

**Submission
No 152**

INQUIRY INTO VETERINARY WORKFORCE SHORTAGE IN NEW SOUTH WALES

Organisation: The Veterinary Nursing Research Group

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Response to the Inquiry into the veterinary workforce shortage in New South Wales

Terminology:

UK	Veterinary Nurse (VN) - Bachelor and Diploma level equivalent qualifications
USA	Veterinary Technician (VT) - Diploma level equivalent qualification Veterinary Technologist (VT) - Bachelor level equivalent qualification
Australia	Veterinary Nurse - AQF level 4 through to AQF level 7 qualifications Veterinary Technologist - AQF level 7 qualification
VN/VT	Used to be inclusive of both professional titles

The Veterinary Nursing Research Group welcomes the opportunity to contribute to the veterinary workforce shortage in New South Wales inquiry, particularly in response to TOR 1.d – The role of, and challenges affecting veterinary nurses. As Veterinary Nurses and/or educators in Veterinary Nursing/Veterinary Technology, we are committed to continued advocacy for the profession to enhance animal welfare outcomes and the larger veterinary sector.

The importance of operating veterinary practices with appropriate VN/VT to patient ratios has been highlighted in recent research investigating errors in a small animal intensive care unit. Here researchers have found that there is a substantial reduction in major care errors when ICU patient to VT ratios are maintained at ≤ 4 (Hayes et al, 2020). Whilst it is clear that VN/VTs are critical to upholding high standards of veterinary patient care, this workforce is leaving the veterinary sector due to what has been termed the "dissatisfaction crisis" (Rumple, 2021). In 2011, Michigan State University, College of Veterinary Medicine convened a national conference called "Creating the Future of Veterinary Technology—A National Dialogue"; and a common theme that emerged was that "VTs hit the ceiling of the profession relatively quickly, leading to career burnout" and the loss of highly skilled workers within an average of five to seven years (Chadderdon, Lloyd & Pazak, 2014). Whilst the importance of maintaining adequate VN/VT staffing levels is clear, and it is clear that the contributions of this group play heavily in providing modern veterinary medicine, the dissatisfaction crisis of VN/VTs is often overlooked as a contributing factor to the veterinary sector crisis.

A recent survey of the VN profession, by the Institute for Employment Studies on behalf of the Royal College of Veterinary Surgeons (RCVS) has shown that almost a quarter of respondents (total 4,993 respondents) were planning to leave the VN profession within 5 years (Survey of the Veterinary Nurse Profession, IES Report, 2019). This survey also found that almost 30% of VNs in their 30's plan to leave the profession (IES Report, 2019). This trend is evidenced in the statistics reported where there is an almost 50% reduction in the number of VNs aged 30 – 39 to VNs aged 40 – 49 (IES Report, 2019). Similarly, a demographic survey report from the National Association of Veterinary Technicians in

America (NAVTA) showed that of the 1,886 VT respondents, only a quarter have been in the veterinary field for more than 20 years, with a declining trend after 10 years of practice (NAVTA Demographic Survey, 2022). Sadly, the IES Report (2019) also found that more than 20% of respondents would not opt to become a VN if starting their career again and almost 30% were unsure. Of the respondents planning to leave the profession, pay was the most common reason (77%) followed by not feeling rewarded/valued (almost 60%) and dissatisfaction with career opportunities (over 40%) (IES Report, 2019). A recent investigation into factors associated with VN resignations found that career progression was the most frequently recorded reason for VNs resigning from companion animal veterinary practices in the UK (Schofield & Jacklin, 2023). Further to this, a study of VT graduates from the University of Queensland revealed that a lack of career advancement and lack of recognition by the relevant professions were some of the barriers to fostering career satisfaction (Clarke, Henning, Coleman & Schull, 2019).

Whilst there are certainly other contributing factors to the high attrition of VN/VTs (namely, compassion fatigue and burnout (NAVTA Demographic Survey, 2022) and poor work/life balance (IES Report, 2019)), studies from New Zealand found that VNs are trained in tasks they are not performing in clinical practice and this is impacting on their career satisfaction (Harvey and Cameron, 2019; Gates, Palleson-Putt & Sawicki, 2021). Interestingly, over 75% of the tasks identified in these studies are currently assessed as part of the day one competencies for the Australian nationally recognised Certificate IV in VN, and at least 80% in the existing HE VN/VT degrees available in Australia. The recent VN Industry Survey Report from the Veterinary Nursing Council of Australia (VNCA) (2021) found that whilst there was an increase in VN/VT skill utilisation, there are still described VNCA Day One Competency Standard tasks not performed by VN/VTs.

