

Submission
No 146

**INQUIRY INTO VETERINARY WORKFORCE SHORTAGE
IN NEW SOUTH WALES**

Name: Name suppressed

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Partially
Confidential

Inquiry into the veterinary workforce shortage in New South Wales

TERMS OF REFERENCE

Comments relating to specific Terms of Reference:

- (a) the shortage of veterinarians across the profession, including clinical (small and large animal practice), government, academia, research, industry and pathology

There is considerable subjective data but little available objective data outlining shortages across the various sectors of the veterinary profession. Before determining how to address the 'shortage', analysable objective data should be collected to identify the existence or otherwise of shortages in each of the identified sectors, where the shortages exist and, if available, the reason behind the perceived shortage. Past events such as previous government legislation and policies (both Federal and State) affecting public service employment and structure (changes from practical veterinary specialists in animal industries to policy development), funding models for university veterinary education and associated changes (for example the demise of independent faculty of veterinary science and its incorporation into the faculty of science with associated cultural changes and poorer understanding of the needs for veterinary science education and the costs involved) have created the background to the current situation. This means there is no easy fix. Any changes in veterinary education will have a 10 – 15 year lead in before changes are noted. The recently released report on university veterinary education has highlighted the current shortfalls (Veterinary Schools of Australia and New Zealand report – Rethinking Veterinary education July 2023.) Short, mid and long term plans need to be considered and priorities developed.

The apparent shortage of veterinary services in rural and regional areas can have effects on the animal clients in these areas but also could affect trade and market access for animal based export commodities and reduced surveillance required for disease incursions. The effects of these shortages could therefore be community, or in the worst case scenarios, state and nation wide. Addressing shortages in these areas may be a priority. Europe, UK, Canada and the United States have developed plans to address veterinary shortages in their rural jurisdictions.

- (b) the challenges in maintaining a sustainable veterinary workforce, including recruitment and retention rates
- (c) the burn-out and mental health challenges facing the veterinary profession
- (d) the role of, and challenges affecting, veterinary nurses

Shortages of veterinary nursing staff can restrict the operating hours of veterinary practices if provision of appropriate care for hospitalised animals cannot be assured. Veterinary nurses and technicians are valuable members of the veterinary team and play more than a supporting role for veterinarians. These individuals are part of the profession and training and career progression should be formally recognised.

- (e) the role of, and challenges affecting, overseas trained veterinarians
- (f) the arrangements and impacts of providing after-hour veterinary services
- (g) the impact of the current legislative and regulatory framework on veterinarians

The current Veterinary Practices Act 2003 has been scheduled to undergo a staged repeal. The progress of this process is unknown.

The Restricted Acts of Veterinary Science were reviewed by a Veterinary Ministerial Advisory Committee and a report provided to the Minister of Agriculture in 2022. The recommendations addressed current issues related to current shortfalls with definitions of Restricted Acts and improved oversight of laypersons who may be unlawfully conducting these procedures. This has been an ongoing area of concern for veterinarians. Enforcement of this legislation on laypersons carrying out unlawful procedures is also a concern as the Veterinary Practitioners Board does not have the resources to do this effectively. It would be more effective if this enforcement was part of the Prevention of Cruelty to Animals Act.

Review of the current VP Act would allow the legislation and regulations to be more flexible to changes occurring in the veterinary profession. At present the legislation restricts the Veterinary Practitioners Board from making policies and decisions in the area of veterinarian mental and physical health. It also restricts the implementation of advances in procedures such as those used in the NSW Health sector which has improved services to clients (For

example telehealth, e-prescriptions.) and advances in technology that can provide remote diagnosis and increase the capacity of veterinarians to service clients in rural and remote areas (for example, Vetchip, satellite technology).

The complaint investigation and resolution process is very rigid in implementation due to the current legislation/registration and can be a cause of mental distress for the affected veterinarians. The risk of having a complaint raised has been identified as a significant stressor. A review of this area of the VPA should be undertaken.

Registration of veterinary nurses and paraveterinary staff by the Veterinary Practitioners Board, legislated through the VPA would allow the setting of professional standards for this group. At present many procedures carried out by these individuals require direct supervision of the veterinarian which places both an increased workload and responsibility of the veterinarian. In countries such as the UK where registration occurs, the work and responsibility within the veterinary practice is more spread across the veterinary practice personnel than what currently occurs in NSW.

Review of the restrictions on mobile veterinary hospitals could allow veterinary services to be better directed to areas of need, especially during periods of emergency or to provide specialist services such as wildlife care.

