

# Inquiry into the veterinary workforce shortage in New South Wales

Submission of the Australian Veterinary Association Ltd  
July 2023



## Table of Contents

The Australian Veterinary Association .....	2
Executive Summary .....	2
AVA Recommendations .....	11
Introduction.....	13
Inquiry Terms of Reference.....	16
(a) the shortage of veterinarians across the profession, including clinical (small and large animal practice), government, academia, research, industry, and pathology.....	16
Clinical – Small, mixed, and large animal practice .....	20
Government .....	23
Academia .....	25
Research .....	26
Industry.....	26
Pathology.....	26
(b) the challenges in maintaining a sustainable veterinary workforce, including recruitment and retention rates .....	27
(c) the burn-out and mental health challenges facing the veterinary profession .....	34
(d) the role of, and challenges affecting, veterinary nurses .....	36
(e) the role of, and challenges affecting, overseas trained veterinarians .....	37
(f) the arrangements and impacts of providing after-hour veterinary services.....	39
(g) the impact of the current legislative and regulatory framework on veterinarians.....	40
(h) the particular challenges facing the veterinary profession and the shortage of veterinarians in regional, rural and remote New South Wales.....	43
(i) the role played by veterinarians in providing care to lost, stray and homeless animals, injured wildlife and during emergency situations .....	46
(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 .....	50
(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 .....	52
(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 .....	54
(m) strategies to improve access to veterinary care .....	58
(n) any other related matters.....	61
(n1) veterinary education.....	61
(n2) Veticare.....	61
Prepared by.....	62
Contact.....	62
References.....	62



## The Australian Veterinary Association

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 welcomes the opportunity to provide feedback to the NSW Parliament Legislative Council Portfolio Committee No. 4 – Regional NSW [Inquiry into the veterinary workforce shortage in NSW](#). The AVA would like to emphasise the significance of this inquiry to the veterinary profession. We thank the Inquiry for this unique opportunity for the veterinary profession to voice concerns, provide valuable insights, and propose meaningful solutions to address the issue of veterinary shortages.

Additionally, the AVA appreciates the opportunity to participate and contribute to the inquiry's public hearings to further discuss the AVA views outlined in this submission and how NSW might genuinely deliver solutions to the veterinary workforce shortage and avoid creating unintended negative consequences. As part of the hearing sessions the AVA recommends multiple sessions dedicated to discussing with subject matter experts the key priority areas of the Terms of reference A to G, H, I to K, and L to N.

## Executive Summary

Animals are deeply embedded into the Australian way of life, contributing to the social, cultural, environmental and economic fabric of society. The regulated role of the veterinary profession is to safeguard animal health, welfare, and public health through a set of standards and professional conduct. In NSW regulation is through the NSW Veterinary Practitioners Board.

The AVA is of the opinion that any animal under human care in Australia should be able to access veterinary care. Unfortunately, this is currently not being realised due to inadequate capacity to deliver veterinary knowledge and services to meet community demand, which leads to animal health being compromised, poor welfare outcomes, increased risk around biosecurity and risk to human health and well-being.

The provision of veterinary services is rightly seen as essential by the community, similar to the provision of human health services, and it is seen as necessary in legislation. Veterinary services are almost entirely privately funded with services delivered by small to medium private businesses. There is minimal public funding through government veterinary services or support of charities. In contrast, the delivery of human health services receives significant public funding with private sector support. Similar to human health, the community expects the veterinary profession to not only provide services for private (individual) benefit, but to also provide services that provide public benefit (public good), for example treatment of wildlife and stray animals, as well as disease surveillance to maintain biosecurity, and safe food production.

The veterinary workforce shortage in NSW has been decades in the making. It is a national and in fact a global problem. We have confidence that this problem can be addressed and are hopeful that outcomes of this inquiry will lead to strategies actioned in NSW, that will not only make NSW a sought-after destination to attract and retain veterinarians, and appropriately sustain veterinary practices, but also as a pilot for how this issue could be addressed at a national level.

This submission discusses the challenges and suggested strategies by individually addressing each of the terms of reference (TOR). A summary of each TOR is provided below, with referenced evidence provided in the body of the document. The response to each TOR has been written as a stand-alone



piece with referencing to other TORs as required. Recommendations are embedded within the TORs and summarised at the end of this executive summary.

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

Although the veterinary workforce shortage has been present for several decades it has been more evident in certain sectors (livestock veterinarians, pathologists, and government vets). The shortage has now expanded into all sectors of the profession and for the last seven years it has been formally recognised by the Australian Government. The drivers of inadequate capacity vary between differing sectors of the profession. In some instances, inadequate capacity may be due to long term decline in demand, as is seen in livestock veterinary services. On the other hand, inadequate capacity in the companion animal sector is being driven by a rapid increase in demand due to increase in animal ownership and requirement for veterinary services. Due to the changing landscape of veterinary care, characterised by the increasing complexity of care, higher community expectations, and a lower tolerance for risk, there has been a decline in the quantity of veterinary services available to the community, particularly those of public good.

In its entirety the absolute number of veterinarians generally increases each year, and growth of the profession exceeds that of the general population. The changing work participation rates and hours worked reflect that of the general Australian workforce. There are several sectors within the profession where the growth is limited, stagnant or in fact there is a contraction. These include veterinarians in the following disciplines; large animal (livestock and horse), government, academia, industry/research, and veterinary pathology.

**(b) the challenges in maintaining a sustainable veterinary workforce, including recruitment and retention rates**

There are an ever-increasing number of challenges that are faced by the veterinary profession to maintain a sustainable veterinary workforce, and these can be broadly categorised into those;

1. driven by the private sector veterinary profession's financial vulnerability,
2. due to generational and societal change, and
3. due to limited funding for the public veterinary sector.



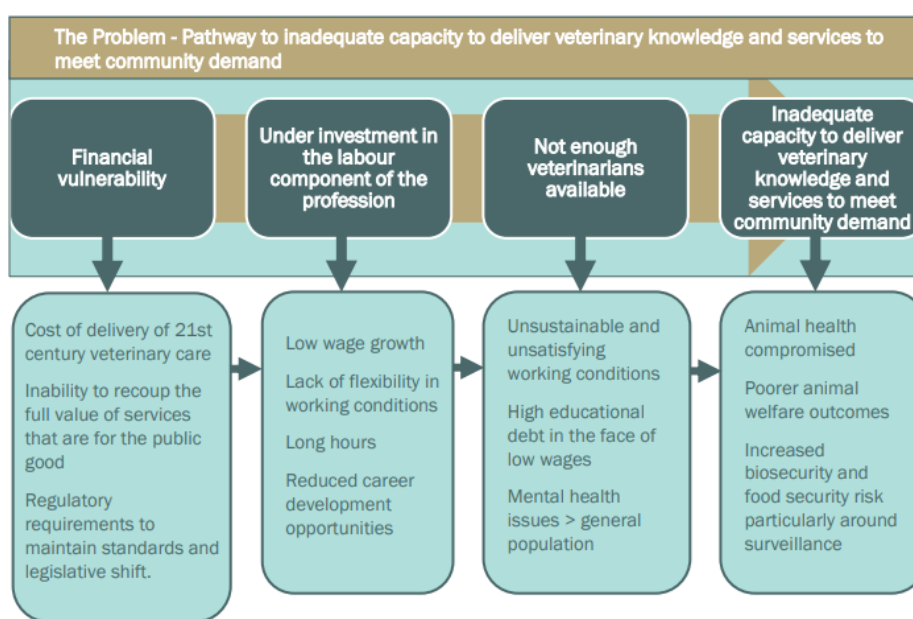


Figure 1 – Pathway to inadequate capacity to deliver veterinary knowledge and services to meet community demand.

**Financial Vulnerability** - This is caused by a myriad of factors. As almost all of the veterinary profession is within the private market, insecurity of payment for work is a major driver of the challenges in maintaining a sustainable veterinary workforce. Financial vulnerability is occurring due to the requirement of the profession to make veterinary services available to as much of the community as possible and as per our regulatory obligations.

**Generational and societal change** – Since late last century there has been significant generational and societal changes in attitudes to animal health and welfare, and human health, as well as to the way people work. Without adequate change to funding or framework, the veterinary model has been unable to adapt. This is not unique to the veterinary profession, however, is a significant contributor to the challenges in workforce sustainability.

**Limited funding for the public veterinary sector** – All of the same challenges seen in the private veterinary sector are present within the publicly funded veterinary sector due to limited funding and de-prioritisation by government over time.

The result of these challenges is significant difficulty in recruitment and retention, due to the impacts on pay and working conditions of veterinarians, and increasingly high educational costs and skill requirements demanded of them. This is not commensurate with non-veterinary workforces of similar educational investment. In 2021 in NSW, 40% (compared to a national rate of 38.65%) of veterinary job vacancies took more than 12 months to fill. When separating out rural practices, 46% were not filled after 12 months. In addition, up to 13% of the workforce was considering leaving a veterinary role within the next 12 months.

### (c) the burn-out and mental health challenges facing the veterinary profession

The burn-out and mental health challenges facing the veterinary profession are the result of a profession where the labour component has been chronically underfunded. Burn-out has been well recognised in the profession for some time and the cost to the profession is estimated to be 2.01% of its value due to poor retention and reduced working hours.



In 2019 the AVA undertook research in this area to better understand the size of the issue and to inform the development of a wellness strategy. It found over half (66.7%) of veterinarians said they had experienced a mental health condition at some stage, compared to 61.8% in the general population. Financial concerns, poor interactions with the community, and damaging social media have a significant role to play. Other factors include long working hours with a high case load, which has only worsened as the veterinary workforce shortage has continued.

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. The sole focus of awareness and intervention has now moved to also encapsulate prevention of risk factors and promotion of good workplace practices to improve these issues.

#### **(d) the role of, and challenges affecting, veterinary nurses**

Veterinary nurses and technicians are vital members of the veterinary team working under the supervision of registered veterinarians. They assist to deliver critical nursing care to animals and educate owners. The AVA supports and endorses the Veterinary Nurses Council of Australia's (VNCA) TOR (d) submission to the NSW Inquiry into the veterinary workforce shortage, including mandatory professional registration for veterinary nurses and technicians to work with these titles under the supervision of registered veterinarians.

The national qualifications for veterinary nurses and technicians is presently the vocational Certificate IV in Veterinary Nursing and bachelor degree. The ongoing advances in veterinary nursing knowledge and skills, including the work, health, and safety requirements of the role, necessitate, in the public interest, that the title 'Veterinary Nurse' must be restricted to those who are suitably qualified and accepted into the Australian Veterinary Nurses and Technicians (AVNAT) Voluntary Registration Scheme established by the VNCA, and that this is restricted to work only under the supervision of registered veterinarians.

#### **(e) the role of, and challenges affecting, overseas trained veterinarians**

The integrity and quality of the veterinary profession is maintained through standards of university education, professional conduct and professional behaviour, determined by state veterinary boards and overseen by the Australasian Veterinary Boards Council (AVBC). Veterinary degrees obtained in countries with similar standards are often considered equivalent to an Australian veterinary degree, allowing for those individuals to work as veterinarians within Australia. There are many degrees that do not demonstrate equivalency, and to be eligible to be registered and work as a veterinarian in Australia, the individuals that hold those degrees must undergo the Australasian Veterinary Examination (AVE) to demonstrate competency.

Migration has a role in helping address the shortage with immediate effect, allowing longer term solutions time to mature. In areas of high need, the regulatory body has some flexibility to provide limited registration if risk to the community can be managed. Examples of this include specialist trained veterinarians without a primary equivalent veterinary degree or veterinarians registering for specific roles (e.g., on plant veterinarians).

There are a number of challenges faced by overseas veterinarians with equivalent degrees due to the visa requirements and permanent residency restriction. Although there is a clear pathway for individuals without equivalent degrees to be able to work as a veterinarian in Australia, it takes a significant time and financial investment to complete this process.



#### **(f) the arrangements and impacts of providing after-hour veterinary services**

Maintaining standards of animal health and welfare, and public health, requires veterinary services and a veterinary workforce to be available outside of regular business hours. The methods the profession has of managing after-hours veterinary services varies 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. Dedicated emergency centres tend to operate on a shift work model, to provide their service. 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.

The requirement to provide an afterhours service, without resource to increase staffing levels and adequately compensate for often difficult and stressful overnight and weekend emergency work, has a negative impact on working conditions and job continuity for many veterinarians. After hours has been raised as a factor that contributes to poor mental and physical health, particularly the requirement to be available 24/7, with no ability to rest and protect wellbeing. It is also a factor that negatively impacts recruitment and retention. Finally, afterhours care outside of a large emergency hospital poses a safety risk for staff on call.

The accepted model for managing the provision of afterhours care 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 resulted in overall reduction in veterinary services available to the community outside business hours, which negatively impacts animal and human welfare.

#### **(g) the impact of the current legislative and regulatory framework on veterinarians**

It is in the interests of the community that the provision of veterinary services is regulated. Regulation of the veterinary sector is a partnership between government and the veterinary profession. The profession itself has a strong interest in ensuring that appropriate standards of care are maintained for continued high standards and integrity. This is crucial for the maintenance of public safety, and confidence in the profession.

Veterinarians are amongst the most trusted occupations, being highly educated and with professional conduct requirements for the priority of animal and public health, that are regulated and enforced. They provide community protection and safety otherwise not achievable.

Regular review and development of legislation is needed to support modern veterinary practice to provide protection of the public from harm whilst remaining innovative. Too little attention to regulation leads to poor animal health and welfare outcomes, as standards decline. Veterinarians, as experts in their field, and governed by a strong professional and ethical code equivalent to that of the medical profession, provide a vital element - their expertise and judgment underpin the community obligation to the health and welfare of animals. Their involvement also provides a safety net where animal welfare regulation may not be precise enough.

