

**Submission
No 169**

INQUIRY INTO VETERINARY WORKFORCE SHORTAGE IN NEW SOUTH WALES

Organisation: Wildlife Health Australia

Date Received: 20 July 2023

19 July 2023

Dear Mr Banasiak,

**WILDLIFE HEALTH AUSTRALIA SUBMISSION FOR THE INQUIRY INTO THE VETERINARY
WORKFORCE SHORTAGE IN NEW SOUTH WALES 2023 (PC4).**

Thank you for the providing Wildlife Health Australia (WHA) with the opportunity to provide a submission for the inquiry into the veterinary workforce shortage in New South Wales 2023.

WHA is the coordinating body for wildlife health in Australia. Our network includes more than 45 agencies and organisations and over 800 wildlife health stakeholders including representatives from federal, state and territory conservation, agriculture and human health agencies and industries, universities, zoos, private practitioners, wildlife carer groups, hunters and fishers, and diagnostic laboratory services.

In this submission we detail factors likely contributing to veterinary workforce shortages in New South Wales in the context of veterinary professionals working with wildlife, and predominantly those in a clinical setting. We also provide comment on the crucial role veterinarians have in the delivery of wildlife care and rehabilitation as well as the government programs of wildlife management and emergency response.

Thank you again for the opportunity to comment and good luck with this important work.

Best wishes,

Tiggy Grillo AM

Chief Operating Officer, Wildlife Health Australia

WHA SUBMISSION FOR THE INQUIRY INTO THE VETERINARY WORKFORCE SHORTAGE IN NEW SOUTH WALES 2023 (PC4)

SUMMARY

Australia's wildlife is recognised for its unique biodiversity as well as being an important aspect of our cultural identity and a valuable national asset (Hundloe 2021).

When veterinarians treat wildlife presented to them by the public or a wildlife rehabilitator, the expectation generally placed on the veterinarian is that this treatment occurs free of charge. Wildlife Health Australia (WHA) recognises that in addition to increasing wildlife caseloads and the associated financial costs, a lack of wildlife-specific training and psychosocial stressors are major obstacles to effective veterinary engagement with wildlife. These factors likely contribute to veterinary workforce shortages due to their impacts on staff recruitment and retention (TOR 1b), veterinarian burn-out and mental health (TOR 1c), animal welfare (TOR 1j) and access to veterinary care (TOR 1k).

SUBMISSION

Wildlife has become recognised as an integral component of the World Organisation of Animal Health's core work programme, highlighting the importance of the role played by veterinarians for wildlife health in Australia and across the globe.

As experts in the evaluation, examination, treatment and rehabilitation of animals, veterinary personnel have a crucial role in the delivery of government programs of wildlife management and emergency response (TOR 1i) (Haering et al. 2021). They advise on emergency prevention, preparedness and response activities involving wildlife, as well as providing treatment and care for sick and injured animals in both routine rehabilitation and emergency situations (TOR 1i) (Haering et al. 2021; Stone 2022).

In the wildlife space, factors which contribute to challenges in staff recruitment and retention (TOR 1b), veterinarian burn-out and mental health (TOR 1c), animal welfare (TOR 1j) and access to veterinary care (TOR 1k) include:

- Lack of education specific to wildlife

A perceived lack of knowledge and skills is a major restriction to private veterinary practices treating wildlife (Orr and Tribe 2018; Haering et al. 2020). WHA consistently receives reports from WHA members and wildlife rehabilitators regarding the shortage of veterinarians accepting wildlife patients, particularly those that are trained and willing to treat bats.

In a recent survey, veterinary personnel did not consider their formal training provided them with useful skills for wildlife patients, including triage and treatment (Haering et al. 2021).

This is consistent with a survey that found only half of wildlife rehabilitators considered that their local veterinarian understands native animal assessment and treatment protocols (Haering et al. 2020).

No post-graduate courses are offered at tertiary institutions in Australia specifically for the veterinary care of wildlife, wildlife pathology or wildlife health. Post-graduate courses offered previously in this area have recently been cut from universities around the country, citing financial pressures. Opportunities for veterinary skills development in wildlife care are generally limited to those offered by zoos (e.g. zoo veterinarian residency programs), private professional continuing education bodies (e.g. The University of Sydney Centre for Veterinary Education, Taronga Training Institute) or individual veterinarians with expertise in the area; these opportunities are generally fee-paying and available on a limited basis.

- Financial pressures

Veterinarians overwhelmingly conduct work for wildlife on a pro bono basis (Orr and Tribe 2018).

The NSW Government estimates that private veterinary practices in NSW treat over 21,000 free-living native animals and provide more than \$1.8 million in free services and products to wildlife each year (Haering 2020), however these values are based on a small proportion of practices in NSW, so the real value is likely to be much higher (NSW Government 2019).