Veterinarians have been included in a number of Acts as a means to ensure animal welfare for animal related activities. Unfortunately regulatory impact and financial impact studies have not examined the feasibility of including veterinarians as a requirement. There appears to be an assumption that they will be available in all circumstances. For example, the Acts covering the racing industries require veterinary presence at every meeting. If the governing body employs veterinarians for this purpose, no problem arises. However, if local veterinarians are required, usually in regional and rural areas, then a problem arises if a veterinarian is not available to attend due to practice workload and the attendance is on a voluntary basis. In these situations, the veterinarian is deemed to be on call, which may not provide the best animal welfare outcome if an accident occurs. The fault is the unrealistic expectation of the original legislation.

The Companion Animal Act imposes irretrievable costs and potential risks to veterinary practice biosecurity by including veterinary practices as authorised premises that can hold stray animals if the veterinarian is an authorised person who is able to access the Companion Animal Register to search for owner details on stray animals. Provision of housing facilities to hold animals and the staff to look after these animals until they can be picked up or delivered to a

council pound can affect services the practices can offer their clients, especially during busy periods.

There is an assumption that veterinarians may carry out the requirements of certain legislation for free. No recompense is referred to in either the Act, Regulation or associated documents. It is unrealistic to expect a private business to carry out pro-bono activities which are not directly related to its business.

- (h) the particular challenges facing the veterinary profession and the shortage of veterinarians in regional, rural and remote New South Wales

Veterinary practices in regional, rural and remote areas rely upon the economic status of the local community and provision of essential services such as mobile service, internet, health, education, child care, policing, transport (provision of require consumables on a timely basis). Their requirements and many costs would be similar to human health hospital clinics in the same areas. Unlike their human equivalents, their services and equipment are not government subsidised.

Financial constraints of their rural clients, who can be impacted by drought, flood, storm etc would affect the client base, profitability, staffing and provision of services by veterinary practices. Animal health becomes a lower priority when income becomes restricted during difficult environments or when the value of stock declines.

After hour services are usually carried out by the practice – unlike the urban areas, there is unlikely access to an emergency care facility or likelihood of sharing these services with another nearby practice (unless the practice is part of a management group such as APIAM). Working in a practice that has a high after hours requirement may be considered an unattractive workplace, especially if field work is required such as calvings, prolapses etc, requiring physical strength and there are difficult climatic conditions (cold, wet, windy, muddy) and limited infrastructure (lack of or poorly maintained yards, races, head bails, crushes). Lack of technical support or restricted access to mentor advice when required are other disadvantages for veterinarians in these areas. The decline of practical experience in large animal procedures offered during university training can affect both the confidence and competence of recent graduates.

The gaps in veterinary services in regional, rural and remote areas are not well defined in NSW. The western division was historically serviced by veterinary officers employed by the Department of Agriculture for disease investigations

since the number of rural premises was considered insufficient for private veterinary services. Local Land Services now provide veterinary services for landholders for herd/flock disease investigations in these areas. Services to companion and pet animals and production animal clients are expected to be provided by private veterinary practices, if they exist.

The majority of evidence for veterinary shortages have been qualitative (observations) or based on survey information. Data on where gaps in veterinary services in NSW rural and regional areas occur could be generated through deidentified data of veterinary practices on the VPB registration database. This could also provide a better understanding of the difficulties that may be experienced by both small and large animal practices in these areas.

The United States have developed maps to identify areas within each States where veterinary shortages occur. This data is used to direct funding support for affect veterinary practices. It also identified the public service infrastructure required by veterinary businesses in these areas. (S Truchet, N Mauhe and M Herve (2017). Veterinary Shortage Areas:what determines the location of new graduates. Rev Agric Food Environ Stud 98: 255-282 <https://doi.org/10.1007/s41130-018-0066-9>)

In the Greater Sydney area, there is a shortage in veterinary practices with expertise in production animals (sheep, goats, cattle, pigs, alpaca, poultry). Peri-urban areas have been identified as a biosecurity risk, especially those with access to ports and airports, with significant populations of Non English Speaking and lifestyle block livestock owners. A number of publications regarding the risks of peri-urban livestock have been authored by N Schembri. NSW DPI.

- (i) the role played by veterinarians in providing care to lost, stray and homeless animals, injured wildlife and during emergency situations

Animal welfare is a major tenet of a veterinarian's workload and is enshrined in the Code of Conduct. The treatment of injured and ill animals with no known ownership is expected when affected animals are presented to a veterinary practice.

