

**Submission
No 204**

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

Name: Dr Sharanne Raidal

Date Received: 23 July 2023

22nd July 2023

What's wrong with us?

A submission to AVA NSW Division on Veterinary Workforce Shortages in NSW

Dr Sharanne Raidal, BVSc, MVStud, PhD, FANZCVS, DipECEIM
Professor of Equine Medicine

Dr Heidi Lehmann, BS(Hons), BVSc, BVMS, GCSAP, MVS (VetClinPrac), MVA, DACVAA
Senior Lecturer in Veterinary Anaesthesia

Disclaimer: This submission represents personal professional opinion, and does not represent the views of Charles Sturt University.

The current shortage of veterinarians is affected by a complex interplay of multiple factors, reflecting intersecting effects of supply, demand and, in this case, attrition from the profession. Between us we have more than 40 years' experience in university and private veterinary practice; we are both clinical academics with experience of research, didactic teaching, work integrated learning and university leadership in multiple locations in Australasia; one (SLR) has long tenure in university practice, the other (HL) is about to leave the tertiary sector in favour of a senior staff position in a specialist private practice. We offer a joint submission as our combined perspectives cover a spectrum of practice and experience within the profession and have included informal quotes and input from colleagues and students from three Australasian veterinary schools.

In addressing factors we have observed to be contributory to a lack of graduate success and retention, we have attempted to group linked problems, to identify contributory or explanatory factors for each (left column), and to link each to potential solutions (right column). The following is not intended as direct or implied criticism of any individual person, university or veterinary programme, but is intended as a critique of factors adversely affecting the profession, including veterinary degree programmes, or factors which might effectively address the identified problems. We have not celebrated successful interventions and initiatives because these have not yet been sufficiently well implemented to address the current shortage.

We have identified problems grouped under four themes:

1. University problems and shortcomings,
2. Limitations faced by private practices contributing to veterinary education,
3. Lack of awareness or regard for career options outside clinical practice, and
4. Student / graduate factors.

1. Universities are no longer able to inspire students (and barely able to graduate practice ready veterinarians)

a. Longstanding mismanagement and poor leadership in the tertiary sector

This is a factor affecting all professional degree programmes, with repercussions beyond the veterinary profession. With few exceptions, our tertiary sector is increasingly characterised by leadership (at all levels) with limited academic experience or aptitude, limited capacity to manage leadership responsibilities or their staff, with limited vision and limited ability to convert rhetoric to reality. University processes are increasingly compliance driven with, ironically, a detrimental effect on the very outcomes that compliance is intended to protect.

Recruitment and promotion within the tertiary sector is largely based on selfish ambition and a 'can do' attitude (which translates as 1. Will not 'rock the boat' and 2. 'Can do more with less', a response that is euphemistically and almost invariably termed "innovative teaching practice").

Poor university governance and management undermines the confidence that graduates have in the profession, and erodes effective teaching practice. Concerns within the veterinary profession related to a lack of confidence in university standards are being manifest as challenges in course accreditation, notably dissonance between international accreditation bodies and differing expectations of state-based veterinary surgeons boards (or equivalent). Accreditation standards have been reviewed and re-written in [Australasia](#), the [UK](#) and the [USA](#) in an attempt to ensure educational standards are fit for purpose and to address challenges such as those identified here, but most veterinary programmes are simply not able to implement rational teaching programmes at this time. As is the case of one of the authors (HL), effective teachers and expert clinicians are leaving academia rather than accept inadequate standards, submit to ineffective teaching practices, or tolerate indifference to requests for resourcing or change.

Review, restructuring and rebranding are not effective strategies to improve graduate outcomes. Universities should be held accountable to demonstrate OUTCOMES consistent with web-based rhetoric and 'strategic planning' documents around education quality, student engagement and graduate success.

Wider reform of the tertiary sector is urgently needed, but outside the scope of this document.

Administrative staff should not be tasked with strategic planning in the tertiary sector; academic staff should be expected to demonstrate fiscal responsibility and accountability in strategic planning and teaching activities, but should be employed on the basis of effective teaching ability and professional expertise. Academic staff should be able to focus on teaching, clinical and research functions, with adequate support staff do the bulk of administrative duties required to meet ill-considered and ineffectual compliance measures.

