluate the severity of the situation and guide whether a physical examination by a veterinarian is required. This could significantly reduce the load on veterinarians. Ideally this would be a publicly funded triage service, similar to the free to access and government funded [healthdirect](#). This would relieve the added



financial burden on individual practices. Review of legislation is required to ensure there is legislative compliance and unintended consequences of any changes minimised.

- **Enhanced Security and Compensation:** Ensuring that at least two staff members attend to call-outs, along with adequate compensation, security measures like panic buttons, and clear post-call-out rest policies, could reduce safety risks and improve job satisfaction.
- **Rostering Adjustments:** Practices should ensure that vets are not rostered for the following day after an on-call night to meet best practice and comply with WHS requirements. However, this will necessitate the hiring of additional staff since it removes a vet from the roster for the entire day. This adjustment could have a financial impact on businesses that adopt this model.
- **Shared After-Hours Protocols:** As the veterinary profession is predominantly privately funded these arrangements require significant good will, collaboration and trust between businesses. This is challenging to achieve when the profession is expected to operate in the free market and thus there is competition between practices for clients.

All of these examples require financial resourcing to plan for and then execute. Financial resources that many practices, particularly rural and regional ones don't have available.

The Inquiry's initiative to fund a think tank dedicated to developing a sustainable after-hours model is timely and essential. By amalgamating the best elements from existing models, learning from challenges, and innovating new solutions, there's potential to create a framework that ensures animal welfare without compromising the well-being of veterinary professionals.

AVA Submission Extract (Pg39 & 40)

Background

In NSW the profession is regulated to only accept an animal for veterinary care if they are available for ongoing care of the animal or if not available, make arrangements for another veterinarian to take over care of the animal. This requires the provision of care outside business hours. The regulations encourage veterinary practices who do not provide an afterhours service to have formal arrangements with those practices that do.

The methods the profession has of managing this vary depending on the species and geography. In the case of urban companion animal practice, it is common practice to have large emergency centres that service the community outside business hours, rather than individual practices. Emergency centres tend to operate on a shift basis model to provide their service. Some veterinarians work in emergency centres in addition to their primary workplace.

Generally, in large animal practice and in rural areas, veterinary practices provide an "on call" service for management of ongoing care of animals and emergency animal care. This is usually managed by the same team that work during the day and is an additional workload for veterinarians.

When viewing the profession in its entirety, 38% of the profession participate in afterhours (on call), with around 40% of those doing >30hours per week on call and spending 1-10 hours per week seeing patients. Equine veterinarians had a much higher rate of participation in afterhours, 89% participated in after-hours rosters and spent around 48 hours/ week "on call".

"It also takes a huge toll on the vets in terms of working hours. It is not unheard of for a vet to be on call and see multiple cases in a night, only to front up and work a fully booked day in clinic the next day. It is usually not financially viable for rural practice owners to employ a sole emergency hours vet and not have them do regular hours work, as the afterhours calls can be so variable in number and thus income for the practice. It is also problematic that if the on-call vet does have a large after-hours caseload, there is difficulties in re-scheduling the day's routine consultations and surgeries."

The advancement of digital technologies has led to the development of afterhours triage services to provide advice to clients as to if veterinary attention is required, a service similar to that provided by healthdirect. In contrast to healthdirect, this service is not publicly funded, and the cost is borne by each individual business. In addition, the existing regulatory framework can make full utilisation of these services challenging.

Impacts



The requirement to provide an afterhours service has a negative impact on working conditions and level of satisfaction for many veterinarians. Sixty six percent of veterinarians would prefer to do less or no "on call" work. Being "on call," as well as being poorly remunerated for it, was consistently ranked as one of the least satisfying aspects of equine work and people who left the equine sector were more dissatisfied with after-hours work than people who stayed in the equine sector.

After hours has also been raised as a factor that contributes to poor mental health, particularly the requirement to be available 24/7 with no ability to rest and protect wellbeing.