##### *Regulation currently only extends to veterinarians*

The existing regulatory framework in NSW only regulates veterinarians, not the other members of the veterinary practice workforce, such as veterinary paraprofessionals like veterinary technicians and nurses. This is limiting the capacity of the workforce and efficacy of the veterinary team. We would like to see a regulated **veterinarian led team**. Registration of veterinary nurses and para-veterinary staff by the Veterinary Practitioners Board (VPB), legislated through the Veterinary Practice Act (VPA), would



allow the setting of professional standards for this group to work under the supervision of registered veterinarians.

#### *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. The mechanisms to enforce consequences for breaches of restricted acts of veterinary science by non-regulated providers are limited and ineffective. This creates risk to the standards protected by the regulated veterinary profession and directly compromises animal welfare.

#### *Complaints process*

The complaints processes and the policies and procedures executed by the state veterinary board is not meeting contemporary practice. Existing complaints and disciplinary processes, as well as the increased litigious nature of the community, increases psychological risk for veterinarians and adds to the administrative burden of regulation. This can be detrimental to the animal owning public.

#### *Unfunded obligations*

There are a number of Acts that place public good obligations on to the veterinary profession with no method for the profession to recoup the costs. Where it is not appropriate for private funding, and not publicly funded, the regulatory and financial burden is shifted to registered veterinarians. Examples can be found within the NSW *Companion Animal Act 1998* and NSW *Veterinary Practice Act 2003* and include care of wildlife and stray animals.

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

As a generality there has been a decreased demand for the provision of livestock veterinary services compared to companion animal veterinary services. Despite the appropriateness and desire of the profession to shift to providing advice in the area of preventive medicine and optimising production animal health, producers predominant demand for veterinarians continues to be availability of reactive services for individual animals. With increased self-efficacy of animal producers and varying individual animal value, these services remain in decline despite the increase in number of animals within the animal agricultural sector.

The decrease in the number of veterinarians with relevant skills in livestock veterinary services has reached the point that there is now not sufficient capacity within the profession to meet the low demand required by livestock producers. This is reflected in the low percentage of the veterinary workforce providing livestock veterinary services and the aging demographic of that workforce. This could be considered a classic example of a "use it or lose it" scenario, where veterinary registration does not permit a lack of competency. The unintended consequence of industry optionally engaging with the veterinary profession, after a history of it being delivered as a funded public good, has meant that even aspects of veterinary service that producers may require become no longer available.

This is very concerning, as private veterinarians are an integral contributor to effective animal welfare practices and are at the forefront of disease surveillance. Their absence places Australia's biosecurity system at great risk and threatens access to trade markets.

Reduced engagement of veterinarians in production animal practice has meant that rural veterinary practices are highly reliant on companion animal practice to maintain viability. The rural companion animal veterinary service provision model, without professional supports such as dedicated emergency afterhours hospitals, is not as sustainable for veterinarians and veterinary team members as the urban companion animal veterinary service model. This, combined with additional personal factors such as





reduced access to vital community and support services (e.g. childcare, medical care), has led to an overall reduction of rural veterinary businesses.

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

The management of homeless animals, treatment of injured and ill animals (large and small) with no known ownership is expected when affected animals are presented to a veterinary practice. As these animals are either owned by the crown, unowned or displaced, the cost of care provided by the veterinary practice is generally unable to be recouped. The profession undertakes a number of roles in providing care to this group of animals and these require infrastructure, education, skills, and equipment to deliver.

Despite the collection of animal management fees, impoundment fees and government grants for decades by local government, there is no consistency of payment for use of veterinary services or private infrastructure for the management of lost, stray, and homeless animals and the cost is frequently borne by the private veterinary sector. Payment is individual local council dependant with some supplementation from government and privately funded charities, which rely on donations to provide payment for veterinary services. There is a lack of consistency between local councils of how they interpret legislation, engage, and pay veterinary practices to manage strays and provide expertise around animal management in times of crisis. The unpredictability of work without appointment can result in difficulty for overworked veterinarians to provide immediate services which impacts animal welfare.

The expectation of veterinary hospitals being obligated for emergency work without appointment or payment for animals that are not owned puts unreasonable expectation on veterinary hospitals. Financial impact affects the viability of veterinary businesses and on-flows to the remuneration and working conditions of veterinarians and staff.

**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**

The current inadequate capacity of the veterinary workforce is negatively impacting on all aspects of animal welfare, and places animal related industries at risk in terms of both biosecurity, and national and international social licence. The acceptance and approval by the community of animal industries to operate is contingent on the premise that animal health and welfare is maintained to appropriate standards. Veterinarians are critical in ensuring these standards are maintained and evolve as new evidence comes to light through research. Often animal related industries infer that veterinarians are an essential component of how their animals are managed which helps maintains their social licence and continued access to operate and trade, yet the inclusion of veterinary services is optional. This is a factor that has contributed to the current inadequate capacity of the veterinary workforce.

The optional model of veterinary engagement in some animal production systems means risk mitigation techniques around Emergency Animal Disease (EAD), such as surveillance, are no longer occurring at an appropriate level and putting animal welfare and social licence at risk.

From the perspective of the individual animal, at the very best the inadequate capacity to provide veterinary knowledge and services to meet demand results in a delay in care; at worst, it results in no care; and, in some cases, leads to prolonged suffering or an inhumane death.



**(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**

Access to veterinary care for members of the public, particularly those with lower incomes or who live in regional, rural, and remote locations, can be hindered by several barriers. The same social determinants of health that impact human health outcomes also have impacts on animal welfare.

- Affordability in light of the costs of delivery and business model -This particularly impacts those with lower incomes. Given the lack of public funding and the necessity of care to maintain legislative obligations, the full cost of care needs to pass on to the animal owner or any costs of public good need to be absorbed by the veterinarian. The profession's necessity and desire to manage affordability for animal owners and deliver public good has resulted in underinvestment in the labour component and is a major factor contributing to the shortage.

Mechanisms to try and address affordability are currently in the form of pet insurance and buy-now-pay-later schemes. They have assisted to some degree in the mid to higher socioeconomic community groups, but are not adequate for lower socioeconomic groups, as they are expensive or can increase debt dependence.

- Inability of the profession to service people experiencing vulnerabilities - In the human health sector there are allied industries that provide mechanisms for people to access human health care. In the veterinary profession such mechanisms are extremely limited.
- Distance to travel- This has become increasingly problematic in rural areas for both large and small animals, particularly when veterinary services have been discontinued.
- Stigma or Fear of Judgment

**(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**

The veterinary workforce is a complex system. There are many factors interplaying with each other, in some cases synergistically while at other times antagonistically. The veterinary workforce shortage has been decades in the making, and the AVA is of the opinion that while there are some short-term stop gap strategies that can be put into place to assist, longer term strategies are required for sustained improvement.

The AVA believes there are intervention points to break the pathway to inadequate capacity and to deliver veterinary knowledge and services to meet demand. Some of these are within the remit of the profession to develop and apply, while others require external support from those who benefit from the veterinary profession - that is, the wider veterinary industry, animal related industries, and the community through the government.

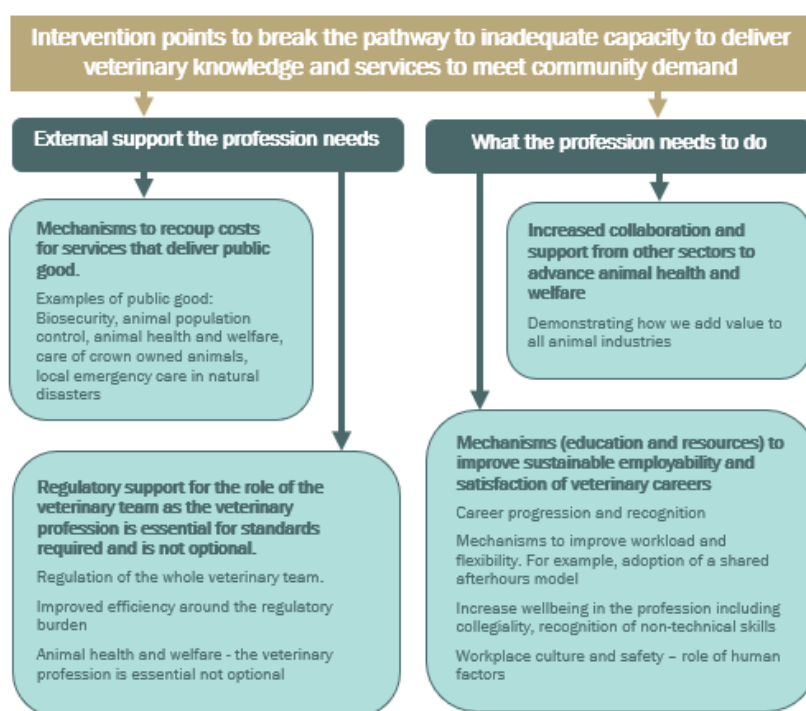


Figure 2- Intervention points to break the pathway to inadequate capacity to deliver veterinary knowledge and services to meet community demand.

Long term strategies must address the long-term outcomes the profession needs to achieve. These outcomes include:

- Sustainability of the profession by reducing financial vulnerability, with particular reference to recouping costs for services that deliver public good.
- Regulatory support for the role of the veterinary team, and recognition that the veterinary profession is essential for standards required, not optional.
- A workforce that is able to adapt to generational and societal change around workforce participation and surge at times of increased demand.
- A vibrant rural veterinary community where the veterinary roles are sustainable and satisfying, all animals in those communities (livestock and companion animals) have access to veterinary care, and veterinary involvement in animal production systems is mandated as essential to enhance animal welfare and biosecurity.

These outcomes require complex and careful thinking and legislative reform along with resources to prioritise and develop the long-term strategies that will provide the most effective outcomes for all stakeholders the veterinary profession serves, and the profession itself.

Short term strategies are also required to act as a stop gap to allow resources to be directed to developing the longer-term solutions. The AVA believes there a number of shorter-term strategies that would be of benefit, including:

- Educational fee relief, as an incentive to increase the number of early career veterinarians into rural and regional areas.
- Reduction of barriers to assist overseas trained veterinarians and veterinary nurses to enter Australia and achieve permanent residence.



- Inclusion of registered veterinarians within other current mechanisms to sustain medical and paramedical workers in rural areas, under the accepted One Health model approach for health in Australia.
- Increase exposure of veterinary students to rural veterinary practice by providing support for veterinary students wanting to participate in work integrated learning (WIL) placements rurally and remotely.

#### **(m) strategies to improve access to veterinary care**

The AVA's top welfare objective is that any animal that is under human care in Australia should be able to access veterinary care, and strategies must address the barriers to veterinary care.

Given that the structure of the profession has evolved to a predominantly privately funded system, the key to improving access to veterinary care to the whole community is to support the existing structure that is in place and ensure there is synergy and symbiosis with government veterinary services and registered charities.

To improve access to veterinary care the AVA would like to see:

- Government funded support of veterinarians to be able to provide more affordable and accessible veterinary care to those who qualify. Including support for veterinary care of animals not privately owned such as wildlife, stray, homeless and feral animals.
- Collaboration of the profession with animal industries to develop long term strategies to improve access of veterinary care and maximise animal welfare as well as improve biosecurity.
- Expansion of the regulatory framework of the veterinary profession to include veterinary nurses, veterinary technicians and potentially paraprofessionals. These professionals would need to operate under the licensure and supervision of a registered veterinarian to ensure monitoring, accountability, and maintenance of required and regulated standards.
- Collaboration with other sectors to allow improved access to social supports for people experiencing vulnerabilities.

## **AVA Recommendations**

In the context of the current inquiry into veterinary workforce shortages in New South Wales, we present a series of 16 vital recommendations. As will be evidenced in this submission, the strategies needed to address this issue require complex system engineering thinking, innovation and collaboration. These will need to be considered in the context of long-term outcomes and risk of both anticipated and unintended consequences. We are of the opinion that Recommendations 7, 13, and 14 are of particular importance to progress sustained long term outcomes that will result in improved access to veterinary care to the community.

The AVA believe interventions with shorter term outcomes are also required to provide support while the longer-term outcomes are progressed. Recommendations 1-6, 8-12 and 15-16 speak to these.

We believe these recommendations provide the foundation for constructive dialogue and serve as a roadmap for strategic improvements to safeguard and fortify the veterinary workforce. They underscore the urgency of addressing workforce shortages while also illuminating pathways towards long-term solutions and the sustainable growth of the profession. Each recommendation underscores an aspect of the multifaceted issue at hand, presenting the government with a comprehensive framework for action. Through implementing these recommendations, we can advance towards a





future where the veterinary profession is supported, resilient, and capable of meeting the diverse needs of our society.

**Recommendation 1:** The NSW Government commit to ongoing recognition and support of veterinarians to continue to build and maintain capacity for Emergency Animal Disease surveillance and response activities.

**Recommendation 2:** The NSW Government consider the pressing concerns experienced by government veterinarians and conduct a comprehensive review and develop a proactive strategy to support the critical work of our government veterinarians, ensure the health of our livestock, and maintain our ability to respond effectively to biosecurity threats and animal welfare 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.

**Recommendation 4:** The NSW Government consider funding a public awareness campaign to address the rising rates of verbal and physical assault of veterinary teams and to educate the community on the impact of their actions. For example, similar to the [NSW Ambulance 'It's Never Okay'](#) campaign.

**Recommendation 5:** The NSW Government consider funding for the profession to provide work integrated learning (WIL) opportunities for overseas veterinarians wishing to work in NSW as well as funding to assist international NSW applicants undertake the Australian veterinary examination process without financial hardship.

**Recommendation 6:** The NSW Government support changes to visa provisions including lifting of the age cap for permanent residency to be in line with the human medical field.

**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.

**Recommendation 8:** The NSW Government Veterinary professionals are extended the same opportunities as other professions that are being encouraged to move to regional, rural and remote areas.

**Recommendation 9:** The AVA calls upon the NSW Government to explore solutions that support the veterinary sector in its role with stray animals, addressing the key issues outlined and promoting overall animal health, welfare, and public health.