Universities should focus on good practice; compliance will then look after itself as part of an ethos of continuous improvement.

b. Chronic underfunding of universities and of veterinary courses

This point will be frequently and well made in other submissions on this topic. Veterinary degree programmes, although funded at the highest undergraduate HECS rate, typically cost more (per effective full-time student equivalent, EFTSL) than can be recovered from HECS-funded students. This situation leads universities to subsidise course costs by increased fees for international students, offering degrees at Masters level (not subjected

Given point 1a, simply throwing additional \$\$ at the problem is unlikely to be effective – we do not have the leadership to deploy additional resources wisely. Universities must develop effective mechanisms to avoid waste and mismanagement of public funds and student fees by rational and

to fee caps for domestic students), and other 'innovative' revenue streams. Universities are poorly able to exercise responsible fiscal management of enterprises such as veterinary clinics or diagnostic laboratories, seeking to leverage income from these teaching environments for revenue raising. Income is not returned to the veterinary programme, and the utility of these enterprises for their intended teaching purposes is compromised.

Calls for increased funding for veterinary education are unlikely to be successful, as governments are not motivated to assist courses where graduates are perceived as supplying workforce capacity in city-based private veterinary practices or when there are no electoral gains to be made (arguably, there are more pressing demands on the public purse). There is perhaps greater merit for increased government support of rural, regional and remote communities, the agricultural sector, food security and public health imperatives, although there is little political mileage (electoral benefit) in smaller population centres – we are dependent on a government that will lead 'for the common good', with a vision extending beyond single election cycles.

accountable practices at all levels (publicity and rhetoric, compliance and box ticking are inappropriate).

The electorate might expect governments to better support responses targeting veterinary contributions to marginalised communities, food or fibre production, animal welfare, biosecurity and public health, particularly when there is associated electoral mileage. The broader contribution of the veterinary profession to benefits associated with pet ownership should not be overlooked, but is difficult to convert to votes.

Public perceptions of universities (as playgrounds for privileged youth) should be corrected – our universities should be the solution to current shortages of health care professionals, teachers and other professionals, in addition to the shortage of veterinarians. Particularly when universities target low SES or educationally deprived communities, they provide an opportunity for children and (young) people to secure satisfying careers, improved fiscal opportunities, and to serve their communities – a message that is not effectively communicated to much of the electorate.

Whilst the private (veterinary) sector cannot be exploited to compensate for university mismanagement or government underfunding, there are opportunities (explored below) to explore synergies between educators and the private sector. The profession must recognise the necessity to invest generously in students (our future) – a sentiment explicitly expressed in the Hippocratic oath, but perhaps not so influential in our own profession.

c. Difficulty recruiting and retaining high quality teaching staff

For veterinary graduates with job prospects in many spheres of professional activity, the tertiary sector is rapidly becoming an unattractive employment option – universities are directly impacted by the veterinary workforce shortage. In the current climate, it is increasingly difficult to attract and retain suitably qualified veterinarians within the university environment. Students are well able to perceive the challenges facing academics, and so are increasingly unlikely to return to academia. There is a lack of veterinarians teaching into pre-clinical and para-clinical subjects, and the difficulty is particularly acute in clinical pathology and diagnostic imaging, where attractive options for employment with private sector providers abound. Clinical positions may be filled with staff of limited clinical experience or expertise. Within veterinary teaching hospitals,

Improvements to university culture can be made at a School (programme or course) level, and so might be progressed independent of the wider sector reform discussed above. Contributions from veterinarians employed in other sectors within the profession might assume increased importance in the development of future generations of veterinary graduates.

Improved leadership and effective management is required to attract and retain effective veterinary teachers at universities, or novel approaches developed to partner with the private sector. The adversarial relationship between university leadership and teaching / research staff is antithetical to

responsibility for undergraduate education is frequently devolved to residents (Darien Feary, PhD student CSU, *The role of residents in veterinary clinical teaching*), who are struggling to navigate employment, research higher degree and credentialing requirements. Salaries offered by universities may be inferior to salaries offered in the private sector because parity in university pay scales is typically derived from salaries offered to staff in other faculties, rather than salaries offered in other spheres of veterinary employment. Conference and continuing professional development opportunities are often well short of those offered in private practice, and promotion, reward and remuneration processes are used poorly to manage effective and equitable contributions to core university activities (point 1a).

d. Failure of universities to develop or maintain appropriate veterinary teaching hospitals