The requirement to participate in afterhours rosters without adequate time off and remuneration is a factor that impacts recruitment and retention. Anecdotally, recruitment and retention are very difficult in practices with afterhours commitments and small veterinary teams due to the requirement of afterhours. The Award that veterinarians fall under remunerates afterhours very poorly and there is little incentive to participate.

The accepted model for managing the provision of afterhours has not been sustainable for veterinary teams. A mechanism veterinary practices are using to manage this is to reduce the provision of afterhours veterinary service. This has arisen out of sheer necessity to safeguard (and comply with employment regulations) the health and wellbeing of their employees. The consequence is an overall reduction in veterinary services available to the community outside business hours which negatively impacts animal welfare (refer to TOR j)

Emergency centres also find it challenging to employ enough staff to keep pace with demand. This places significant stress on these centres, who many practices rely on to provide an afterhours service, and overnight care of their patients. Veterinarian:Patient and Nurse:Patient ratios in these centres can be suboptimal when staff are not available, resulting in the risk of compromised patient care and increased burnout of staff. The transfer of clinical notes back to GP practices following treatment at emergency centres can also be significantly delayed, to the point where the patient may arrive for follow up care at the GP practice prior to the receipt of essential clinical notes from the afterhours practice.

"Like all emergency facilities we have been unable to employ enough veterinarians to cater for the client demand. We have had many nights we have had to close (not offer a service) as we have not been able to fill the shift. I avoided this for a couple of years by filling the shifts myself, and working 20 to 24 hours shifts, but have stopped doing this."

Recommendation 7: The NSW Government provide resources to fund a think tank to develop an afterhours model that is sustainable for the profession and allows veterinary services to be delivered to the NSW community in both urban and rural areas 24/7.

Mental Health Funding

Transcript – Question on Notice:

The Hon. EMMA HURST: You also mention the THRIVE mental health program in your submission. We have talked a lot about mental health throughout this inquiry. I think you call on the New South Wales Government to fund this program. I'm wondering how much it would cost and what benefit funding that program would have overall?

CRISTY SECOMBE: At the moment we've costed this out at \$3 million over four years to deliver all of those things I just spoke to in that previous answer: programs that we've got underway in development, existing programs we have that we would like to expand out. That's the ballpark figure.

The Hon. EMMA HURST: I think your submission goes into what can be achieved with that \$3 million, doesn't it? Or maybe I can put that to you on notice?

CRISTY SECOMBE: Can we take that on notice?

The Hon. EMMA HURST: Yes, just to give a bit more detail. You're talking about \$3 million. What do you get out of those dollars? That would be really useful, because it is something we've talked about a lot over the last couple of days.

In light of the increasing awareness and evidence around the elevated risks of mental health challenges, including suicide, faced by professionals in the veterinary sector, the Australian Veterinary Association (AVA) has introduced the wellness initiative called 'THRIVE'. If funded by the government,



this program aims to not only support veterinarians and veterinary staff in leading satisfying, prosperous, and healthy careers but also to address systemic challenges and create a culture of mental well-being throughout the profession.

Specifically, the AVA proposes a commitment of \$3.3 million over a period of 4 years to support the THRIVE initiative. Here are the programs and services that would be provided with this funding:

- Broadening the Cultivating Safe Teams Initiative: Expansion of this pilot program would ensure that every veterinary workplace in Australia receives training focused on psychological health and safety, fostering a culture of well-being.
- Industry-Specific Training: Financial support to deliver tailored training around managing challenging client interactions, which can be significant stressors in the veterinary field.
- Research and Data Collection:
 - Investment in research that gathers more accurate data on suicide statistics within the profession, as well as broader research into industry-specific psychosocial hazards.
 - Industry Health Checks: Conducting periodic surveys, possibly annual or biennial, to assess the overall health of the veterinary industry and measure the impact of wellness initiatives.
- Whole of Career Pathways Mentoring (peer to peer): Providing mentorship throughout the career of veterinary professionals, from undergraduate students to retirees.
- Addressing Psychosocial Hazards: Developing a practical program tailored for veterinary businesses to assess and manage their specific psychosocial risks.
- Mental Health Training & Support: Specialised mental health training for veterinarians, veterinary nurses, and practice managers, including programs to improving workplace culture and support individuals for example the 24/7 Counselling Service: Expansion of the dedicated counselling service.
- Veterinary-Focused Mental Health Education: Creating campaigns and resources, led by the veterinary profession, to bolster veterinarian well-being, enhance career satisfaction, and promote the sustainability of the profession.