**Recommendation 10:** The NSW Government commits funding to develop and implement a framework that provides regulatory and appropriate financial support to the provision of veterinary services for lost, stray and homeless animals, injured wildlife and during emergency situations provided by all sectors of the profession (charities and the private veterinary sector).

**Recommendation 11:** The NSW Government through funding encourages industry and the veterinary profession to collaborate and develop a framework or solution that will improve integration of veterinary services into animal production systems that is workable for all parties.

**Recommendation 12:** The NSW Government support extending access to the national Translating and Interpreting Service for veterinarians.

**Recommendation 13:** The NSW Government provide funding to resource the development of prioritisation and planning of the longer-term strategies that will have the most effective workforce outcomes for all stakeholders the veterinary profession serves and the profession itself.

**Recommendation 14:** The NSW Government commit to legislative and regulatory reform to safeguard the role of the veterinary profession in the delivery of animal health and welfare, whilst making it adaptable to a constantly changing environment. This could be achieved by a review of the veterinary



practice act and consider the interactions with other legislation including the prevention of cruelty to animals act.

**Recommendation 15:** The NSW Government considers funding around educational fee relief to encourage early career veterinarians to work in rural NSW.

**Recommendation 16:** The NSW Government includes veterinarians in existing mechanisms to sustain medical and paramedical workers in rural areas of NSW.

## Introduction

Animals are deeply embedded into the Australian way of life, contributing to the social, cultural, environmental and economic fabric of society.

Sixty nine percent of households have a pet<sup>1</sup>, the highest rate of pet ownership in the world. Around 90% of pet owners report that pets have a positive impact on their lives, with over 60% of pet owners referring to their pet as a member of the family, and the human-animal bond provides a myriad of benefits that directly and indirectly improve the health and wellbeing of the community. <sup>1</sup> The expenditure in pet care for 2022 was \$33 billion.<sup>2</sup>

In addition to this, animal related industries are important contributors to the economy. In 2022, the gross value of livestock disposals was some \$25 billion, of which 61.2% (\$15.3 billion) was from the cattle industry. A further \$9.1 billion flowed from livestock products such as wool, milk and eggs.<sup>3</sup>

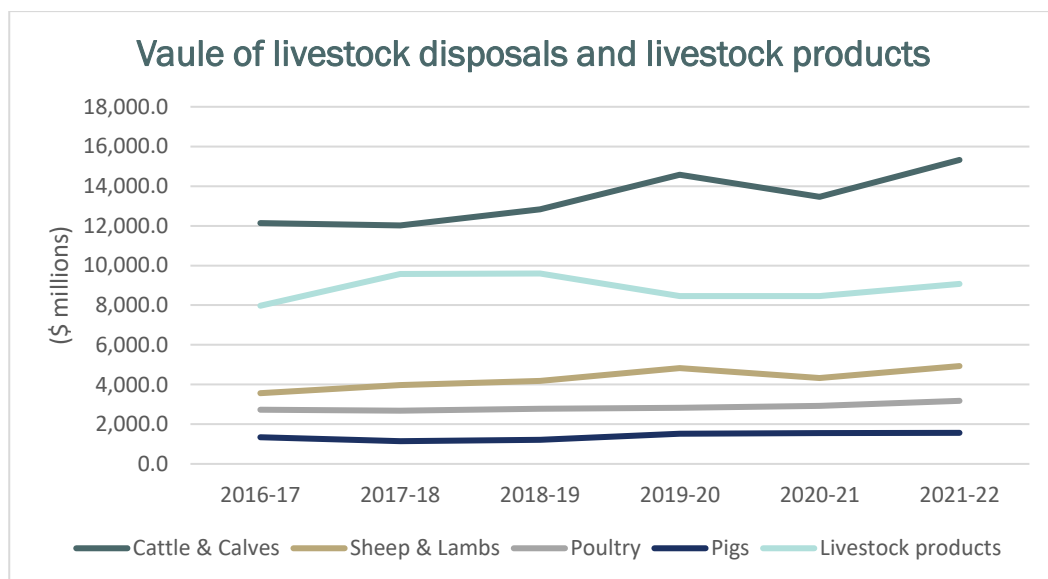


Figure 3 – Value of Livestock Disposals and Products, 2016-22 (\$ millions)

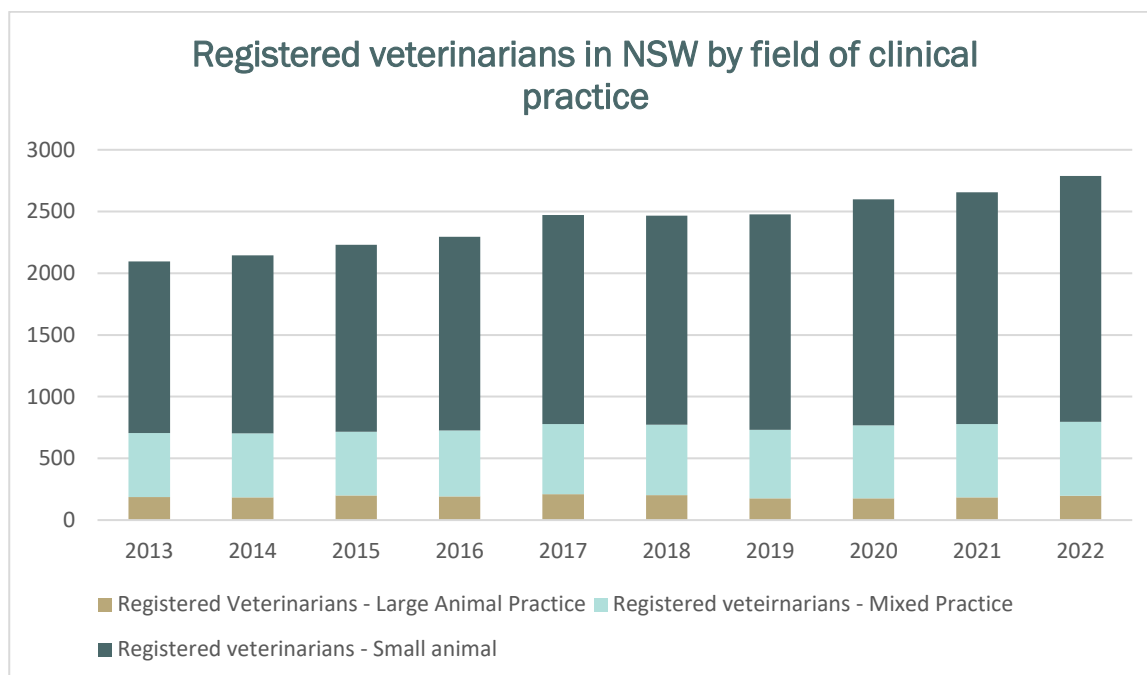


Figure 4 – Registered veterinarians in NSW by field of clinical practice

Australia has varied and unique wildlife of high intrinsic value and cultural importance. Their interaction with humans is high, and many wildlife require veterinary services, either as a result of harmful interactions with humans, naturally occurring disease, or natural disasters.

*Structure of the veterinary profession and its place within the community*



Figure 5 – The context of the veterinary profession, within the veterinary industry, animal related industries, and community

The veterinary profession sits within the wider veterinary industry, and the veterinary industry supplies the veterinary profession with goods and services to deliver the veterinary care to the end user, animals, and the community. Examples of stakeholders within the veterinary industry include veterinary pharmaceutical companies, veterinary laboratory companies and veterinary medical equipment supply companies. The veterinary industry supports wider animal industries and includes



the livestock animal production business, animals used for entertainment and leisure (e.g., racing, equine sports) business, pet food and pet supply companies, and livestock food manufacturing companies (Figure 4). The veterinary profession impacts all of the community, irrespective of if they own an animal or not, and the veterinary industry and the animal related industries make a large contribution to the economy. The existence of both the veterinary industry and animal related industries relies on the veterinary profession to deliver or use their products or contribute to the social licence to operate. Reduced viability of the veterinary profession poses an economic and social risk to the entire Australian community.

The veterinary profession provides veterinary care to a large variety of animal species. Unlike the human health sector that is a combination of the public and private sectors, the vast majority of the veterinary profession sits within the private sector, with over 80% of the profession working within small to medium businesses. Nationally there were 14,986 registered veterinarians in 2022. These veterinary teams provide veterinary services to over 28.7 million pets<sup>2</sup>, in addition to Australia's wildlife, animals within racing industries and livestock. To provide a comparison there are approximately 130,000 doctors to care for 26.5 million people.

In 2023 it was reported that there were 3,715 businesses nationally and 15% of the private sector is corporatised by three companies, additionally there are a number of other small corporate entities within the sector.<sup>4</sup> Thirty percent of the veterinary sector is based in NSW, where there are estimated to be 1,000 private veterinary businesses in operation. There are 4,396 registered veterinarians in NSW. Sixty one percent are within the metropolitan area, 31% in inner regional Australia, with 8% rural and remote.

The private veterinary profession provides veterinary services for individuals on a fee for service basis; however, the community and government expect it to provide a large range of services that provide public benefit (or public good)<sup>5</sup> Some of these are mandated by the government through veterinary registration (such as treatment obligations for pain and suffering), while others are a community expectation (discounted desexing to assist with animal population control). There is also often a public dimension or externality for community benefit as a result of the private veterinary service; for example, managing endemic parvovirus through high vaccination compliance. Unfortunately, decades of public benefits provided by the private sector without adequate support is putting at risk the sustainability of the veterinary profession and, by extension, the public benefit that it provides for the community.

Currently we know there is inadequate capacity to deliver veterinary knowledge and services to meet community demand, which leads to animal health being compromised, poor welfare outcomes, and increased risk around biosecurity and biodiversity, as well as negative impacts on human health and well-being. There are insufficient veterinarians available and the reasons for this will be discussed throughout the submission. However, the causality is largely due to financial vulnerability, through insecurity of payment, creating underinvestment in the labour component of the profession.

Financial vulnerability is caused by several factors including the cost of delivery of 21<sup>st</sup> century veterinary care that the community expects, the inability to recoup the full value of services that are delivered for the public good, and finally the regulatory requirements to maintain standards as well as legislative shift away from the veterinary team.





## Inquiry Terms of Reference

The AVA provides the following responses to each of the Inquiry's Terms of Reference.

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

A workforce shortage has been present in multiple areas within the veterinary profession for several decades, this includes livestock veterinarians, pathologists, and government vets. This shortage has expanded into all sectors of the profession and for the last seven years has been formally recognised by the relevant Commonwealth Government agencies as a skill shortage occupation.<sup>6</sup>

The drivers of inadequate capacity vary between differing sectors of the profession. In some instances, inadequate capacity may be due to long term decline in demand, as is seen in livestock veterinary services. On the other hand, inadequate capacity in the companion animal sector (where there is a connection with an individual animal (emotional or high value) e.g., small animals, horses, peri-urban very small holding) is being driven by a rapid increase in demand due to increase in animal ownership and requirement for veterinary services.

Regarding the supply of veterinarians, Australia is recognised as graduating a very high number of veterinarians every year, around 750 veterinarians per year, which is one of the highest rates per capita in the world. This is reflected in the increase of registered veterinarians of around 4% per year compared to the population growth rate of ~1%/year (Table 1) The 2021 census suggested that only 63% of people with veterinary science qualifications (and 69.74% in the labour force) were delivering clinical veterinary services.

Year	Veterinarian numbers in Australia	Year by year difference	Growth	Population growth
2022	14,986	993	7.10%	0.99%
2021	13,993	- 353	-2.46%	0.98%
2020	14,346	498	3.60%	1.23%
2019	13,848	1,079	8.45%	1.51%
2018	12,769	1,079	8.93%	1.58%
2017	12,083	686	6.01%	1.63%
2016	11,418	665	6.07%	1.58%
2015	10,954	464	4.37%	1.49%
2014	10,629	325	3.08%	1.55%
2013	10,548	81	0.82%	1.68%
2012	9,929	619	6.26%	1.66%
2011	9,894	35	0.36%	1.53%

Figure 6 Change in number of registered veterinarians in general practice in NSW (Source: Veterinary Practitioners Board of NSW Annual Reports [2013](#) and [2022](#))



The hours veterinarians work has evolved to reflect that of greater society in the last 20 years, with the average work week of the profession reducing to 35.5 hours/week.<sup>7, 8</sup>

Notwithstanding the reduction in average working hours, the growth in the number of veterinarians means that growth in available veterinary hours has still exceeded the growth rate of the general population. Full time equivalent (FTE) veterinarians working in veterinary services (which aligns with clinical practice) in NSW have increased from 1,742 in 2011 to 2,505 in 2021. This growth exceeds the growth in the general population and has seen the FTE number of clinical practice veterinarians in NSW increase from 252 per million population in 2011 to 310 in 2021.<sup>7</sup> As a generality the part time participation rate of the veterinary workforce is slightly lower than the general population.

While population growth has previously been a useful indicator of companion animal demand for veterinary services, this appears to have been decoupled in recent decades as animal ownership rates fluctuate, consumer expectations on levels of service have grown and the complexities of modern veterinary care have developed. Hence, the relatively rapidly growing profession still falling behind growth in demand for veterinary hours.

There are several data sources that provide information around the demographics of the profession. As a generality, 70% of the current profession is female.<sup>7-9</sup> This is likely to continue to increase as the proportion of females who apply to study and are studying veterinary science is higher.<sup>15</sup> The proportion of female large animal veterinarians is lower, with 46% equine veterinarians being female, noting the gender distribution reflects the broader profession for those in early to mid-career.<sup>10</sup> Currently, as a generality, the majority of females are under 40 years of age and the majority of males are over 55.<sup>7</sup>

The changing demographic of the profession is not unique to veterinary science, as workforce participation rates of females has increased this has been seen in numerous health related sectors.