In 2008, Professor Reuben Rose (then Chair of the Veterinary Schools Accreditation Advisory Committee) implored educators to rethink the role of university owned veterinary teaching hospitals in veterinary education as, he asserted, the way “we had always done things” was not working. To some extent, this has been addressed by increasing use of ‘distributed practice’ models for veterinary clinical teaching. However, largely due to points 1a (above) and 2a (below), this has been poorly executed (with some notable exceptions), and the current situation reflects universities’ inability to manage enterprises, such as teaching hospitals and diagnostic laboratories, rather than progressive reform. Whilst the value of private practices to undergraduate education is undisputed (addressed again in 2a below), the perception that universities are seeking merely to offload expensive clinical teaching is increasing, and universities have (again, with some exceptions) largely been ineffective at supporting (or enforcing) effective teaching practices and accountability in these external settings. Current revisions to accreditation standards address student concerns relating to the scope of experience during clinical training, but will have repercussions on teaching caseload, staff selection, promotion and retention that are yet to be fully realised. Increased focus on common scenarios should not come at the expense of skills in clinical reasoning.

effective or rational conduct of core business, and does not promise a trustworthy relationship with the profession.

Positive changes to workplace culture do not necessarily require additional \$\$ (although funding is obviously helpful) – these changes do require effective leadership, accountability and transparency at all levels, and commitment to university and profession core values and purpose.

Contributions from veterinarians employed in other sectors within the profession and from private practices should be appropriately supported by universities – the cost of teaching should be appropriately remunerated, and genuine educational support provided to practice staff and students in external placements. In return, practices must be held accountable for maintaining agreed educational standards, and students must be respectful of other practice priorities – such as patient welfare, staff time and fiscal drivers.

Educational standards and expectations of external placement providers must be rational and explicit - the capacity of varied educational settings to support different aspects of student professional development and learning can be leveraged to best educational outcome. Private practice placements afford employers the opportunity to ‘vet’ potential employees, and students the opportunity to assess potential workplaces, but these placements must achieve more a than ‘try before you buy’ function.

Strategies implemented in distributed models or other novel solutions to juxtapose referral and general practice should be rigorously assessed and adapted for use by Australasian universities.

Supporting senior students and new grads to accept that learning continues after graduation (and that the learning curve is particularly steep in the early years) is important. Squeezing anal glands, and other common procedures, are readily learned in practice.

Quotes from final year veterinary science students after completing final year surgical rotation with specialist surgery staff (in two different universities):



STUDENT
VOICE

“I’ve assisted with three triple pelvic osteotomies and a dorsal laminectomy, but I can’t do a bitch spey.”

“I left uni knowing how to remove a lung with a Ligasure, but not how to squeeze anal glands.”

e. Decreased opportunity for student exposure to animals for practical and clinical skills development

Increasingly and for various reasons (which can be elaborated if necessary), universities are replacing practical and live-animal clinical exposure with various clinical simulation models for undergraduate education. Simultaneously, increased student numbers and, most recently, restrictions due to the COVID epidemic have further decreased student access to live animals for practical and clinical skills development. Whilst 'innovations' using inanimate teaching aids unquestionably have some value in reducing and refining the use of animals for teaching purposes, they cannot and should not replace opportunities for students to demonstrate effective clinical skills before performing unfamiliar procedures on client-owned animals. The veterinary profession in Australasia does not have an intern model to support the continued professional development of our graduates – they are expected to function from Day 1 in an 'appropriately supportive environment' (see 4d below). When 'sims' and alternative strategies are used in undergraduate education without effective exposure to live animals, student perception of task difficulty increases, and student confidence decreases – the task is perceived as being more difficult if only performed as a simulation in a setting completely devoid of the emotional, mental, clinical and logistic complexities of practice. The evidence base supporting these 'innovations' is flawed - publications on teaching efficacy do not capture these limitations (due to negative publication bias and poorly chosen outcome measures in most instances). Universities are keen to avail themselves of cost advantages associated with use of inanimate resources for student learning. Animal ethics committees may further limit use of animals for teaching, without due consideration of the wider adverse consequences to animal welfare of limiting training opportunities.

The use of simulations and teaching models for teaching of practical and clinical skills should supplement and enhance the use of animals, meeting animal welfare imperatives to reduce and refine, but not replace the use of animals in teaching.