In essence, the funding of THRIVE would pave the way for a holistic approach to mental well-being in the veterinary sector, creating resilient professionals and ensuring the long-term health of the industry.

In appendix A the AVA have provided some estimated costs grouped into the identified areas in which the government could commit funding.

AVA Submission Extract (Pg 36)

The best-case scenario for those with mental health challenges and burn out is that they receive the help they need and put into place mechanisms to safeguard their health and welfare whilst still being able to continue to contribute to the profession. The worst-case scenario for those with mental health challenges is death by suicide. The evidence suggests risk of death by suicide is increased in the veterinary profession compared to the general population. The profession as a whole is working hard in this area and the sole focus of awareness and protection of individuals has now moved to also encapsulate prevention and promotion of good workplace practices to improve these issues.

Recommendation 3: The NSW Government commit funding to AVA's wellness initiative, THRIVE to support veterinarians and veterinary staff to lead satisfying, prosperous and healthy careers.

Investigation and Prosecution of Laypersons

Transcript – Question on Notice:

The Hon. CAMERON MURPHY: The other area I want to focus on, something that was quite alarming for me that came up yesterday in evidence, was that we heard there are laypeople out there practising, doing what would otherwise be veterinary services: things like performing dental work on horses and other types of operations. The issue for me is at the moment we have a number of different authorised charitable



institutions, government departments, police that are responsible for dealing with matters in terms of animal cruelty. Do you think that there is, if I call it this, a prosecution gap where things like that are just falling between the gap because there's no one body, like the police, that's responsible for investigating and dealing with that? Maybe the RSPCA says, "We focus on this area," the police say, "That's an RSPCA problem," the Department of Primary Industries says, "We don't want to get involved." I wondered whether you had anything to say about that?

CRISTY SECOMBE: As we put in our submission, we are concerned about who is looking into those people who are performing acts of veterinary medicine where they shouldn't be. It is a real gap that is very frustrating for the profession, because we know that there are people performing acts of veterinary medicine and it's very difficult for those to be investigated and followed through. Reform around—

The Hon. CAMERON MURPHY: Sorry to interrupt you, but why do you say it is difficult to investigate?

Appointed charitable institutions have the power to seize papers, go onto premises. I understand these people are advertising their services as an alternative to vets.

ZACHARY LEDERHOSE: I think the challenge is that, as you have identified, there is a prosecution gap here. Under the Prevention of Cruelty to Animals Act the enforcement agencies, all of them, are incentivised to only pursue the cases where they can get a successful prosecution. So you need to be doing some quite egregious acts to be successfully prosecuted. The other challenge that you have is you're in breach of the vet practice Act if you're doing this for personal profit. If you're helping out a mate and you stitch up his horse or you yank a tooth or you convince that person not to pursue you under any civil litigation, then you're in a bit of a pickle. The other challenge is resourcing the vet practice Act. Yes, they are the people who are given the powers under that framework but they simply don't have the resources to go out and investigate.

The Hon. CAMERON MURPHY: Who should take responsibility for that, in your view?

ZACHARY LEDERHOSE: The question comes down to the gap between three different pieces of legislation. Each group has a huge amount of responsibility at the moment, so it's hard to identify which group needs to take it on. That's something that we would like the Parliament to—

CRISTY SECOMBE: And I guess it needs to be resourced.

The Hon. CAMERON MURPHY: It's hard to fix if there is no real suggestion. Should one agency, like the police or DPI, be given the power to deal with everything and the responsibility to pursue those people?