#### How does the veterinary profession remuneration and participation compare to other professions?

When compared to other professions (in particular dental practitioners and general medical practitioners, whom have similar academic requirement and educational debt), the proportion of part-time to full-time veterinarians is marginally higher than in human medicine general practice, but significantly lower than in dental where over half of dental practitioners work part-time (Figure 7).

The below chart and table show the labour force state of these occupation groups in the 2021 ABS Census data.



Figure 7 -- Labour force state of these occupation groups in the 2021 ABS Census data.

This is mirrored when looking at the labour status of persons with Dentistry, General Medicine, and Veterinary science qualification. Here we also see that participation rate of persons with veterinary science qualifications at 82.37% sits between that of general medicine (85.38%) and dentistry (77.46%).

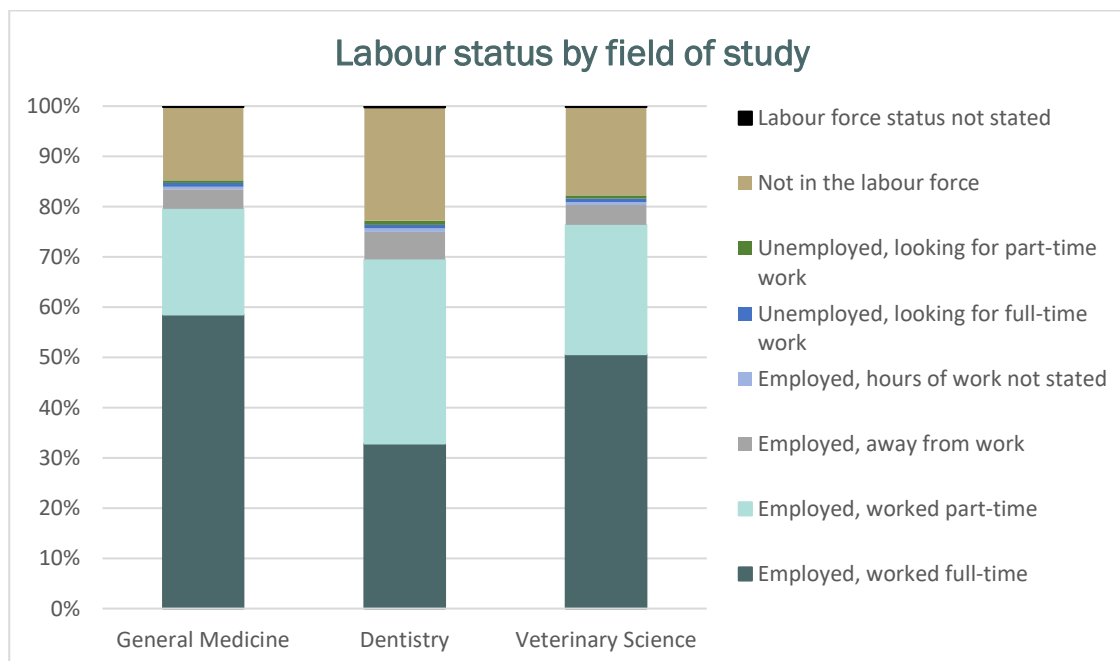


Figure 8 -- Labour status by field of study



When comparing the number of hours worked in greater detail, fewer than 30% of dental practitioners work 40 hours or more per week. This compares with just under 50% of veterinarians and just over 50% of general practitioners.

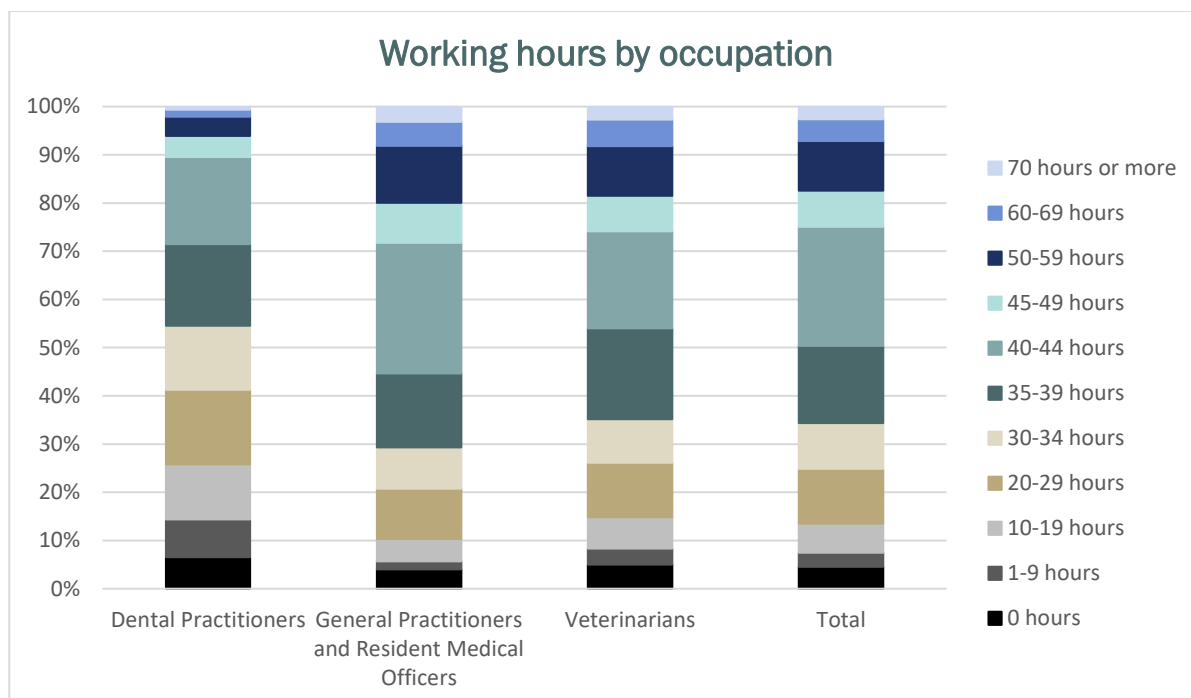


Figure 9 - Working hours by occupation

This should also be considered in the context of the remuneration that is available to each of these comparable groups. Incomes of dental practitioners and general practitioners are similar with approximately 50% of each earning \$156,000 or more per annum. This compares with only 14.51% of veterinarians. Further, fewer than 20% of dental practitioners and general practitioners are earning less than \$91,000 pa, compared with just over 50% of veterinarians in that category (Figure 10).



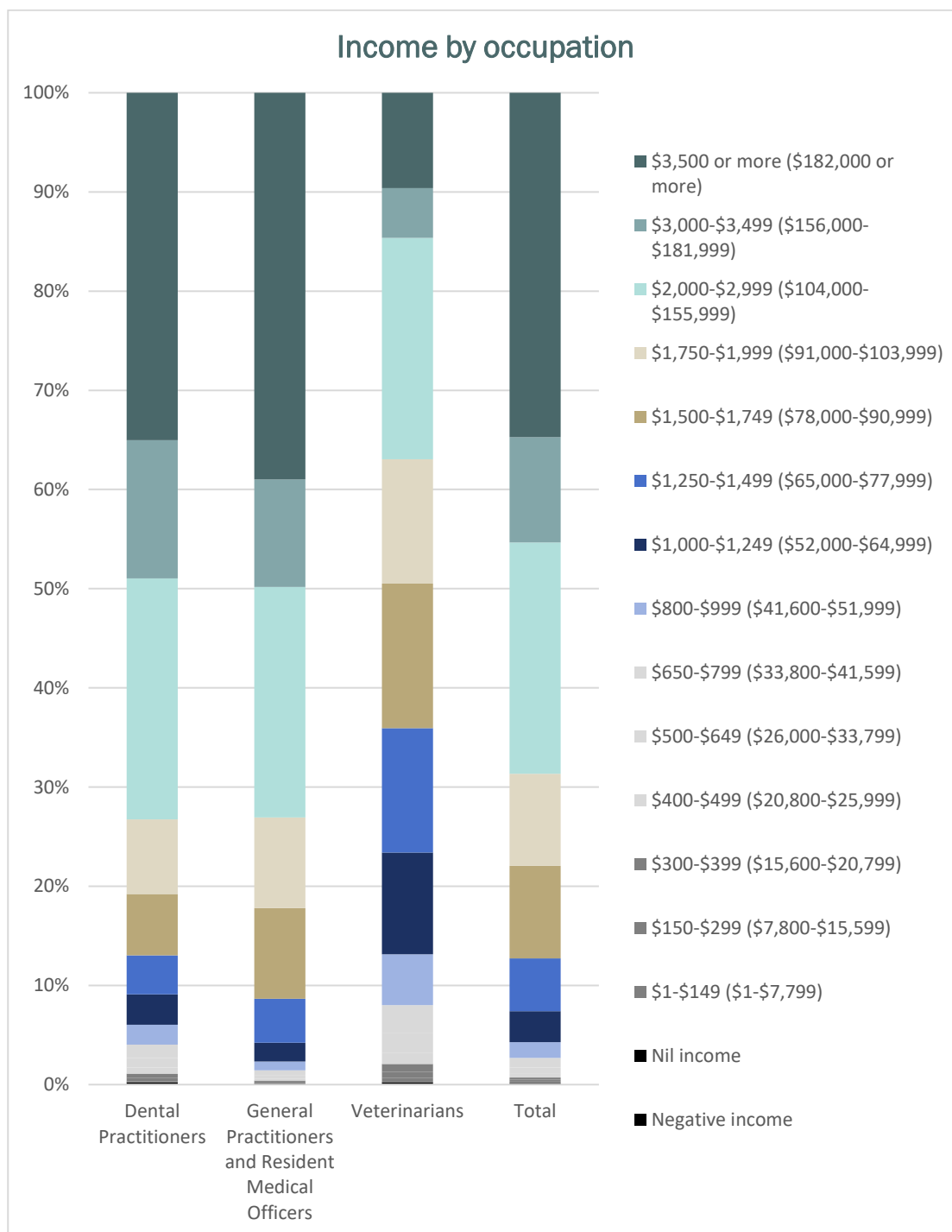


Figure 10 – Weekly (annual) income by occupation

## Clinical – Small, mixed, and large animal practice

### Evidence of a shortage of livestock veterinarians

As is described in TOR (h) the veterinarian’s role in agriculture and agricultural systems has changed dramatically in the last 50 years, and the demographics of the veterinary profession have shifted and what was traditionally an agricultural profession now shows a proportional decrease in livestock



veterinarians compared to companion animal veterinarians.<sup>11</sup> The numbers of private practitioners in rural areas have not kept pace with urban areas during the last 2 decades of the 20<sup>th</sup> century, and the percentage of rural veterinarians within the entire workforce slightly decreased from 42% in 1981 to 39% in 2001.<sup>12,13</sup>

Evaluation of recent ABS data demonstrates continued growth of veterinarians (head count) in both cities and rural areas.<sup>7</sup> However, this does not directly translate to an increase in availability of livestock veterinary services, as many businesses have modified their model to predominately companion animal practice. In the 2021 AVA survey although there were 30% of practices that participated in large animal work only 1.56% were exclusively livestock practices, with the majority providing services to companion animals with a small component of large animal work.<sup>8</sup> Further to this, only 2.02% of veterinarians identified as exclusively livestock veterinarians and 6.89% identified as mixed animal veterinarians who may provide livestock veterinary services.<sup>8</sup> Approximately 5% of total veterinary hours is spent on production livestock.<sup>8</sup> In light of the growth in the agricultural sector and the ambitious goal of becoming a \$100 billion industry by 2030, the small number of veterinarians providing livestock veterinary services is even more concerning.

#### Evidence of a shortage of equine veterinarians

Research undertaken by the AVA suggests around 8% of the veterinary workforce works in equine practice, vacancy data provides evidence that there is a shortage of equine veterinarians.<sup>8</sup> In 2019, a survey of equine practitioners found that 68% of practices found it difficult to recruit equine veterinarians and 41% of respondents were considering leaving equine veterinary work. (Equine Veterinarians Australia unpublished 2019) Further follow up research has suggested that there is a high attrition rate early to mid-career that is in part due to lack of a structured career progression pathway in the equine sector.<sup>10</sup>

Grass roots evidence that there is a shortage of equine veterinarians in NSW and immediate surrounding areas is provided by the increased number of equine practices that are no longer able to offer a full suite of service, including afterhours emergency care.

*“The clinical and academic facility the Veterinary Clinical Centre, Charles Sturt University located in Wagga Wagga NSW was closed for emergency, afterhours referral surgery and intensive care cases from the 7<sup>th</sup> February, 2023 till 18<sup>th</sup> May, 2023. A similar situation is occurring with a private practice in the Canberra region which affects the surrounding NSW regions”*

#### Evidence that we now have a shortage of small animal veterinarians

While the numbers of small animal veterinarians have been growing, this has not kept pace with the demand for small animal veterinary services. This demand growth is due to increases in the number of dogs and cats in the community, increasing demand for veterinary services per animal and the changing landscape of veterinary care, characterised by the increasing complexity of care, higher community expectations, and a lower tolerance for risk of the profession.

*“Another contributing factor is the amount of time each veterinarian spends with each patient at each visit. This has steadily increased over time. As a sweeping generalisation I would say each visit has tripled over my 30 year career. Consultations times used to be 10 to 15mins, they now are commonly 30min. It is a product of higher client demands, and the goal of veterinarians to perform “gold-standard” care. It has had an affect of more vets seeing less patients.”*

Figure 11 shows that the rate of growth in the dog and cat population has exceeded the rate of growth in registered veterinarians.