Unless there are substantive changes to the level of support available to graduates in private practice settings, the use of animals for students to perform and perfect procedures commonly performed in practice (typically defined as "Day 1 competencies") should be retained.

Students should respect and value the welfare cost to the animals used in progressing their professional development.

Opportunity for use of high or low fidelity models and exposure to live animals for student learning must be responsive to differences in both confidence and competence between individual students.

The case load and type available to support student skills development must be sufficient, and must cater for students of differing aptitude and confidence.

f. Ineffective management of student disability, disadvantage and difference

While accommodation of disability, disadvantage and difference is essential (indeed morally and legally mandated), to date most (well-intentioned) responses and accommodations reinforce student dependence on staff by denying students the opportunity to assume responsibility for their own success. The unintended consequences of this are twofold. Firstly, the student involved may not achieve to their maximum potential, but rather be allowed to perform under changed (limited) conditions. Secondly, students who do not need such accommodations may be tempted to fraudulently claim disadvantage in an attempt to procure perceived advantages offered to their peers. In both cases, students may subsequently struggle to cope with vocational stresses on graduation.

Careful consideration should be given to support measures that effectively enable and empower students coping with disability, disadvantage or diversity issues to succeed within the profession.

2. Private practices do not have sufficient financial resources or teaching expertise to contribute optimally to veterinary education

a. The role of veterinary practices in 'distributed models'

The value of private practice contributions to veterinary education has long been recognised, included as a mandatory requirement of all veterinary programmes as 'extra-mural service' (EMS). However, in recent times, universities are increasingly looking to 'partner' with private practices to provide clinical work-integrated learning (WIL) opportunities for students beyond those available through university teaching hospitals, diagnostic laboratories, and consultancies. These 'distributed' education models have been successfully enacted in some settings. However, in others, this practice may be [perceived to be] an opportunity to offset clinical teaching costs. Private veterinary hospitals and other professional practice settings offer valuable opportunity for students to consolidate domain ('textbook') knowledge in authentic workplace settings, as well as opportunity to observe and develop skills important for successful professional life (communication, behavioural expectations, time management, etc). Private practice settings and other workplaces provide rich exposure to diverse professional workplaces and standards, but are ill-suited for knowledge transmission or initial clinical skills training. To date there has been limited exploration / articulation of the strengths and weaknesses inherent in university and external workplace settings. University oversight of teaching practices currently lacks rigour, and many businesses are supporting student learning with limited support or resourcing.

Private practices should be financially remunerated and provided with sufficient educational support to contribute effectively to undergraduate education.

The model of university owned referral practices teaching basic clinical skills is not effective, particularly when the practice is expected to run as a profitable business. These components (referral caseload and basic clinical skills training) must be separated and may involve external providers, but responsibility for teaching quality must remain with the teaching institution to ensure rigorous undergraduate teaching, continued research and development of high level practice.

Student involvement in external practices must ensure structured exposure to cases – students must be hands on and knee-deep, WIL is experiential not observational. Teaching standards must be maintained across providers, and must cater for differing student interests and aptitude. A diversity of clinical teaching providers is helpful in this respect, but must be supported by appropriate university expertise.

b. The role of private practices for continuing professional education and specialist training

Accreditation standards have been modified to focus clinical teaching on common problems. However, there is some concern that student exposure to complex cases that test clinical reasoning and consolidate learning may be lost. Further, the caseload that best supports undergraduate teaching is likely to be fundamentally different from that necessary to support resident training. Increasingly, specialist private practices are offering higher clinical standards than university teaching hospitals, and are able to offer effective training for specialist qualifications. This may be the future for our profession, enabling universities to focus on more common 'day 1' presentations for undergraduate teaching.

Opportunities to optimise caseload for undergraduate teaching and for resident or specialist training should be explored in the face of changes to accreditation. There is need to ensure that undergraduate exposure to effective teaching associated with more complex cases is not lost.

Challenges to the recruitment, retention and promotion of non-specialist veterinary clinicians at university teaching hospitals focused on primary accession cases is a likely (unintended) consequence of changes to accreditation standards.