For practices which do seek payment for services for wildlife patients, few reported charging full fees (Haering et al. 2021).

Byron Bay Wildlife Hospital has calculated they spend an average of \$555 per wildlife patient for an initial consult, including anaesthesia, X-rays, pain relief, fluid therapy and hospitalisation (Byron Bay Wildlife Hospital 2022). This cost does not include further treatment such as surgery or medications. The hospital provides dedicated, expert veterinarian services to wildlife free of charge only possible through fundraising initiatives and grants, which in turn can create uncertainty (Byron Bay Wildlife Hospital 2022; Rennie 2023).

Reduction in financial costs for wildlife patients often comes at the cost of animal welfare and may negatively impact on the success of wildlife patient release (Sherwen et al. 2023).

- Psychosocial stressors

High patient mortality and euthanasia rates are common in wildlife medicine (Kwok et al. 2021; Sherwen et al. 2023) and may be compounded by a lack of wildlife specific skills and training. The ethical pressures of decision-making about euthanasia are significant (Australian Veterinary Association 2019), particularly if there is opposition from non-veterinary stakeholders who lack understanding of wildlife welfare (Sherwen et al. 2023).

Veterinary professionals are often first responders to emergencies involving wildlife, working in challenging and confronting circumstances and bearing significant personal cost and stress

(Haering 2020; Stone 2022). However, there is variable recognition and integration of the role of private veterinarians in emergency preparedness and response, especially outside of emergency animal disease hazards (Campbell-Ward 2020; Sherwen et al. 2023). This may lead to moral distress and interpersonal conflict when a lack of expert input leads to poor wildlife welfare outcomes (Sherwen et al. 2023).

Wildlife workload has increased over the past decade (Orr and Tribe 2018). Recent studies have calculated that NSW veterinary practices each see an annual wildlife caseload of 278 patients, utilising an average of 78 hours of veterinarian time (Haering et al. 2021).

The majority of veterinarians see wildlife patients in their spare time (e.g. in their lunch breaks or after-hours, once all paying clients/owned patients have been attended to), which may lead to wildlife welfare concerns when attention is delayed (Orr and Tribe 2018). There are generally inadequate human resources within veterinary clinics to enable wildlife health and welfare to be prioritised, further adding to the stress of veterinarians and nurses who are concerned with providing optimal care to all patients.

The following strategies are suggested to address the factors leading to reduced recruitment and retention of veterinary staff in the wildlife sector (TOR 1l, 1m)

- Review of and improved funding or other incentives (e.g. tax rebates) for veterinary practices seeing wildlife patients, to remunerate for the costs of services, products, staff training or clinic overheads. Consideration should be given to the administrative burden on veterinary practices seeking funding or incentives to ensure the administrative cost does not outweigh the monetary compensation they are applying for.
- Review training opportunities and access to continuing education resources in wildlife treatment and care for veterinary personnel.
- Review of undergraduate veterinary professional course material to improve content to cover identified key skill gaps for wildlife.
- Review of tertiary veterinary post-graduate studies specific to wildlife with a view to increase offerings available in Australia and consider if funded study places may be appropriate for domestic students.
- Early and effective integration of veterinary expertise for wildlife into emergency management and response frameworks.
- Training of (and remuneration for) veterinary emergency responders across all hazards to enable safe, early and effective wildlife interventions.



ABOUT WILDLIFE HEALTH AUSTRALIA

Wildlife Health Australia (WHA) is the peak coordinating body for wildlife health in Australia and operates nationally. The head office is in Sydney, NSW. Our mission is to lead national action on wildlife health to protect and enhance the natural environment, biodiversity, economy and animal and human health through strong partnerships.

A management committee provides leadership and a small number of dedicated staff steward, facilitate and coordinate the trust-based relationships and collaborations needed to help manage the adverse effects of wildlife health on Australia's environment, biodiversity, animal and human health, trade and tourism. This is achieved by generating norms and standards for monitoring, surveillance, and on-ground action, as well as facilitating the development of capacity, tools and resources which improve wildlife health in the areas of research and knowledge, preparedness and response, communications and outreach, surveillance and investigation and education and training.

WHA has 45 member organisations and over 800 individual members. Our membership operates as a network that includes government agencies (including environment, health, and agriculture portfolios) and non-government partners (including universities, independent researchers, zoos and aquariums, private veterinarians, and rehabilitators). We work with up to 120 different government and non-government agencies and organisations on a regular basis and our members are invariably requested to assist with any wildlife health issues occurring within Australia.

More information on Wildlife Health Australia is available at:

<http://www.wildlifehealthaustralia.com.au>.

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