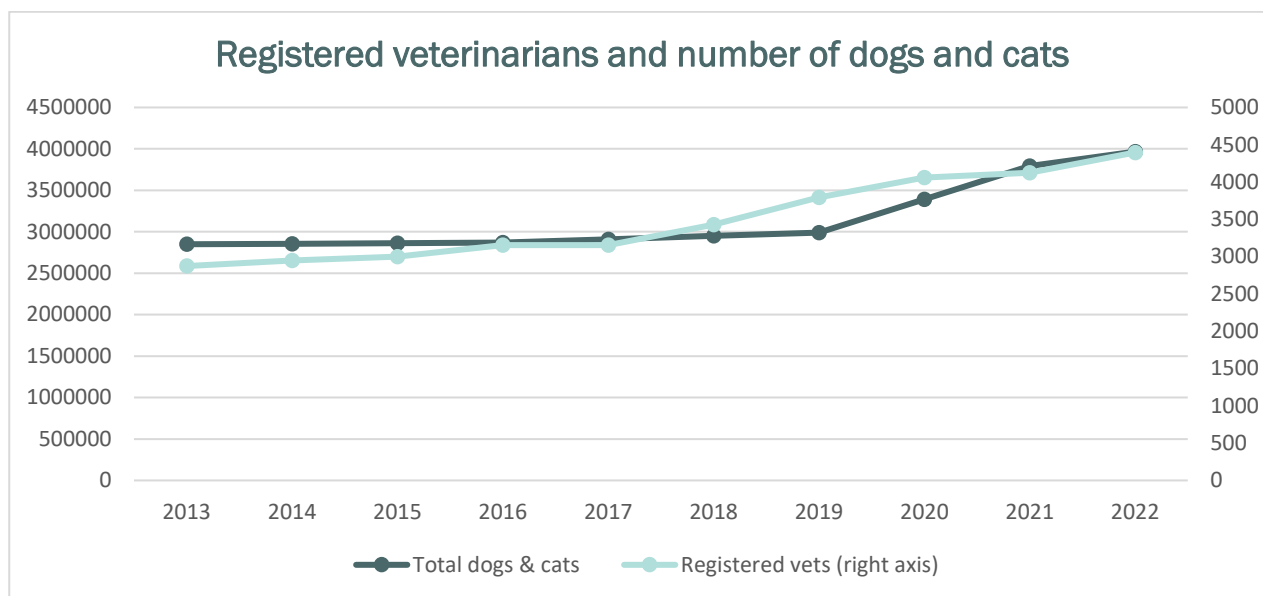


Figure 11 – Registered veterinarians and number of dogs and cats

In addition to the growth in numbers, COVID-19, and the time that many people have spent at home with their pets, has led to a greater awareness of their animals’ health and driven increased demand for veterinary services on a per animal basis.

The 2021 AVA Workforce Survey explored veterinarian vacancy rates. In NSW 63.16% of respondents reported having advertised for a vacancy in the previous 12 months. Of these vacancies, over 40% remained vacant after 12 months.

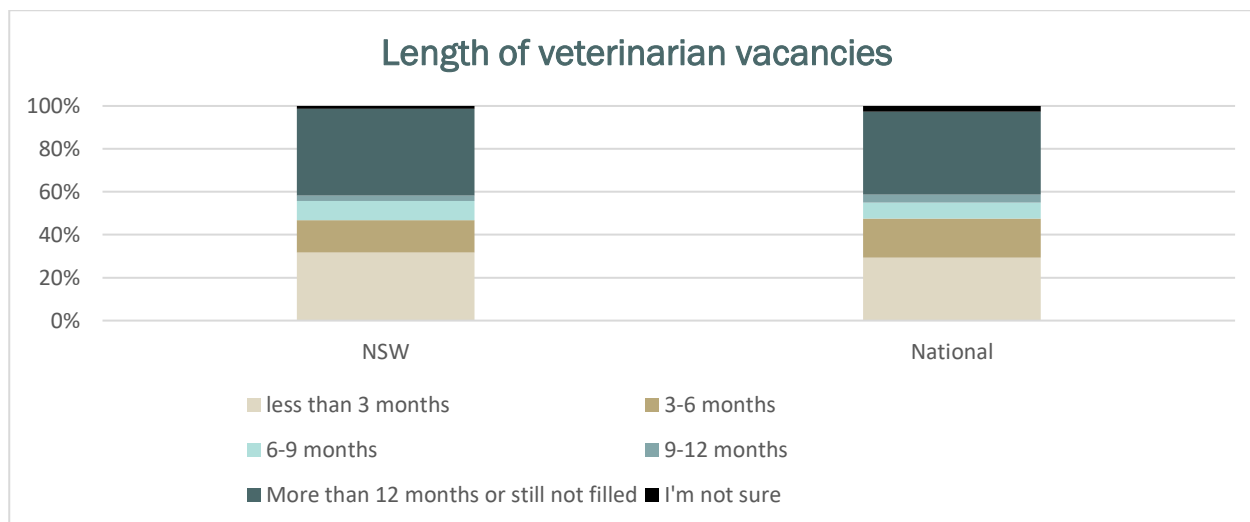


Figure 12 – Length of veterinarian vacancies

When we look at small animal rates at a national level, we find that this is equally the case with small animal practice with 39.47% of vacancies remaining unfilled after 12 months.



Figure 13 – Veterinarian vacancy rates

There is also a shortage of specialist veterinarians across a number of species. Evidence for this comes from vacancy data where there has been a 75% increase in specialist positions advertised over the last three years. (Personal communication Australian and New Zealand College of Veterinary Scientists)

## Government

### National Perspective

The work government veterinarians undertake directly serves the public good, and these include a range of veterinary services including biosecurity, disease surveillance (on farm and in the lab), and EAD preparedness activities. In the 1950s and 1960s, government veterinarians comprised about half of the veterinary workforce. This began to decline in the 1960's and 1970's, in 1968, 30.5% of veterinarians were employed in government service and by 1976 it decreased to 23%.<sup>14</sup> In the latter part of the 20<sup>th</sup> century it reduced even further, with government departments employing fewer than 10% of Australia's veterinarians.

Since 2000 there has been a continuing decline in the government veterinary workforce. Between 2006 and 2021, despite a 53% growth in headcount of veterinarians, there has been very little change in the number of veterinarians working for the government. Consequently, they have declined from making up 4.75% of the veterinary workforce in 2006 to 2.57% in 2021.<sup>7</sup>

The dramatic decline in the government veterinary sector has meant that either veterinary activities are not being undertaken in sufficient quantities or they have been passed onto the private veterinary sector. In the case of disease surveillance, it is a combination of both, which is placing Australia at risk as insufficient surveillance is being undertaken.

There has been an ongoing shortage of Commonwealth government veterinarians working in export abattoirs across Australia, despite continual recruitment programs for several years. There are currently (20/06/23) 16 positions available for On-Plant Veterinarians (OPVs) across Australia. This includes 6 vacancies in NSW. The NSW regulatory body does recognise this and provides restricted registration for some internationally qualified veterinarians working in export abattoirs.

The veterinarians involved with the export of animals and animal products, such as meat, are essential to the provision of the required veterinary health certification for international trade. Without this veterinary certification most of the trade cannot occur. According to ABARES statistics<sup>3</sup>, during the calendar year 2022 Australia exported \$16.2 billion worth of meat and meat products. The export meat area of the Department of Agriculture, Fisheries and Forestry (DAFF) has approximately 160



veterinarians performing functions essential to providing the veterinary health certificates in accordance with international trade rules. These include OPVs, Area Technical Managers, Field Operations Managers, and the National Veterinary Technical Manager. On average, each export meat DAFF veterinarian is responsible for certification of \$101.5 million worth of meat, which would not be exported without the certification.

The shortage of OPVs has had various impacts on OPVs. These include difficulties in accessing leave, leave being denied, lack of ability to release staff for professional development, isolation, significant pressure to attend work even if unwell/ family/caring responsibilities (due to the potential consequences of not turning up for work restricting market access for certain products). The impacts of staff shortages have contributed to making it difficult to retain veterinary staff.

## NSW

In NSW, field veterinary services continue to be provided by District Veterinarians under the purview of Local Land Services (LLS). Their role involves offering advice to land managers and the community on biosecurity and animal health issues and undertaking in-the-field activities related to prevention, preparedness, detection, and response.

However, the government sector has seen a growing difficulty in filling these positions, as job advertisements for District Veterinarians experience prolonged vacancy periods and decreased applicant numbers. The once attractive government pay grades and flexible working environments are unable to compete with the private sector. Anecdotal evidence suggests that while historically, LLS employed veterinarians enjoyed better support for work-life balance and a salary premium of 15-20 thousand dollars compared to privately employed veterinarians, this benefit is no longer apparent. Private employers have improved workplace flexibility and wages such that the benefit is reversed, with LLS veterinarians now often earning less than similarly experienced private practitioners.

The increased risk of EAD outbreaks, such as Foot and Mouth Disease (FMD) and Lumpy Skin Disease (LSD), necessitates the demand for government veterinary services. Yet, with a government veterinary shortage in this area, there is a rising concern about the state's preparedness and response capability in the event of such crises. The situation is compounded by the diminishing number of private veterinarians, particularly large animal veterinarians in rural NSW. To address these risks, the AVA has been supportive of the NSW Department of Primary Industries' Vet Engagement Project to improve and increase engagement of government and private veterinarians for EAD preparedness and response. The project is vital to identifying the important roles of veterinarians in EAD surveillance and outbreak response activities and to increase veterinary participation and capacity to monitor and respond to EAD incursions. This project is due to end shortly and the AVA requests the NSW Government commit to ongoing recognition and support of veterinarians to continue to build and maintain capacity for EAD surveillance and response activities.

**Recommendation 1: The NSW Government commit to ongoing recognition and support of veterinarians to continue to build and maintain capacity for Emergency Animal Disease surveillance and response activities.**

Additionally, the shortage of rural private practitioners leads to District Veterinarians being increasingly called upon to provide treatment services. This shift blurs the clear roles traditionally held between government and private veterinarians. District Veterinarians, often find themselves unable to deliver on these requests for veterinary treatment services due to their remit of responsibilities, as well as the absence of provision of necessary medications and equipment.

Furthermore, we have been advised that due to the shortage of rural and regional veterinarians there has been an increase in the public using the Emergency Disease hotline to locate/request a veterinarian sees their animal. This has put increased pressure on government veterinarians to



provide livestock services where a private veterinarian would have historically attended, or no one attending, which could lead to potentially missing a notifiable or emergency disease.

Lastly, District Veterinarians, akin to their private counterparts, face unique challenges associated with regional and rural assignments. The remoteness of locations, isolation, lack of support services, and the occasional instances of public abuse pose substantial hurdles. Limited opportunities for career progression further exacerbate the issue.

**Recommendation 2: The NSW Government consider the pressing concerns experienced by government veterinarians and conduct a comprehensive review and develop a proactive strategy to support the critical work of our government veterinarians, ensure the health of our livestock, and maintain our ability to respond effectively to biosecurity threats and animal welfare issues.**

## Academia

The Australian veterinary education system is approaching a crisis, with changing needs for veterinarians in many increasingly complex areas and ever more pressure on universities to trim their costs and transform their teaching and research offerings within a relatively inflexible bureaucratic structure. In addition, there are increasingly varied and specialised demands from animal owners and employers that veterinary educators are requested to incorporate into the curriculum. This places enormous pressure on veterinary academics who work in a university environment to teach the next generation, resulting in a high rate of burnout and contributing to the increasing difficulty to attract veterinarians to the academic career path.<sup>15</sup>

It has been acknowledged that veterinary academics are under significant stress and change is needed to safeguard staff well-being and reduce attrition from this sector. The pressure on staff has increased in line with the growing demands of today's large-scale, multidisciplinary research programs and the heightened expectations of students, parents, clients, universities, regulators, and governments. The often-competing demands on staff are felt most keenly by those with a broad range of duties, such as those undertaking both research and teaching or, even more challenging, research, education, and clinical service.<sup>15</sup>

Other drivers for the shortages in the academic sector are changing market forces for specialist level veterinary services within the private sector. Historically opportunities for veterinarians with specialist qualifications were limited to the university sector for a variety of reasons. In the last two decades this has dramatically changed with a large proportion of the veterinary specialists working in private clinical practice. The demand for specialist level veterinary care in the private clinical sector and the financial strain that veterinary schools are under has meant the private sector has been able to outcompete the university sector in regard to remuneration and conditions. On occasion, university employed veterinarians also take on additional work in the private sector to supplement their income. Specialist veterinarians who are currently within the university sector are often there due to their passion for teaching or research.

### Evidence of a shortage of academic veterinarians

Evidence of the decline can be found in the census data with a decline in this aspect of the veterinary workforce. While headcount of veterinarians in the Education and Research sectors increased from 501 in 2006 to 905 in 2021, the share of the overall active veterinary workforce decreased from 7.02% to 6.83% over the period.<sup>7</sup> This was while three new veterinary schools were established, and the number of annual graduates increased from 461 in 2010 to 730 in 2021.





## Research

Veterinarians work in a range of research fields across both animal and human health. The Veterinary Practitioners Board of NSW noted in its 2011 Annual report that there were 58 registered veterinarians working in research and development ([NSW VPB Annual Report 2011](#)). This had grown to 71 by 2016 ([NSW VPB Annual Report 2016](#)). While data in more recent annual reports is available on the gender balance in this field, the number of registered veterinarians is not reported.

## Industry

Veterinarians working in industry undertake a wide variety of roles in a range of industries. These include pharmaceuticals, veterinary equipment, and animal foods, amongst others. Their roles are predominately in providing technical support and advice on commercial products, but also include other roles in these companies, including senior management.

Finding clear data on the numbers of veterinarians in these industries is challenging. One study looked nationally at the pharmaceutical and pathology sectors together and found that FTE veterinarians increased from 201.32 in 2011 to 281.89, with 96% of that increase occurring in the second half of that period.<sup>7</sup>

Looking at NSW specific data, the Veterinary Practitioners Board of NSW noted in its 2011 Annual report that there were 116 registered veterinarians working in the pharmaceutical industry ([NSW VPB Annual Report 2011](#)). This dropped to 110 by 2016 ([NSW VPB Annual Report 2016](#)). As with the Research and Development section above, more recent figures on the number of registered veterinarians are not reported.