3. Prospective students and graduates are unaware of career options outside of clinical practice

a. Non-clinical employment options are less visible than in previous generations

Veterinary graduates are well-equipped for an enormous sphere of diverse professional activities, including important work in research, education, government sectors, industry, pharmaceutical development and human health. Many of these roles have enormous positive impact at local, national and international levels, and represent fulfilling career pathways with generous remuneration and predictable work hours. However, veterinary careers outside clinical practice are seldom appreciated by prospective students or graduates. Progressive decreases in government support of rural and agricultural sectors have seen closure of government laboratories and decreased opportunity for veterinarians to service animal-based food and fibre production systems, public health or animal welfare interests. This deficiency compromises disease surveillance capacity, and limits responsiveness to endemic and exotic disease incursions or animal welfare concerns. Reliance on private practice veterinarians in this role is compromised by the shortage of private practitioners in rural and regional practices, and other barriers to the involvement of private veterinarians to be involved in animal health surveillance must be overcome ([Hayes et al 2022](#)).

Having completed a minimum of five or six years' education for their degree, veterinary graduates are reluctant to undertake research higher degrees, further limiting the contribution of our profession to animal and human health. There is no standardisation of veterinary degrees: depending on the course undertaken, veterinarians graduate with Australian Qualification Framework degrees at level 7 (Bachelors degree), level 8 (Honours degree) or level 9 (Masters degree). The qualification is referred to as either a BVSc (or equivalent, with or without the Hons post-nominal) or a DVM. These differences are of little consequence in private practice, but important for the (rare) graduate contemplating research higher degree training, including some residencies. As noted above, research and industry offer credible career pathways for veterinary graduates disillusioned with private practice (and save losing them from our profession as they pursue alternative career pathways). The difference in degree standard is incongruent with the expectation that all graduates are regarded as equally registrable and fit to practice. So-called "two plus four" or post-graduate models of veterinary education avoid capping of domestic student fees for Bachelor degrees under Australia's HECS system, with obvious impact on study costs – a disincentive to student enrolment in veterinary degree programmes.

Non-clinical career pathways should be promoted as legitimate and fulfilling career pathways to avoid loss of graduates from the profession. (Creative individuals might like to commission a television series promoting the role of vets in such sectors – eg. "Border Security Vet").

Government or industry scholarships (previously termed cadetships) should be available for veterinary students to complete their undergraduate studies and then be indentured on graduation (for a nominated time) in government veterinary laboratories, local land services, or other government sector or animal production (food or fibre) industry roles supporting public health, food security or other roles of public utility.

Increased availability of government veterinary services in rural and regional communities is likely to contribute to improved animal production, health and welfare outcomes, have a positive impact on One Health initiatives, and contribute to the vitality of private practice operations – net positive effects for rural and regional communities likely to increase critical mass.

The necessity, acceptability of or justification for different AQF level veterinary degrees should be addressed. The costs to students of post-graduate study models should be evaluated to determine if this is further disincentive for course enrolment or a cause of hardship during their studies.

A detailed reflection was received from Emeritus Professor John Glastonbury (included as an Appendix). Amongst other insights, Prof Glastonbury notes:

"The local farming community felt that they "owned" their own [regional veterinary] laboratory. When the Wagga Wagga laboratory was shut in 1995, I know of two sole practitioners in small towns who walked out immediately because they felt that they no longer had the local support. With the spread of universities into regional Australia, there is a chance to adopt the Land Grant system of the United States."



4. Student and graduate factors – expectations and reality

a. Vocational choices – failure to attract potential students into veterinary courses

Potential veterinary students have a plethora of alternative career choices, meaning that capable potential students are lost into other areas with more attractive employment or remuneration prospects, for example engineering, mining or tech sectors. The drivers to university enrolment are far removed from the requirements of the profession. Despite changes to university selection processes to include non-academic selection criteria, the student body and graduate profile does not match community composition, with indigenous, disabled and low SES background students still under-represented.

Salaries and work hours must be considered in comparison with other career pathways available to prospective students.

University selection criteria should be [further] developed and monitored to ensure that selection processes result in a student body representative of the communities served by graduate veterinarians, and graduates that are likely to remain in the profession. The efficacy of selection processes in addressing workforce shortages should be monitored and analysed, as a basis for refined and improved processes.

b. Perceptions of employment demands and work-life balance

“Herriott-esque” employment conditions (where the friendly vet stays up all night with a poorly chicken and happily accepts a carton of eggs as payment) are no longer acceptable (if they were ever realistic). Today’s graduates expect pay and conditions commensurate with opportunities afforded in other vocations.