Preliminary findings from a study by Brown as presented at the Veterinary Business Branch of the NZVA (2022), identified several barriers to the utilisation of the allied veterinary professional (AVP) and trust of the AVP was highlighted as an emerging theme. Here, Brown goes on to suggest that amongst other issues, the lack of legislation and regulation of the AVP appears to be linked to the lack of trust in the AVP by veterinarians (Brown, 2022). We would like to note that Western Australia is also the only state in Australia where VNs must hold recognised qualifications and register with the state Veterinary Board to practice and are thus, expected to comply with the Act and Regulations, upholding standards of professional practice. The fact that this has yet to be considered in other Australian states is in direct contrast to the reported findings from the Performance of Veterinary Services Evaluation Report of Australia where the World Organisation for Animal Health recommended that Veterinary Boards develop registration procedures for veterinary paraprofessionals in accordance with the OIE Terrestrial Animals Health Code (OIE-PVS Evaluation Report of the Veterinary Services of Australia, 2015). With the exception of Western Australia, it cannot be guaranteed that VN/VTs working in clinical practice hold recognised qualifications, if any at all, and this is despite the continued support of mandatory registration from both the VN/VT and veterinary professional representative organisations:

The Veterinary Nurses Council of Australia (VNCA) states that they “will continue to pursue mandatory registration and protection of the term Veterinary Nurse after the launch of the AVNAT (Australian Veterinary Nurse and Technician) Registration Scheme” (Veterinary Nurses Council of Australia, 2023).

The Australian Veterinary Association (AVA) states that “veterinary nurses are an integral part of modern veterinary practice. The registration, quality training, and continuing professional development of veterinary nurses are essential components of practice” (Australian Veterinary Association, 2020).

It is clear that the underutilisation of VN/VTs in clinical practice not only reduces the job satisfaction of VN/VTs, it also increases the workload of veterinarians already experiencing high workloads. Like human nursing in medicine, the VN/VTs remit in clinical practice is wide and varied and absolutely vital to upholding high standards of patient care. In the US, the Institute of Medicine’s Future of Nursing report (2011) highlights that “nurses spend the greatest amount of time in delivering patient care as a profession” (IOM Report "The Future of Nursing: Leading Change, Advancing Health, 2010). The indicative roles of a VN as outlined in the Australian Animal Care and Veterinary Services Award (FairWork, 2020) include but are not limited to; basic animal care; grooming, feeding, cleaning and restraint as instructed; carrying out clinic routines; maintain clinic hygiene, carry out daily treatment of patients; assisting in stock control and clinic security; co-ordinating clinic admissions; providing veterinary nursing care and grief support to clients; applying radiographic routines and implement procedures; performing and record pathology procedures, assist with post mortem; preparing and provide support for surgical procedures; monitoring patient anaesthesia; performing post-operative procedures; nursing hospitalised animals, monitor clinical signs, communicate with owners; providing animal care in pain situations; carrying out medical nursing routines; preparing surgery schedules, implement surgery preparations; cleaning maintain and store theatre instruments, equipment and supplies; and/or carrying out post-operative theatre routines.

As it is clear from the duties above, the VN/VT profession, like human nursing, is patient focused and few would disagree that VN/VTs spend a majority of their time being directly responsible for the needs of their patients. Interestingly, the IOM report goes on to state that nurses “have valuable insights and unique abilities to contribute as partners with other health care professionals and should be fully engaged with other health professionals, and assume leadership roles in redesigning care” (IOM Report, The Future of Nursing, 2010). Whilst human healthcare has recognised the importance of inclusive strategies and collaborative healthcare, little has been done in Australia to support the advancement of the VN/VT profession through similar strategies. In the UK, the RCVS Workforce Action Plan, an inclusive strategy to identify and address challenges faced by the veterinary team have outlined several ambitions including supporting the professional development and promotion of VNs through leadership (RCVS, Workforce Action Plan, 2022). It is interesting to note that whilst VN/VTs contribute approximately 42% of professionals to the Australian veterinary sector (AVBC Sustainable Practice Committee, Options for Registration of Veterinary Nurses, 2022), outside of Western Australia, the VN/VT profession has never been consistently represented on any Australian Veterinary regulatory Board. Indeed, this has been noted in South Australia where, almost in direct contrast to contemporary collaborative healthcare approaches, the recent revisions to the Veterinary Practice Act (2003) and subsequent restructuring of the Veterinary Services Regulatory Board of South Australia (as presented in the Veterinary Services Bill 2023) will ultimately inhibit representation of VN/VTs currently working in practice. Here we would like to point out that successful framework exists for inclusive representation in Australia with the Veterinary Practice Act (2021) of Western Australia. Western Australia is the first