Unfortunately the cost and inconvenience of this service has been unrealistically ignored in the drafting of legislation which transfers responsibility and costs from an agency to the veterinarian. For example, the Companion Animals Act Section 7 declared veterinary practices which are authorised persons for accessing information of the Companion Animal

Register (ie details of owner of a stray animal) to also be an authorised premises which can hold stray animals for up to 72 hours before they must be taken to a council owned facility. Although stray animals are a responsibility of council and they can charge the animal's owner for maintenance whilst the animal is impounded, veterinary practices are not liable for cost recovery for care or treatment (unless there is an arrangement with council). Some councils direct finders of stray animals (injured and uninjured) to veterinary practices, especially after council pound opening hours, weekends or public holidays. The veterinary practice, unlike the general public, are expected to deliver the stray animal to impounding facilities by some councils. The 'rules of engagement' between local councils and veterinary practices within their area varies widely between local government areas. The NSW Division of the AVA has engaged with the Office of Local Government to address these issues but, as evidenced by 2 surveys of veterinary practices 5 years apart, after initial improvement and direct involvement by the previous Minister, the Hon Shelley Hancock, the situation has not improved for many veterinary practices.

The responsibility of wildlife comes under the Department of Environment (National Parks and Wildlife). Injured wildlife may be treated or euthanised by a veterinarian (if it is considered too cruel to be kept alive). The animal is then returned to a NPWS identified wildlife carer (even if submitted by a member of the public). NPWS has developed a code of conduct for the interaction between wildlife carers and veterinarians for the treatment of wildlife. This code identifies payment for treatment services. This code was developed to address previous adverse interactions when wildlife carers sought veterinary services.

Biosecurity is important when a wildlife case is presented as wild birds and wildlife may carry a range of zoonoses that expose veterinary practice staff to disease. Veterinary practices that provide treatment for wildlife should have personnel vaccinated against rabies if injured flying foxes are submitted and be aware of the range of diseases these animals may carry. Some wildlife require specialist treatment and handling eg raptors, which not all veterinary practices can provide.

Mobile veterinary hospitals with specialist experience in wildlife could assist in removing the burden of wildlife treatment for veterinary practices in an area or region. NSW presently has 2 fully equipped hospitals but their activity is currently limited by current VPA legislation.

- (j) the impact of the current veterinary shortage on animal welfare, including the impact on the economy, members of the public seeking veterinary care for animals, pounds and shelters, the animal agribusiness industry, companion animal breeders and others
- (k) current barriers to accessing veterinary care for members of the public, particularly those with lower incomes or who live in regional, rural and remote locations

The NSW RSPCA and Animal Welfare League control mobile veterinary hospitals which can provide subsidised veterinary services for lower income and disadvantaged persons in urban and regional/rural areas. There is interaction with local veterinary practices when these mobile units visit an area (prior notice and invitations issued).

The Office of Local Government has provided grants to local councils to enable subsidised desexing and vaccination for low income and disadvantaged persons. These schemes are sustainable for local private veterinary clinics if the program covers the gap between the subsidised cost to owners and the true cost to the veterinary practice.

- (l) strategies to support the current veterinary workforce, as well as ways to increase the number of practising veterinarians particularly in regional, rural and remote New South Wales
 1. Rural bonds or equivalent scheme – where education costs for persons applying to work in rural and regional areas post graduation are government subsidised. The bond covers employment in the rural and regional areas for 5 years. Selection criteria needs to be developed for applicants and infrastructure to support employment in rural areas. One downfall of this scheme would be persons withdrawing before completing the post-graduate bond or persons leaving on the cessation of the bond. However, if the bond was a private-public partnership (for example arrangement with a corporate veterinary practice or large veterinary practice with a presence in rural/regional area) it may have better success than a scheme which is primarily government funded and conducted. An arrangement including local government involvement could be considered, especially areas with large animal aggregation areas such as saleyards and abattoirs (potential community benefit for veterinary expertise within a LGA).
 2. Mentoring scheme for private veterinarians involving Local Land Services and/or public-private partnership arrangements between LLS/DPI diagnostic services and local veterinary practices.

3. Subsidized travel costs for veterinary property visits in rural and regional areas. Long distance travel can be expensive for both the veterinarian and the client. The impetus is to encourage veterinarians to visit farm, production, breeding and council facilities and for animal owners to request veterinary services.
4. Initiatives developed for health profession to address their workplace shortages by NSW Health Rural and Regional Strategic Plan – Building a sustainable health workforce for NSW.
5. HECS forgiveness for veterinarians working in rural and regional areas. The implementation of a scheme to encourage veterinary graduates to work in rural and regional areas needs careful assessment on how it may be implemented in NSW. The United States has implemented a similar approach with its Veterinary Medicine Loan Repayment Program. Private practice shortage areas are designated under this program. The status of veterinary services across the country has been assessed and an interactive map identifies counties within each State where current veterinary shortages occur. The program and some apparent pitfalls are described in the following working paper 'Where are the veterinary shortage areas anyway' Tong Wang, David A Hennessy and Annette O'Connor Working Paper 10-WP 513, Centre of Agricultural and Rural Development, Iowa State University. <https://www.researchgate.net/publication/46463777>

(m) strategies to improve access to veterinary care

(n) any other related matter.