The high cost of tertiary education means students graduate with large student debts, putting upwards pressure on wage / salary expectations. Concurrently, the commodification of university degrees (students being treated as consumers or customers, educators as providers) has meant that today’s students do not lack assertiveness, and risk completing their degree with a sense of entitlement. Hours on clinic are tightly regulated (limited) for students in most universities based on expectations in non-clinical degree courses, and there is little explicit emphasis on the need for collegiate support or concern for patients, clients or peers. Students may therefore graduate with unrealistic expectations of the peaks and troughs, highs and lows, of veterinary practice, and few practical skills in fatigue management.

The profession should identify mechanisms to ensure that pay and working conditions are appropriate relative to the care and skill invested in qualifying as a vet, and relative to time, commitment and expertise in the job.

Prior to and during the clinical years, university expectations need to explicitly and wisely juxtapose care for student working hours (to protect health, well-being and learning capacity), whilst not sheltering students from the realities of practice. Whilst it is unreasonable to expect excessive workhours to be a regular feature of a healthy workplace, and remuneration must be competitive with other careers (to ensure that suitable students are attracted to vet school and capable graduates retained in the profession), it is unhelpful for students to graduate without an awareness that busy days happen or that their own best interests are served by ensuring they are actively contributing to a considerate workplace with concern for others evident in their own actions (see also 4c below).

Students should be provided with exit strategies (alternative career pathways) during their veterinary course, and be aware of vocational opportunities beyond clinical practice (point 3a, above).

c. Wellness and well-being vs self-care

Recent increased awareness of health, work-life balance and self-care is appropriate, particularly given well-recognised mental and physical health challenges within the profession, and the associated suicide rate.

Many initiatives have been implemented to address these concerns, but most focus on self-care (some covered in 1f above), to the detriment of collegiality and concern for others. University staff, perhaps more than others in the profession, are likely to demonstrate self-interest as a protective strategy or survival response. Approaches that prioritise the individual at the expense of the team are likely to perpetuate isolation and disillusionment, rather than to build resilient, vibrant teams well equipped to withstand professional challenges, celebrate individual and collaborative successes, and contribute to a culture of continuous improvement.

A continued focus on health, well-being and work-life balance should include initiatives that promote peer support and 'other-centeredness'. Initiatives should focus on the "WE" in wellness to build vibrant professional communities.

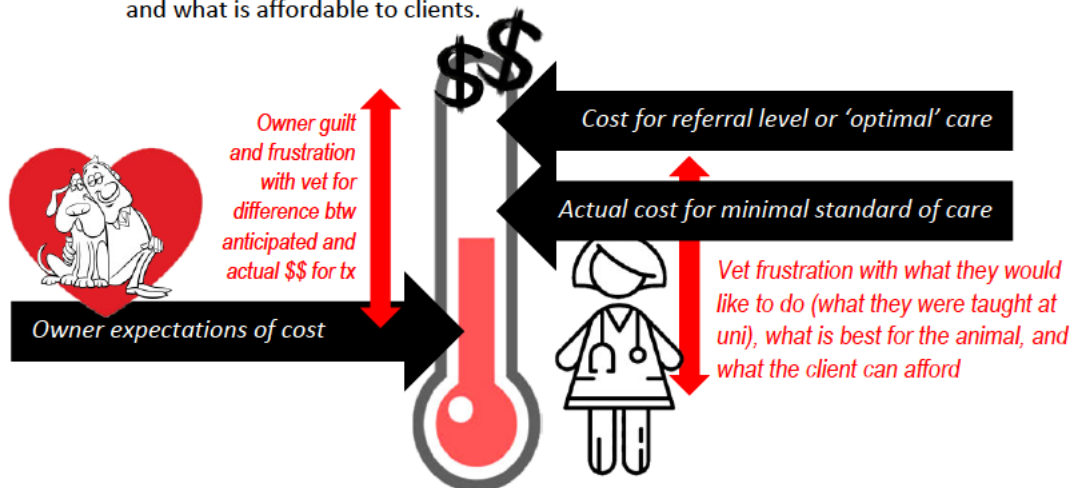
d. Realities of private practice compared to standards taught and upheld at university

In striving to deliver excellent content, veterinary teaching staff typically provide students with up-to-date information representing the latest developments in optimal patient care. A similar standard of care is offered at specialist private practices, and is perceived by students as representing the pinnacle of profession, and something they would aspire to achieve on graduation. However, there are often differences between what is possible in a fully-staffed referral setting, what is achievable in private practice, and what is affordable to clients.