and only state or territory that currently recognises veterinary nursing as a profession with legislative and regulatory framework to underpin the work of VNs and the first and only state or territory to appoint a VN seat to the state Veterinary Board.

Internationally, initiatives aiming to address the challenges facing the veterinary workforce are inclusive of the VN/VT profession. The RCVS Workforce Action Plan follows the RCVS Royal Charter which recognised veterinary nursing as a profession and the VN Futures Project. The VN Futures Project and Action Plan (a joint initiative from the RCVS and the British Veterinary Nursing Association and running parallel to the Vet Futures Project) has outlined the importance of VN retention in practice and aims to address this through a number of initiatives including reviewing the Veterinary Surgeons Act to “bolster and clarify the role of VNs” (VN Futures Report, 2016). In the US, the American Veterinary Medical Association (AVMA) has also committed to creating a Committee on Advancing VTs. And according to a recent media release, the AVMA Council on Veterinary Service have initiated their scheduled review of the AVMA Model Veterinary Practice Act and a main focus is to expand the scope of practice for VTs (Larkin, 2023).

The fact that similar strategies have yet to be deployed in Australia is disappointing, therefore we propose the following recommendations to address some of the key challenges facing the VN/VT profession:

1. Mandatory registration of VN/VTs working in clinical practice
2. Title protection so that only qualified VN/VTs can operate as professionals
3. Update legislation to clarify the work of VN/VTs and improve utilisation of VN/VTs in clinical practice
4. Implement a unified, collaborative veterinary healthcare approach inclusive of the VN/VT profession enabling VN/VTs to represent on leadership boards and councils

It is clear that the poor retention of this highly skilled workforce is impacting an industry already in crisis as it perpetually fills vacant VN/VT positions and trains junior VN/VT staff only to have them leave practice within 10 years, taking their skills, knowledge and leadership with them. The significance of this cycle has been recognised with veterinary councils internationally working to empower the VN/VT profession with legislative reform, title protection and mandatory registration. Outside of Western Australia, no other state or territory has underpinned the work of VN/VTs in legislation, nor has mandatory registration been secured despite widespread support for this from both leading professional organisations. We would like to point out that as the industry largely operates at a ratio of two VN/VTs to one veterinarian (VNCA Industry Survey Report 2021), strategies that aim to address the veterinary workforce shortage by increasing and retaining veterinary graduates and qualified veterinarians respectively, must coincide with initiatives to increase VN/VT graduates and retain this workforce.

In summary, legislative reform must be implemented as first steps towards a commitment to improve, clarify and stabilise the role of VN/VTs in the interprofessional veterinary team. It is clear that current Veterinary Service/Practice legislation, fails to align to contemporary practices and meet the standards

expected of users as it fails to ensure that all members of the veterinary team are bound to standards of professional responsibility in accordance with appropriate legislation and registration. Further to legislation and regulation of the VN/VT profession, strategies to improve veterinary services and any workforce challenges must be collaborative, encompassing the perspectives of the entire veterinary team. Without this, proposed solutions will fail to address the needs of a contemporary, inter-professional team. Any long-term, lasting solutions will require a collaborative approach with the VN/VT profession as it is clear that as we unpack the remit of VN/VTs in clinical practice, the contributions of this group have played heavily in shaping modern veterinary medicine and must continue to do so. Therefore, we request respectfully, that the VN/VT profession not be overlooked once more as we tackle the veterinary workforce shortage and that instead, the voices of this profession are consulted so that VN/VTs too can contribute to initiatives that will work to stabilise the larger veterinary workforce.

Yours sincerely,

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