## Pathology

The discipline of veterinary pathology is central to the accurate diagnosis of all animal disease, including those of livestock, companion animals and wildlife. High standards of veterinary care require pathological testing just as human medicine does. A strong private and public pathology network is critical to veterinarians being able to perform their roles as clinicians. The advanced diagnostic capabilities that are an expectation of modern medicine require secondary and tertiary pathology centres with a national sample collection framework. Increased scarcity of pathologists may cause a reduction or unavailability of services – impacting animal welfare and increasing pressures on treating veterinarians.

A robust pathology system enhances Australia's preparedness for EAD, enables control of endemic disease, protects public health, supports biodiversity, and contributes to ensuring biosecurity. In Australia, veterinary pathologists are an essential element of the veterinary service in each state to identify quickly and accurately endemic, emerging and exotic/emergency animal diseases. Veterinary bacteriologists, virologists, parasitologists, toxicologists and serologists are also required. However, pathologists are the essential cornerstone.

Until the early 1990s, in most jurisdictions, diagnostic samples from livestock were examined in public state-run veterinary laboratories at no charge to the submitter or owner as a part of surveillance for, and response to, serious livestock diseases. This provided a fertile training ground for veterinary pathologists, microbiologists, parasitologists and epidemiologists. Public government veterinary laboratories have moved to a largely fee-for-service model, although most jurisdictions still maintain them, animal disease surveillance has become far more targeted.



### Evidence of a shortage of veterinary pathologists

A series of reviews conducted since 2000 have identified demographic trends among experienced veterinary pathologists such that serious gaps in service provision will increase within five years and mentoring of trainee specialist veterinary pathologists will soon become difficult or impossible in Australia. The net result is that there are currently insufficient career paths to replace pathologists who are retiring and to maintain this essential discipline. The issues affecting all sectors supporting the Australian economy (livestock, aquaculture, biosecurity, and wildlife) are very similar.

The Australia-wide veterinary pathology active workforce has contracted from 140 FTE in 2007 to 112 FTE in 2023 despite a growth in demand for pathology diagnostic services over this period. This contraction largely reflects retirement (as 50% of the workforce in 2007 were over 50 years of age) and a lack of sufficient training positions over this period. In addition, over the past five years there has been a rise in remote digital pathology services in private laboratories which has drawn pathologists away from university and government positions.

The current Australian veterinary pathologist workforce includes 25 in universities, 51 in private diagnostic laboratories and 36 in government. All sectors report significant difficulties in recruiting suitably trained and qualified pathologists, resulting in many persistent vacancies in both anatomic pathology and clinical pathology.

This is creating bottlenecks in diagnostic work, reducing the number of training opportunities, reducing research, and increasing workload stress on current staff. There is broad concern regarding the surge capacity of this sector of the profession to adequately respond to emergency animal diseases in the future and to continue to meet the diagnostic demands of the veterinary profession.

The Plant and Animal Health Laboratory at Menangle within the Elizabeth Macarthur Agricultural Institute (EMAI) remains the only government veterinary laboratory in NSW. The regional veterinary laboratories in Armidale and Wagga Wagga laboratories were closed in 1996, and the Orange and Wollongbar laboratories were closed in 2009. As a result, the EMAI laboratory services the whole of NSW to detect and respond to every EAD event.

The NSW EMAI laboratory can achieve preliminary results for emergency diseases, such as Foot and Mouth Disease, saving precious time in an outbreak event within NSW, directly leading to reduced financial loss and a faster recovery. Building and maintaining the veterinary expertise and surge capacity of the EMAI labs is essential for the productivity and protection of NSW primary industries.

### **(b) the challenges in maintaining a sustainable veterinary workforce, including recruitment and retention rates**

There are an ever-increasing number of challenges that are faced by the veterinary profession to maintain a sustainable veterinary workforce, and these can be broadly categorised into those:

1. driven by the private sector veterinary profession's financial vulnerability,
2. due to generational and societal change, and
3. due to limited funding for the public veterinary sector.

**1. Financial Vulnerability** - This is caused by a myriad of factors. As almost all the veterinary sector is within the private market, financial vulnerability is a major driver of the challenges in maintaining a sustainable veterinary work force and leads to inadequate capacity to deliver veterinary services and knowledge.



The increasing costs of delivery of veterinary services mean that veterinary services are limited by the community's ability to support them. This leads to funding for veterinary hospitals being linked to local socioeconomic factors rather than animal numbers or societal need. In low socioeconomic operating environments and where costs of service delivery can't be recouped, some veterinary businesses or charities are barely financially viable. Cost of care is unable to be passed onto the pet owning public due to their circumstances. This prevents these businesses from reinvesting into equipment, wage increases, and continuing education for their staff and compromises their capacity to deliver appropriate levels of care and to retain staff. This compromises animal welfare, and results in significant moral conflict for veterinarians confronted with situations where they are constrained in providing the care that could successfully treat their patient.

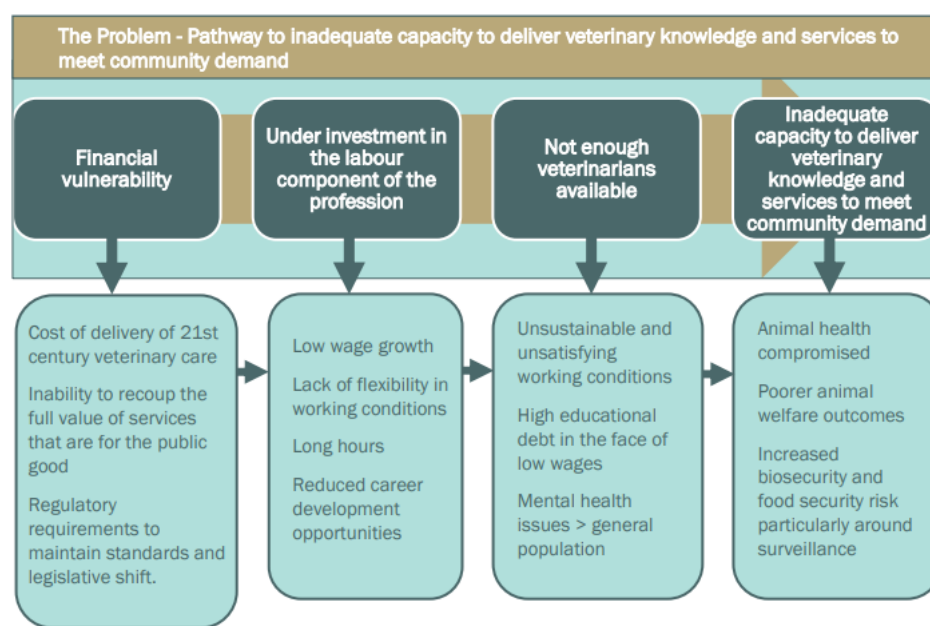


Figure 1 – Pathway to inadequate capacity to deliver veterinary knowledge and services to meet community demand.

The major components that cause **financial vulnerability** within the private veterinary sector include:

- **The cost of delivery of 21<sup>st</sup> century veterinary care** – Increases in cost of delivery of veterinary care has paralleled that of human health care. This cost covers all aspects of the model; infrastructure, equipment, disposables, therapeutics, labour component per-patient for individual patient care, and continuing education. Unlike human health care, the private veterinary profession does not receive formal funding, to assist with maintaining veterinary competency, professional conduct requirements, infrastructure and staffing or professional supports.

*“In the twentieth century technology use in veterinary care revolved around X-ray machines and sending blood off to a veterinary pathology laboratory. These days of digital radiographs, auto blood analyzers, ultrasound machines and even CT scanners and MRI machines have massively increased the costs of setting up a veterinary practice.”*

- **The inability to recoup full value of services that are for the public good** – The structure of the veterinary profession in the 21<sup>st</sup> century requires the private sector to provide a large range of services for privately owned animals and also animals not privately owned. Where services are provided to private animal owners, they occur on a fee for service basis. However, there are also pro bono and heavily subsidised services to unowned animals such as wildlife, care of displaced owned animals (e.g., strays) in an emergency disaster situations and under-priced



services to people experiencing disadvantage. Society benefits from these services being provided but they are frequently without funding and provided at the expense of veterinary businesses and veterinarians.

Some private veterinary services also create positive spill overs (externalities) which benefit the community but are unable to be recompensed. Examples of these include desexing of animals at a discounted rate to assist with animal population control, protection of animal and public health through mandatory biosecurity obligations such as passive surveillance, diagnostic and reporting obligations which may not be fully compensated, and accessibility of veterinary services for emergencies 24/7.

- **Regulatory requirements to maintain standards and legislative shift** – It is essential that the provision of veterinary services is regulated as this safeguards the excellent standards of animal care that the community expects and receives. Section (g) expands on the impact of these on the profession and the challenges around maintaining a sustainable workforce. The regulation of the profession is one of the reasons there is high degree of trust in the veterinary profession, and it is a key player in social licence to operate animal industries.

Financial vulnerability has led to **underinvestment in the labour component** of the profession, despite people being the profession's most valuable asset. (Figure 1) This is evidenced by:

- **The lack of a career pathway** - The veterinary degree provides a broad range of opportunities for career; however, compared to other professions these have not been articulated through structured and funded pathways to more specialised disciplines. Furthermore, the changing demographics of the veterinary profession has meant that historical mechanisms to achieve career progression may now be barriers for early to mid-career veterinarians. There is evidence in some sectors that the lack of understanding of individuals of how to progress their career and the costs associated with this is a key factor involved in attrition.<sup>10</sup> Given the breadth and depth of roles within the veterinary profession, career pathways can take many forms and a holistic framework could provide a more contemporary and user-friendly approach to support the demographics of the profession.
- **Lack of training opportunities for bespoke and highly specific veterinary skill sets** - Across the profession there are a lack of training opportunities for the development of postgraduate skill sets that are required by the community. Examples include veterinary pathologists and veterinary radiologists.
- **Low wage growth**-The earnings of a veterinarian 9 years post graduation is less than the average across a range of education fields. The return on investment of their education is poor compared to other sectors. In addition, the average earnings of Australian veterinarians appear to be falling behind those of other professions.



Average earnings 9 years after university graduation, for those graduating in 2008

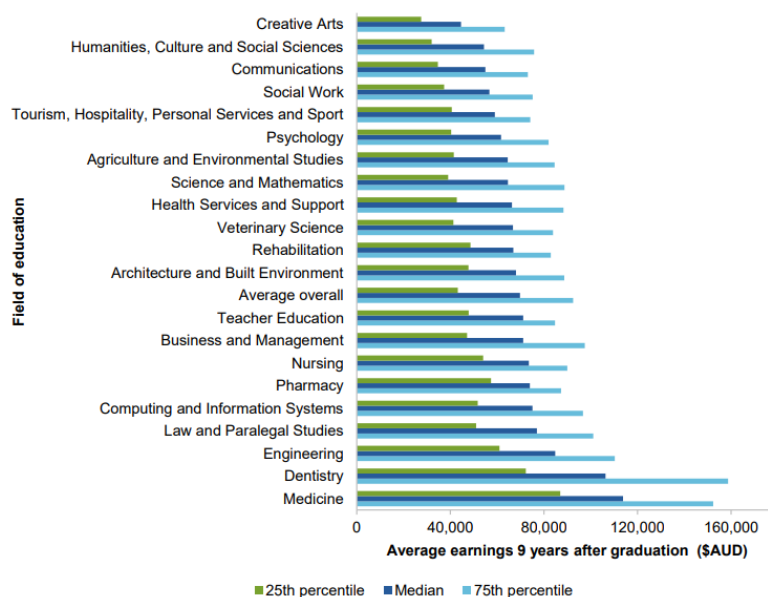


Figure 14 - from [the Productivity Commission's 5-year Productivity Inquiry: From learning to growth, Interim report no. 5 - September 2022](#)

More broadly, from AVA Workforce survey data, the proportion of veterinarians in clinical practice earning over \$80,000 per annum has increased from 42% in 2013 to 53% in 2021. However, when adjusted for inflation, this is a deterioration in real wages for veterinarians.

- **Long hours** – While average working hours have been trending downwards, long working hours are still a significant characteristic of the veterinary profession with approximately 40% of women and 60% of males working 40 hours or more a week.<sup>7</sup> Further, when looking at the veterinarian occupation recorded in the census, almost 20% are working in excess of 50 hours a week and almost 10% in excess of 60 hours. It is likely that these people are working with large animals, as on average, these veterinarians work 10 hours/week greater than the overall profession.<sup>10</sup>
- **Lack of flexibility in working conditions** – The veterinary profession has traditionally been a full-time undertaking, and even now the part time participation rate of the veterinary workforce is less than the general work force.<sup>8, 16</sup> 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.
- **Challenges in re-engaging with the workforce or re-training** - Due to the constantly evolving and changing nature of veterinary medicine, veterinarians who spend time away from clinical practice for any reason can face challenges re-engaging with the profession. This is also true of veterinarians who wish to practice in a field they do not have recent experience in (e.g. switching from livestock practice to companion animal practice). This hampers flexibility in re-joining the workforce.

The AVA has a 'return to work' program which is operated to benefit veterinarians facing this transition, however, private veterinary practices already facing staff resource challenges may not have the ability to give them the necessary support to facilitate a smooth transition.



- **Requirement of afterhours** - refer to TOR section (f)
- **Challenges around workplace safety** - Physical work-related injuries and zoonoses in the veterinary profession occur frequently as a consequence of working with animals. They can also be accentuated by inadequate facilities provided by clients, which is more prevalent in the large animal sector. Veterinarians are often required to work in isolation, both in business hours and after hours, which can place personal health and safety at risk. This risk is increased in areas with heightened levels of crime and antisocial behaviour. Having another team member accompany a solo veterinary practitioner to attend an afterhours call is not financially viable or available. The challenges around workplace safety can contribute to an individual's decision to leave the profession.