Initiatives around 'spectrum of care' are evolving to help teaching staff and practicing clinicians develop concepts of standards and treatment expectations in different contexts. This necessitates a carefully considered vocabulary, to avoid value-laden terms like 'gold-standard care'. Rather than celebrating mediocrity, clinical research is focussed on evidence in support of differing levels of care to allow veterinarians prioritise treatment options that represent the best value for money, and to allow informed owner choices in determining optimal care. Embracing these concepts is likely to facilitate difficulties faced when juxtaposing client expectations and costs of treatment, or when faced with implementing 'sub-optimal' care.

Beyond the clinical expertise to navigate these difficult decisions, students and new graduates should be supported to articulate treatment choices available to clients. They should also be assisted to develop personal coping strategies to understand and tolerate the personal cost of supporting clients through emotionally charged circumstances and complex decisions, particularly in situations where compromise is necessary.

A similar approach might be applied to our assessment of our own contributions to the profession – the veterinarian providing compassionate



Clients take their guilt and frustration out on the vet (what happened to payment in eggs?), and the complexity of explaining the costs and benefits of different treatments adds to the difficulty of client communication. Many vets experience professional frustration at not being able to practice or perfect a standard of care commensurate with their aspirations and interests, or their expectations on graduation.

The expertise demonstrated by university clinicians or specialist practitioners is developed over years of experience, yet many graduates expect similar standards of themselves as soon as they are employed. Specialists, by definition, focus on a limited scope of practice, whereas graduation mandates 'omnicompetence', so students further project their unrealistic expectations across a range of species or disciplines.

e. Continued professional development and professional standards

With increased exposure to private practices during their senior (clinical) years, veterinary students are increasingly aware of inherent challenges in veterinary practice. Students note support mechanisms available for new graduates in practices where they complete clinical placements, and are aware of other indicators of staff satisfaction, such as staff turnover rates (an observation that many might also make of university staff). While salary, the number and nature of existing staff, and work hours are important, two additional factors are identified by students as important:

- i. Opportunities for continued professional development and career progression; and
- ii. Professional standards.

Students are unlikely to be satisfied with jobs that fail to ensure continued opportunity for career development and progression.

Beyond the standard of clinical practice offered or opportunities for referral of complex cases, where practices fail to meet student expectations for aspects of professional practice, such as aseptic technique, antimicrobial stewardship, analgesia and pain management, students (graduands) are unlikely to consider the practice as a potential employment option or, if employed, are unlikely to remain at the practice.

care across multiple species in rural mixed practice is no less valuable to the community than the high-profile specialist. Job satisfaction can be found in all standards of practice, and new grads can be assisted to consider the direction/s in which they would like their career to take them.

Practitioners should be aware that students on placement are assessing the suitability of the workplace as a career choice. Appropriate support (not being thrown in at the deep end), staff retention, opportunity for career progression and professional standards within the practice are as important to most students as salary and working hours.

Employers should be encouraged to consider mechanisms for career development / professional advancement with their staff.

Continuing development beyond annual conference leave, might include Membership in the ANZCVS or other measures of advanced practitioner standing or, more rarely, might include specialist qualifications and/or research higher degrees. Staff should be encouraged to develop their own area(s) of expertise within their practice.

Practices maintaining a high standard of patient care and upholding appropriate standards of professional practice are more likely to attract and retain staff than practices where these standards are perceived to be compromised.

AVA initiatives such as "New Grad Friendly" practices (was this only a WA thing?) may also be helpful to provided prospective new employees with assurance of appropriate support.

f. The veterinary care team

The contributions of good vet nurses and other support staff are appreciated by most clinicians. With the emergence of veterinary technician degrees at many universities, there is opportunity to consider the role of these valuable members of the care team. A recent study conducted by Idexx and aimed at addressing veterinary practice capacity constraints¹ has indicated that increased capacity can be achieved by the right staffing profile (ie. staff-to-vet ratio within the practice), and by empowering technicians and assistants to perform more complex, higher-value tasks.