CRISTY SECOMBE: Can we take that question on notice and come back to you?

Unauthorised acts of veterinary science by laypersons are governed by several pieces of legislation, leading to multiple agencies overseeing various facets of these illicit activities. A shared challenge across these agencies is the limited resources and impetus to enforce the associated legislations.

The illegal use and acquisition of S4 drugs, including general anaesthetics, by laypersons is a significant concern in New South Wales. Such actions not only breach the Poisons and Therapeutic Goods Act but also raise broader concerns about animal welfare and the unauthorised practice of veterinary science. In these instances, NSW Health inspectors are charged with investigating potential breaches under the Act. Simultaneously, the suppliers of the S4 drugs – which could include veterinarians or pharmacists – would also come under scrutiny. Veterinarians implicated in such practices would be referred to the Veterinary Practitioners Board.

Adding to the complexity, if the affected animal is a food-producing species, potential breaches of the Stock Medicines Act or the Biosecurity Act may come into play, falling under the purview of the NSW Department of Primary Industries (DPI).

However, it is evident that the legal landscape governing these matters is intricate and at times, inconsistent. For example, while DPI administers the Prevention of Cruelty to Animals Act (POCTA), it lacks inspectorial or prosecutorial powers under these Acts. Instead, these responsibilities lie with organisations like the RSPCA, Animal Welfare League, NSW Police, and Greyhound Welfare and Integrity Commission, as delineated in POCTA.

While the Veterinary Practices Act (VPA) overseen by the NSW Veterinary Practice Board (VPB) grants the authority to appoint inspectors for veterinary hospital compliance, they lack the necessary resources to deploy inspectors to address violations by laypersons. Currently, the VPB addresses reported breaches by laypersons by issuing cease and desist letters.



There's a clear connection between VPA and POCTA, given that the latter refers to the Restricted Acts of Veterinary Science. Yet, certain ambiguities and exemptions in the VPA – like the allowance for laypersons, animal owners, and veterinary students under specific circumstances to conduct restricted acts of veterinary science – create confusion and potential risks. Furthermore, the need for a comprehensive review of definitions, particularly around what qualifies as a restricted act of veterinary science and exemptions, is paramount to ensure clarity for all stakeholders involved. Moreover, POCTA should explicitly state that unauthorised peoples performing restricted acts of veterinary science is considered an act of cruelty.

A potential solution involves a systematic review and updating of the VPA to reflect modern veterinary practices and societal expectations, revisiting the exemptions as to who can perform restricted acts of veterinary science, providing enhanced training and resources for POCTA inspectors, and increasing penalties for breaches to serve as a stronger deterrent against violations.

For organisations like the RSPCA, competing objectives and resource constraints can impede effective oversight and prosecution. This is further complicated by the involvement of multiple agencies like DPI, NSW Health, VPB, and the police, each approaching the issue from a distinct perspective. This fragmentation often leads to breaches not being investigated and contributes to a lack of clarity on jurisdictional responsibilities.

The effectiveness of the law is not just about its existence but also its consistent implementation and effective enforcement. Besides the considerable animal welfare issues, veterinarians are particularly concerned, feeling that there isn't a robust system to address illegal and cruel practices by laypeople, leading to frustration and career dissatisfaction.

One solution to the aforementioned problem is to designate the NSW Police as the primary authority for inspecting and prosecuting these breaches and acts of cruelty committed by laypersons. The NSW Police already possess established processes and systems for investigation, enforcement, and prosecution in partnership with other agencies. For this to be effective, a specialised animal welfare division with specifically trained officers should be implemented within the police force.

In essence, to safeguard animals, protect consumers, and the public interest, there's an urgent need for a consolidated, well-resourced, and clear legislative and enforcement framework in New South Wales. If the committee requires further information, it is suggested they engage the expertise of the NSW Veterinary Practitioners Board for their perspective.