Underinvestment in the labour component has led to **less clinical veterinarians being available**, particularly in certain sectors where they have not been able to adapt to changing requirements due to, either decreasing demand (e.g., livestock veterinarians), or lack of capacity (e.g., equine veterinarians.) (Figure 1). The reasons they are not available include;

- **At an individual level the work may be satisfying but it may not be sustainable leading to attrition.** Although the majority of veterinarians (73%) find their work satisfying, around a third of the profession has concerns the work is not sustainable as they are unable to make a valuable contribution while safeguarding their own health and welfare.<sup>10</sup> There is also some evidence that attrition is higher in early career.<sup>10</sup> Factors that contribute to lack of sustainability include excessive workload and long hours, poor wellbeing, workplace incivility, poor health (including burnout) and poor financial returns.

*“The working hours and pay do not allow us to safeguard our health and welfare, as do the stressful circumstances that regularly face us.”<sup>10</sup>*

Research undertaken by the AVA has demonstrated that aspects of the veterinary job that are likely to have the most influence on determining if a veterinarian stays or leaves the profession are; working conditions and culture, extrinsic rewards (salary/ benefits) and flexibility to balance other demands in their lives.<sup>10</sup> In many sectors of the profession the current model does not accommodate many of the attributes that a veterinary worker needs to make their job satisfying and sustainable. The workforce shortage has exacerbated these issues.

**Remuneration: educational debt ratio** - Following five to ten years of study and graduating with a debt of \$70-80,000 for a commonwealth funded student and up to \$300,000 debt for a full fee paying student (domestic or international), QILT data shows veterinary graduates commence on low salaries that have barely kept up with inflation in recent years. Compared with other undergraduates who have undertaken a similar level of education, veterinarians are well behind.

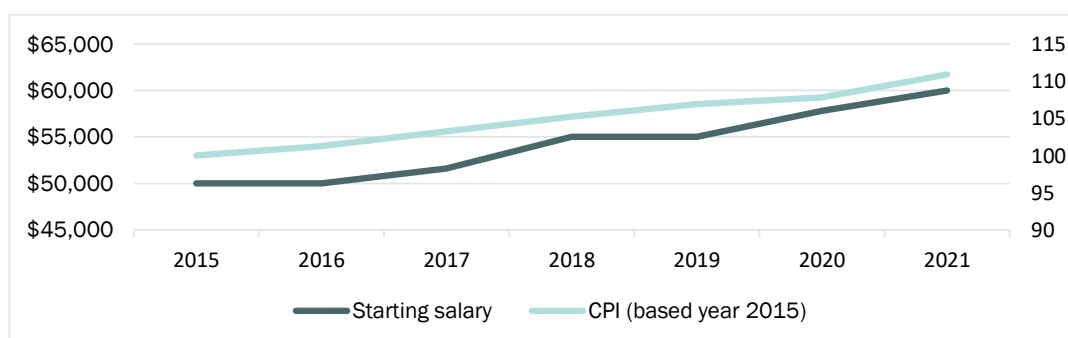


Figure 15 - Veterinarian graduate starting salaries<sup>17</sup>



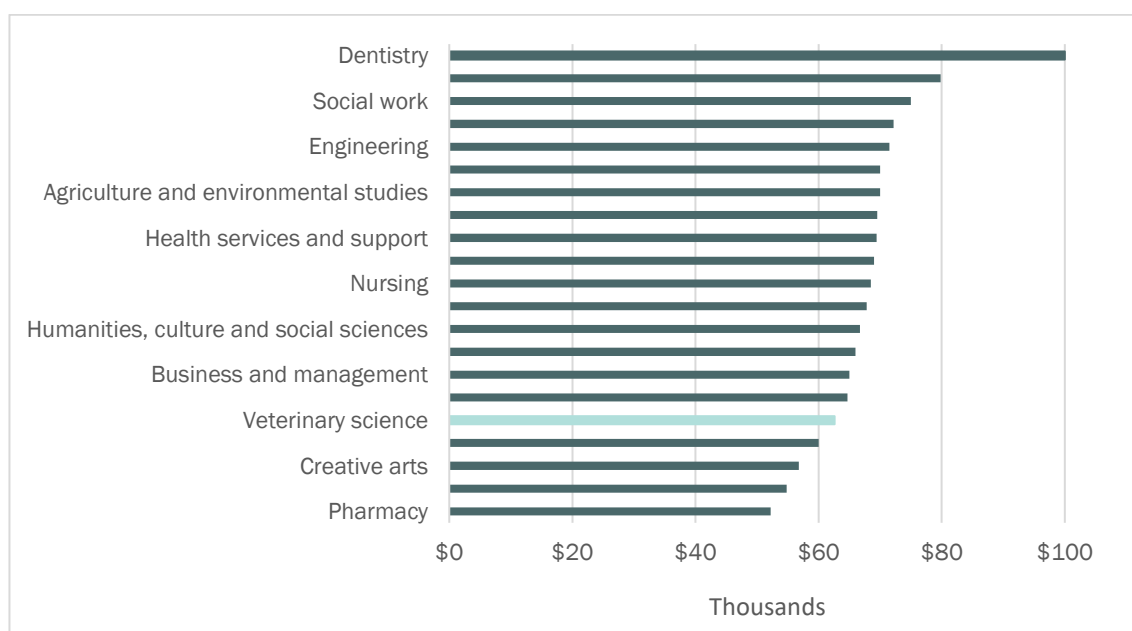


Figure 16 - Undergraduate starting salaries (2022) <sup>17</sup>

- **Mental health challenges greater than the general population** – refer to TOR section (c)

2. **Generational and societal change** – The veterinary model has not been able to adapt particularly well to the significant generational and societal change that has occurred this century and late last century. This is not unique to the veterinary profession, however, is a significant contributor to the challenges in workforce sustainability. The challenges associated with this are outlined below.

- **The changing societal expectations of veterinary care** – The increased expectation from clients is reflected in veterinary regulations, which has resulted in both improved quality of services as well as increased costs of delivering services. These costs are now ingrained into veterinary practices and the fixed costs of operation is high. The increased demand for quality outcomes expected by clients is comparable to those in human hospitals. The changing societal expectations, and risk of not meeting these, has also resulted in increased administrative burden around reporting and clinical recording requirements, as well as increased insurance costs.

*“For some clients, the expectation is that every pet will be blood tested, radiographed, ultra-sounded and hospitalised. This massively increases the cost of treatment because most of the fees are used to pay for all the equipment and the time taken by the staff to use it.”*

*“The move to higher standards of veterinary care and hospital standards can only be commended however gold standard comes at a cost and running a veterinary practice these days is a lot more expensive than it was even 20 years ago.”*

Changed societal expectations in companion animal practice (where individual animals have significant emotional or financial value) have altered the level of risk that generalist veterinary practice is willing to accept. This has contributed to the rapid increase in specialist veterinary services and standard of care drift. <sup>18</sup> The unintended consequence of this is that the role of the generalist veterinarian has become undervalued and a less attractive proposition to some in the profession, similar to the challenges being faced by human general practitioners.



Changed societal expectations of after-hours care, particularly of small animals, can rarely be provided by a general practice. The community as a generality does not tolerate unsupervised overnight care of hospitalised patients. The cost of delivering 24-hour veterinary care is very high and is operationally impossible for many small veterinary practices.

- **Perceived self-efficacy of the community** – With increased access to digital technologies the community has access to a large amount of information. This is likely to further increase with the introduction of AI technologies. Understanding the reliability and relevance of information in the context of the patient is the remit of the veterinary team, and this skill is honed over time and with experience.

As a generality, the community has access to far more information than ever, and perceived self-efficacy has increased. Unfortunately, when this is accompanied by ineffective attempts at self-treatment and client incivility it can cause moral stress for the treating veterinarian. This has a profound negative impact on mental health of veterinarians and their retention, particularly those in early career.

- **Generational and societal changes around workforce participation** - Recent data around the veterinary workforce suggests that 25% percent of veterinarians work part time, that is less than 30 hours/week.<sup>8</sup> This is less than the general population where part-time share of work is 29.9%.<sup>16</sup> Within the general population the part-time participation rate for males is increasing and is likely to continue to increase. The propensity for part-time participation of males has increased three-fold<sup>19</sup>, between the 1950's and early 2000's, a trend that has also been observed in the veterinary profession. Within the general female population there has been a long-term increase in both full-time and part-time participation rates, with the increase in full-time participation being greater, and the expectation is that participation rates at the later ages of this stage of life will continue to increase for some time.<sup>19</sup> The increase in participation of females in the veterinary profession in recent decades means the gender distribution varies within differing age cohorts. Given the fact that in the veterinary profession the general gender distribution seen in the younger cohorts is not yet seen in the older cohorts, it is possible when the gender distribution is reflected in the older cohorts, the hours worked by veterinary professionals may increase. Anecdotally, this is seen with many women in mid to late career increasing their number of working hours.
- **Challenges around succession pathways for business ownership** – Small business ownership within the veterinary profession may be less achievable than it has been. A possible cause for this is societal change around attitudes to perceptions of being 'locked in' to long term inflexible arrangements that often come with veterinary small business ownership. This may be contributed to by the rapid increase in dual professional households and the ever-increasing number of career changes that recent generations are reported to participate in during their working lives. Furthermore, there is anecdotal evidence that emerging generations (irrespective of profession) are focused on working part time rather than full time, which is a deterrent to business ownership.

Business ownership has historically been the pathway to increase remuneration, however, business ownership in the 21<sup>st</sup> century has become increasingly complicated regarding compliance requirements. The profession is adapting with the option for equity buy-in into corporate practices seen by some as an attractive and achievable alternative to the traditional small business ownership pathway. This can however limit the potential earnings of veterinarians engaged in these arrangements – restricting overall earning capacity.

- **The historical structure of the profession is not meeting the generational change of expectations of early career veterinarians.** - There is oppositional commentary within the profession around the expectations of the early career veterinarians. Mid to late career veterinarians are often of the opinion that the veterinary education systems are incorrectly



selecting students, or not adequately preparing them for the profession, as they are perceived to lack resilience. Early career veterinarians and veterinary educators often comment that the profession has been slow to adapt to the changing expectations of recent generations. The lack of the ability of the profession to adapt is complicated by underinvestment in the labour component of the profession which leads to higher than desired attrition rates in early career.

*“Using the canary and coal mine analogy - it’s no longer a case of trying to create more robust canaries it’s about changing the coal mine”*

### **3. Limited funding for the public veterinary sector**

All of the same challenges seen in the private veterinary sector are present within the publicly funded veterinary sector due to limited funding and de-prioritisation<sup>20</sup> by government over time.

Unfortunately, the less flexible framework of publicly funded enterprise means the capacity to adapt to market forces is limited, making the recruitment and retention in the public veterinary sector even more difficult, as outlined in the section above around government veterinarians, academics, and pathologists.

#### **Recruitment and retention**

Some of these challenges have been in place for decades, with others more recent. The result of these challenges is difficulty in recruitment and retention. In NSW 63.16% of respondents reported having advertised for a vacancy in the previous 12 months. Of these vacancies, over 40% (compared to a national rate of 38.65%) were still vacant after 12 months.<sup>8</sup>

Other work that the AVA undertook in 2021 suggested that up to 13% of the workforce was considering leaving a veterinary role within the next 12 months.<sup>8</sup> Of those not intending to stay, or not sure, there were a range of reasons – concerning 52% were for negative reasons, that is poor health (mental and or physical), disillusionment with the profession or poor remuneration.<sup>8</sup> When this was looked at specifically in the large animal sector the reasons were also negative; difficult work conditions (long hours, afterhours requirements), negative impacts on mental wellbeing (chronic stress/ burnout/poor work-life balance), financial difficulties (remuneration), not feeling valued (lack of support, difficult clients, sexism) and lack of career opportunities.

Recruitment costs for practices paying for recruitment services and advertisements have also increased, with the costs being sustained over prolonged periods. Locum rates have approximately doubled over the last ten years, increasing staffing costs, and reducing ability of staff to take leave.

### **(c) the burn-out and mental health challenges facing the veterinary profession**

The burn out and mental health challenges facing the veterinary profession are the result of a profession where the labour component has been chronically underfunded at a time of immense generational and social change. Many of the issues that the veterinary profession face are common to a large number of the service professions, however as there is no public funding these issues are accentuated.

Burn out has been well recognised in the profession for some time<sup>21, 22, 23</sup> and the cost to the profession is estimated to be 2.01% of its value due to poor retention and reduced working hours.<sup>24</sup> In 2019 the AVA undertook research in this area to better understand the size of the issue and to inform the development of a wellness strategy.<sup>9</sup> This research found:



- Over half (66.7%) of people said they had experienced a mental health condition at some stage, compared to 61.8% in the general population. Of those, 60% said their condition had been diagnosed by a medical professional.
- Over 25% of people took time off work due to stress or a mental health condition and 33% did not disclose the reason to their employer.
- 54% of factors contributing to mental health issues were work related (include work related trauma, client interactions, workload, afterhours).
- Work related factors that contributed included; challenging client interactions, working long hours, managing a high workload, dealing with staff shortages, poor remuneration, after hours and on-call work and poor workplace culture.
- Almost half of people felt their work has a negative or very negative impact on their overall mental health.
- The common psychosocial risks identified consistently were:
  - challenging client interactions & expectations.
  - workplace culture. (interpersonal conflict, poor change management policies and access, lack of reward and recognition)
  - working long hours (including afterhours) and inability to take sick or annual leave due to inability to find someone else to cover.
  - high workload and pressure - 53.2% of people feel as though they do not have an appropriate workload.
  - neglecting physical health due to the job.
  - emotionally draining work - 72.5% of people feel they regularly leave work feeling emotionally drained.
  - financial strain.