The possible contribution of veterinary technicians to ameliorating the shortage of veterinarians might be explored, considering opportunities analogous to the 'nurse practitioner' position in human health settings, registration and career pathways for vet tech graduates.

¹ Finding the time: Empowering veterinary teams to get the most out of every day (Feb 2023); https://pages.idexx.com/practice-productivity_en-us?utm_source=news&utm_medium=press_release&utm_campaign=practice_productivity&utm_content=publication

Appendix 1: Contributions of Regional Veterinary Laboratories to veterinary capacity

Emeritus Professor John Glastonbury

RVL's are a great first line of defence for biosecurity. They ensured highly qualified and skilled veterinarians were stationed in rural Australia, and provided a hub for the local veterinary profession.

New South Wales, Victoria and Queensland had a network of regional veterinary laboratories:

NSW – Wagga Wagga, Orange, Armidale and Wollongbar; central laboratory - Menangle

Vic – Hamilton, Bendigo, Benalla and Bairnsdale; central laboratory – Attwood

Queensland – Toowoomba, Rockhampton and Townsville; central laboratory – Yeerongpilly

The Wagga Wagga laboratory had a staff of four Veterinary Research Officers, most of whom were former Departmental trainees, Laboratory Medical Scientists in charge of each section – bacteriology, serology, parasitology and histology, laboratory and clerical support staff.

Specimens were received from livestock producers via their chosen veterinarian, private or government.

Being local, farmers were able to bring whole animals into the laboratory for post mortem examination. This gave the Veterinary Research Officers direct contacts with farmers in distress and need. Farmers would receive a provisional answer straight away.

Now there are only centrally placed laboratories in each state, the only animals they receive for post mortem are those that will fit into an esky, ie poultry and foetuses.

Each year, each regional laboratory received about 3,000 to 4,000 specimens, which were for disease diagnosis, exclusion of emergency animal disease, disease eradication programs and regulatory testing. Now the central laboratories are only receiving about 5000 samples for the entire state, and do virtually no post mortems.

During the 40 year life of the Wagga Wagga laboratory, 46 papers were published in refereed scientific journals. An added bonus of this was that often the co-authors were field staff, government or private veterinarians. This simply no longer happens. Four former staff of the Wagga Wagga went on to become Associate Professors or above in academia.

The local farming community felt that they “owned” their own laboratory. When the Wagga Wagga laboratory was shut in 1995, I know of two sole practitioners in small towns who walked out immediately because they felt that they no longer had the local support. With the spread of universities into regional Australia, there is a chance to adopt the Land Grant system of the United States. In NSW, you could have jointly operated laboratories at Wagga Wagga with CSU, Armidale with New England, Lismore with Southern Cross and Camden with University of Sydney. When CSU vet school was first set up, Kym Abbott and I suggested this to Geoff File, an Executive Director with NSW Agriculture and were scoffed at.

Cadetships

Out of my graduating class of 65 in 1967, there were three of us on Cadetships with the Pastures' Protection Board (now Local Land Services) system, five with the Department of Agriculture and about four with the Commonwealth Department of Primary Industries.

The three of us with the PP Board System worked out our 5 year bonds but about half of the Agriculture Department group paid off their bonds on graduation and all of the DPI group did likewise. The trouble is that the Department of Agriculture no longer provides a field service and only has a Head Office in Orange, they rely on Local Land Services for this activity. Therefore they no longer need trainees because they are not a large employer of veterinarians?

In the “good old days” there used to be eight District Veterinary Officers employed by the Department of Agriculture strategically placed around the state. In each District Veterinary Office, there was also at least one Veterinary Officer and two or three lay stock inspectors.

Despite the HECS debts, I suspect that the bonds associated with any cadetship scheme would have to be very high to ensure that the graduates fulfil their bond commitments.

With a hefty government subsidy, Local Land Services could be encouraged to offer cadetships.

Cadetships are very expensive: mine paid all university fees, a very liveable living allowance monthly, bought all my text books and paid for and arranged all my AHEMS type experience.

There will always be monumental hassles over what constitutes the duties of official veterinarians versus private practitioners – this debate still rages on in the Sheep Vets’ mailing list. More official veterinarians would add fuel to the fire.

It is unlikely any government would provide cadetships for prospective veterinarians provided that they worked for the bond period west of the Great Dividing Range.

John Glastonbury

22 July 2023