AVA Submission Extract (Pg 41 - 42)

Breaches of restricted acts of veterinary sciences

The legislation includes a set of 'restricted acts of veterinary science'. This details those procedures that only veterinarians (or regulated veterinary paraprofessionals) are able to perform. This listing is underpinned by a need to maintain animal health and welfare, and to maintain public health through the restricted use of controlled substances. Certain procedures simply cannot be safely performed by someone who is not a registered veterinarian – for a lay person to perform them will lead to unnecessary harm to the animal and potentially death. Further, there are a set of procedures that can be performed by a suitably trained non-veterinarian, but risks associated with the procedure mean that a veterinarian needs to oversee it and be available to deal with negative issues that may arise quickly. There are also procedures that inherently involve the use of certain dangerous drugs, whose use needs to be controlled. As such, veterinary involvement is crucial.

With these situations there are links with both Animal Welfare and Poisons and Therapeutic Goods legislation. While the Veterinary Practitioners Board (VPB) may be the most appropriate body to enforce breaches in many cases, there are situations in which it may be more effective for enforcement to occur through other agencies. Currently the mechanisms to enforce consequences for breaches of restricted acts of veterinary science by non-regulated providers are limited and ineffective. In particular, where a non-veterinarian is undertaking a restricted act of veterinary science, animal welfare enforcement



agencies may be better placed to secure a successful prosecution. In the current environment, due to resourcing and historically light sentencing, welfare agencies have only been able to prosecute the most egregious offences under the act, leaving many animals unprotected. Consideration needs to be given to how this would be enabled, however, one step would be to have 'restricted acts of veterinary science' performed by an unauthorised person to be included in the definition of cruelty under the Prevention of Cruelty to Animals Act.

Childcare

Inquiry Committee Supplementary question to the AVA:

There was a suggestion made at the Inquiry that the veterinary profession should fund and facilitate childcare for veterinarians, in order to make it easier for veterinarians with children to work. Is this something you believe that individuals veterinary practices, or the profession at large, would be financially or practically able to provide? If not, could such a program be funded by Government and would that benefit the veterinary industry?

While the proposal for the veterinary profession to facilitate childcare for veterinarians is commendable, it is challenging for the veterinary profession to directly provide childcare services. This not only pertains to veterinarians but also the whole veterinary team. Requiring the profession to fund or facilitate childcare for veterinarians and their teams isn't straightforward and is fraught with challenges with multiple faceted issues, including:

- **Financial implications:** It's essential to recognise that many private veterinary practices are already grappling with financial pressures and will find it impossible add a business cost of childcare into their operating model.
- **Childcare within Veterinary Practices:** Within veterinary practices, there have been sporadic considerations to incorporate childcare facilities, such as establishing a creche or devising child-friendly zones tailored for situations where children can stay safely while their parents work. However, these initiatives are not without challenges. The requirements for suitable facilities, adequate staffing, and adherence to rigorous childcare regulatory standards pose significant hurdles. Moreover, the intrinsic nature of veterinary practices raises substantial health and safety concerns for children. The environment teems with potential hazards—from witnessing distressing emergencies and exposure to zoonotic threats to encountering aggressive animals and hazards like medications and sharp instruments.
- **Afterhours Service:** The nature of veterinary work hours often does not align with typical childcare operating hours. While facilitating childcare can address some issues, it doesn't provide a solution for veterinarians offering after-hours services. The expectation of a 24/7 childcare services is not feasible. An industry-wide shift accommodating flexible working hours and legislative amendments for after-hours services is crucial to support parents adequately.

A comprehensive approach, inclusive of both industry and government supported initiatives, is essential to effectively address the challenges and facilitate access to childcare for veterinary professionals. Proposed initiatives that could be considered by Government include:

- **Priority Childcare Placements:** A potential pathway could be to include essential workers, like veterinarians, priority access to childcare placements.
- **Tax Incentives:** Offering tax breaks and other mechanisms to support veterinarians in obtaining childcare is an approach worthy of further investigation to address some of the challenges.
- **Childcare in Rural Areas:** Government initiatives to enhance childcare facilities in rural areas would significantly benefit veterinarians working in these regions.
- **Government Intervention:** While government funding can act as a catalyst for veterinarians to re-join the workforce, it's imperative to understand that monetary aid alone is insufficient. Ideally, a portion of such funding should be channelled towards training and supporting the veterinary sector to assist parents to re-enter the profession, for example the [AVA Return to Work program](#).



AVA Submission Extract (Pg 30 & 45)

***Lack of flexibility in working conditions** – The veterinary profession has traditionally been a fulltime undertaking, and even now the part time participation rate of the veterinary workforce is less than the general work force. 8, 16 Increased flexibility requires resourcing to achieve and this has not been prioritised in the existing veterinary practice business model. The lack of flexibility in working conditions is also a significant deterrent for parents to come back to work after maternity or paternity leave. The significant costs of childcare compared with the proportionally lower pay of veterinarians (as demonstrated above) means many decide working is not financially viable. As the majority of new veterinary graduates are female, improving workplace flexibility is more imperative at this time than ever.*

...

Given that the rural practice model has now morphed into predominantly companion animal practice, the most common model in urban areas, there are numerous challenges in rural and regional areas to recruit and retain veterinary personnel, as well as succession planning, that are not experienced to the same degree in urban areas, despite the same types of veterinarians required. These include:

- *Limited access to provision of vital community services such as such as healthcare, housing, childcare, and education opportunities for veterinary team members.*

“I know firsthand the difficulties of finding childcare, and how imperative this is for me to be able to practice, as well as contribute to society, as a single working mother. I initially registered for childcare when I was just 12 weeks pregnant, over a year later I considered myself very lucky to be offered three days a week, and after some ‘string pulling’ managed to get four days. I am now practicing in a different state and again, it took almost a year to get four days per week and feel lucky I can get family care for day five. Being a single parent also significantly impacts upon my ability to do after hours and emergency work. This impacted my decision to change from full time mixed practice work, to primarily working as a district veterinarian which affords me regular, ‘day-care friendly’ working hours.”

Contact

Dr Cristy Secombe
Head of Veterinary and Public Affairs
Australian Veterinary Association

Ms Liz Gemes
Senior Advocacy Officer
Australian Veterinary Association



Appendix A: Mental Health Funding Estimated Costings Over 4 Years

Estimate costing ex GST

24/7 Counselling Service - outsourced	
Provision to include face-to-face debriefing sessions in workplaces for critical incidents	\$315,000.00
Research - outsourced	
Collect accurate data on suicide statistics in the veterinary profession; veterinarians and paraprofessionals.	\$50,000.00
Fully funded annual survey to "health check" the veterinary industry and to attempt to measure the impact of our industry-led initiatives Researching and addressing industry-specific psychosocial hazards. (Prevent Promote Protect)	\$165,000.00
Staff resourcing over 4 years	\$152,356.50
Whole of career pathways mentoring - outsourced	
Expansion of the pilot program 100 mentoring pairs (veterinarians helping veterinarians to deal with common day issues that arise in every day practice, such as veterinary board investigations, negative client interactions, and ethical dilemmas).	\$500,000.00
Staff resourcing over 4 years	\$177,255.00
Cultivating Safe Teams - beyond the AVA pilot program	
Psychological health and safety awareness training sessions for all individuals working in the veterinary profession. Estimated participation of 50% of veterinary businesses	\$1,080,000.00
Staff resource to manage program (1FTE) over 4 years and travel costs	\$378,000.00
Veterinary business program - outsourced	
Practical program for veterinary businesses to work through and manage their business-specific psychosocial risks.	\$285,000.00
Staff resourcing over 4 years to manage stakeholders	\$53,176.50
Mental health first aid for vets	
\$360/ person for 50% of NSW vets (~2000)	\$72,000.00
Staff resource to manage stakeholders	\$30,000.00
TOTAL FUNDING ESTIMATE	\$3,257,788.00