Although mental health issues are widespread across all demographics, the likelihood of experiencing a mental health condition declined with age. Those aged between 18 - 35 years, and particularly women, were the most likely to rate their mental health poorly.<sup>9</sup> This may be due to either of these cohorts finding the impact of the profession particularly challenging to their mental health. Alternatively, given the generational and societal change around reduced stigma of mental health, this cohort may be more likely to accurately declare their mental health status and it could be more reflective of the wider profession. In this light, caution should be employed to not perceive early career to mid-career veterinarians and women as having reduced resilience; rather, it could support structural issues within the profession. Some of the psychosocial hazards that are a part of veterinary work can be heightened for some demographics, such as early career veterinarians, including after-hours work, isolated regional work, and negative interactions with members of the public.

Clients' high emotional state and financial investment, along with their perceived self-efficacy and sometimes unrealistic expectations, are challenging and exhausting. Additionally, the required financial conversation adds to the complexity, and this has only worsened as the cost of veterinary care has increased. This situation is further compounded by the fear of public shaming through social or sensationalist media, causing significant mental anguish for veterinarians of all ages. Moreover, the increased threats of vexatious complaints to regulatory bodies add to their stress.

*“The relationship between pets and people has changed in the time I have been a vet. They are now “children” to “pet parents” and owners are aware of the extensive range of*



*treatments available should they need veterinary care but not all owners can afford this. Many then get angry because they are used to our public funded Medicare system This anger / grief/ distress then leads to a negative impact on the profession with an increase in reports to the Vet Boards, increased social media abuse, traditional media abuse (A Current Affair is a prime example of this) and sadly there is an escalating amount of face to face personal abuse of vets and vet staff. “*

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.**

**Recommendation 4: The NSW Government consider funding a public awareness campaign to address the rising rates of verbal and physical assault of veterinary teams and to educate the community on the impact of their actions. For example, similar to the [NSW Ambulance ‘It’s Never Okay’](#) campaign.**

#### **(d) the role of, and challenges affecting, veterinary nurses**

Veterinary nurses and technicians are an integral part of modern veterinary practice. The registration, quality training, and continuing professional development of veterinary nurses and technicians are essential components of veterinary practices.

Veterinary nurses and technicians, under the direction, supervision, and responsibility of veterinarians, provide nursing care to sick animals, and communicate with, and educate owners on the health care of their animals. The veterinary nurse and technician also provides support to the veterinarian with technical work, surgical and peri-operative procedures, medical procedures, diagnostic testing, and critical care. The veterinary profession benefits greatly when working as a team with appropriately educated and trained veterinary nurses and technicians.

The national qualification for veterinary nurses and technicians is presently the vocational Certificate IV in Veterinary Nursing and bachelor degree. The AVA advocates for a high-quality outcome for all students of veterinary nursing in Australia, irrespective of where they live, where they are trained, or where they are employed.

This outcome should be of an international standard and take into consideration the specific work, health, and safety aspects of the veterinary workplace. All students commencing the vocational Certificate IV in Veterinary Nursing should have guaranteed access to a veterinary workplace and ideally should be employed. The AVA, representing the employers of veterinary nurses and technicians, has had, and continues to advocate for, continued input into the development of training packages relevant to veterinary nursing, and university curricula for veterinary technicians.

Outside of Western Australia, there is no regulation or statutory code of conduct, and no requirement to maintain currency and fitness to practice within veterinary nursing. The AVA supports the Veterinary Nurses Council of Australia’s (VNCA) stated position that unqualified and unregulated veterinary support staff potentially expose the public and animal patients to harm and increase liability for veterinary practices. Mandatory professional registration for veterinary nurses and technicians would bring rights and responsibilities, as well as increasing professionalism - to the benefit of the veterinary profession and the public it serves.



The Australian Veterinary Nurses and Technicians (AVNAT) Voluntary Registration Scheme was set up by the VNCA. By creating the AVNAT Registration Scheme, the VNCA has established a self-regulation program, which will set standards for the professional practice of veterinary nurses and technicians across Australia. This will complement the Accredited Veterinary Nurse Scheme (AVN) which was set up with the support of the National Industry Advisory Group for Veterinary Nursing and the AVA, to recognise excellence in Veterinary Nursing.

The ongoing advances in veterinary nursing knowledge and skills, including the work, health, and safety requirements of the role, necessitate, in the public interest, that the title 'Veterinary Nurse' must be restricted to those who are suitably qualified and accepted into the AVNAT Voluntary Registration Scheme. These qualifications are also required to be eligible for membership of the VNCA

The AVA recommends that all persons using the title 'Veterinary Nurse' must possess veterinary nurse qualifications and conform to standards appropriate to professional veterinary practice.

And that these standards should be subject to regular review by a national professional body.

The AVA supports and endorses the VNCA's TOR (d) submission to the NSW Inquiry into the veterinary workforce shortage.

## (e) the role of, and challenges affecting, overseas trained veterinarians

### Background

The integrity and quality of the veterinary profession is maintained through standards of university education, professional conduct and professional behaviour, determined by state veterinary boards and overseen by the [Australasian Veterinary Boards Council \(AVBC\)](#). This is imperative to remain internationally competitive and collaborative. Some veterinary degrees obtained in other countries are considered equivalent to an Australian veterinary degree allowing for those individuals to work as veterinarians. Equivalency of degrees is managed by the AVBC through a structured process. There are a number of degrees that do not demonstrate equivalency and individuals that hold those degrees must undergo individual examination (Australasian veterinary examination (AVE) process) to demonstrate competency. The rationale for this is to ensure that standards of veterinary care expected by the community are maintained and animal health and welfare standards remain appropriate.

Veterinarians with equivalent degrees are able to work in Australia under several visas. These are the:

- Temporary Skill Shortage Visa (Subclass 482)
- Working Holiday Visa (Subclass 417)
- Work and Holiday Visa (Subclass 462)

The number of successful AVE graduates varies each year, with 2022 seeing a record number of 43 graduates. The [10 year trend demonstrates](#) an increasing level of participation each year, with the exception of the COVID years.

In areas of high need, the NSW Veterinary Practitioner's Board has some flexibility to provide limited registration if risk to the community can be managed. Examples of this include specialist trained veterinarians without a primary equivalent veterinary degree or veterinarians registering for specific roles (e.g., on-plant veterinarians).

### Role





Migration has a role in helping address the shortage with immediate effect, allowing longer term solutions time to mature. As of the 30 June 2022, 15% of NSW registered veterinarians are overseas qualified. (Personal communication NSW VPB)

## Challenges

### *Challenges for individuals with equivalent degrees*

The visas that veterinarians commonly use to enter Australia each have their own challenges and they come at a significant cost to employers and employees. For example, the Temporary Skill Shortage Visa (Subclass 482) requires at least two years of relevant work experience in the occupation/field which prevents suitably qualified new graduate and early career veterinarians from entering Australia, at a time when they are most likely to consider overseas opportunities. As a consequence, there are suitably qualified new graduate veterinarians, whose degrees are recognised by Australia regulatory bodies who wish to work in Australia, however due to the current visa requirements they choose alternate destinations without this requirement.

The Working Holiday Visa (Subclass 417) visa is used in the veterinary profession as the new graduate visa pathway is difficult to navigate and not user friendly. However, the existing conditions of the subclass 417 visa and the subclass 462 visa are not fit for purpose for most of the veterinary profession. The AVA would like to see the adoption of a more flexible working holiday visa, such as the UK Youth Mobility Scheme Visa where the equivalent visa is for two years with no requirement to change employers after six months.

Currently the age limit restriction for permanent residency (PR) visas is capped at 45 years of age to secure PR. This is a significant barrier for South African and UK veterinarians, particularly those who have undertaken advanced training to become specialists. The length of these training programs is similar to those in the human medical sector. The AVA would welcome increasing the age restriction for veterinarians to secure PR to that of human doctors as the educational pathways to specialisation are similar.

Currently the pathway to permanent residency for veterinary nurses is difficult, onerous, and expensive to undertake, and very few overseas veterinary nurses pursue permanent residency. We would like to see long term modification of policy settings to strengthen skilled migrant pathways to permanent residency for veterinary nurses.

### *Challenges for individuals without equivalent degrees*

Although there is a [clear pathway and process](#) (AVE) for individuals without equivalent degrees to display competency, it is protracted (12-18 months) and expensive to undertake. (~\$12,000 AUD). After successful completion of the [multiple choice component](#) the candidate can apply to undertake the [practical component](#). In NSW, after successful completion of the multiple-choice exam, then limited registration can be applied for so the candidate can work under supervision.

Demonstrating competency across species is challenging and applicants often need to undertake a range of WIL opportunities to refamiliarise themselves with species specific skills. This can come at significant opportunity cost. The provision of practical placement opportunities by the profession for AVE candidates is a public good that comes at some cost. As a consequence, the provision of these opportunities may not be forthcoming and difficult for applicants to access.

**Recommendation 5: The NSW Government consider funding for the profession to provide work integrated learning (WIL) opportunities for overseas veterinarians wishing to work in NSW as well as funding to assist international NSW applicants undertake the Australian veterinary examination process without financial hardship.**



**Recommendation 6: The NSW Government support changes to visa provisions including lifting of the age cap for permanent residency to be in line with the human medical field.**

## **(f) the arrangements and impacts of providing after-hour veterinary services**

### 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.<sup>5</sup> 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.<sup>8</sup> 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”.<sup>10</sup>

*“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.<sup>10</sup>

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.<sup>9</sup>



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 after-hours 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.**

## **(g) the impact of the current legislative and regulatory framework on veterinarians**

### Background

It is in the interests of all veterinarians and the community that the provision of veterinary services is regulated. The integrity and quality of the veterinary profession is maintained through standards of university education, professional conduct and professional behaviour, determined by state veterinary boards and overseen by the Australasian Veterinary Boards Council. This is imperative to remain internationally competitive and collaborative. Regulation ensures that the public can have confidence when they visit registered veterinarians with their animals.

Regulation of the veterinary sector is a partnership between government and the veterinary profession. Veterinary practitioner boards across the country are made up of a mix of expertise and are predominantly peers within the veterinary profession. The profession itself has a strong interest in ensuring that appropriate standards of care are maintained, and that poor performance is corrected where possible and persistent poor performance addressed. This is crucial for continued high standards and integrity and for the maintenance of public confidence in the profession. Veterinarians are consistently ranked amongst the most trusted occupations.

There are many areas within animal industries that are unregulated, and the regulated veterinary profession provides protection to the community. This extends to the companion animal area where



availability and access to regulated veterinarians give consumers confidence in a “buyer beware” system of animal ownership.

However, regulation is a balancing act. If regulation is too dated or too restrictive, it will impede innovation and restrict the ability of the profession to adapt to modern environments. Regular review and development of the legislation is needed to support modern veterinary practice, such as the growth in telemedicine and the shift from veterinarians working in isolation to the veterinarian led team. Similarly, too little attention to regulation will lead to poor animal health and welfare outcomes. Veterinarians’ expertise and judgment underpin the community obligation to the health and welfare of animals. Their involvement also provides a safety net where regulation may not be precise enough.

The current Veterinary Practices Act 2003 was scheduled to undergo a staged repeal. 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. There are several areas in which the NSW legislation needs updating. A broad review of the Act should be undertaken, however below are some of the key issues for consideration.

### **Regulation currently only extends to veterinarians**

The existing regulatory framework in NSW only regulates veterinarians, rather than other members of the veterinary team. This is limiting the capacity of the workforce and efficacy of the veterinary team. We would like to see a regulated **veterinarian led team**. Registration of veterinary nurses and para-veterinary 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 unnecessary direct supervision by the veterinarian, where direction or a lower level of supervision is more appropriate. This places an increased workload and responsibility and cost on 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.

### **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.

### **Complaints process**

The complaints processes and the policies and procedures that sit under this needs to be updated to meet contemporary practice. In many respects, the veterinary complaints processes are still based on a dated model of veterinary practice. In the past, single veterinarian or small practices predominated. However, increasingly there are internal separations between practice owners, managers, and employee veterinarians. This shift to larger clinics, group practices and corporate practices mean that an increasing number of veterinary businesses are at a scale where they are able to deal with a degree of complaints inhouse and put in place the updated procedures, or education and training that are needed for issues raised. The VPB needs to be able to leverage this in-practice capacity and where possible direct complainants to the veterinary business in question for it to be dealt with locally, with the VPB only taking action with significant or persistent issues.

More broadly, the existing complaints and disciplinary process, as well as the increased litigious nature of the community, makes veterinarians very risk averse and practice defensive medicine.<sup>25</sup> This can be detrimental to the animal owning public and increases the administrative burden on veterinarians. An example of this is excessive time spent on detailed patient records. While records need to be detailed enough to ensure another veterinarian can understand the diagnostic process and a treatment approach that a veterinarian has undertaken with an animal, excessive time is often spent on writing records in the fear that they will be critiqued by the VPB and be seen as lacking.

*"We are having to write histories and case notes that are more detailed than ever, which eats into time where we could be providing meaningful care to pets, livestock, and other animals. Saying a physical examination is 'within normal limits' is no longer good enough and notes are becoming ever more detailed. On an industry level, in consultation with the relevant state Vet Practitioners Board, this is something that needs to be considered, and to an extent rectified to resemble something that is adequate but not so time consuming." – Mixed practice veterinarian, 15 years' experience*

Another issue with complaints is that with the growing size of veterinary practices, individual veterinarians who may be the subject of a complaint are not always in a position to be able to correct an issue, nor necessarily the cause, when they relate to systemic issues or procedures within the practice. Current complaint processes are focused on the individual veterinarian and don't have a mechanism for addressing systemic issues.

### **Unfunded obligations**

There are a number of Acts that place public good obligations on to the veterinary profession with no method for the profession to recoup the costs of meeting the obligation. For example, 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.

There is an assumption that veterinarians must carry out the requirements of certain legislation for free. No recompense is referred to in either the Act, Regulation, or associated documents. For example, all registered veterinarians have treatment obligations to provide essential veterinary services to relieve pain and suffering to achieve legislated animal welfare. Without government funding, the cost of maintaining animal welfare for animals without an owner (strays and wildlife) is borne by veterinary businesses or individual veterinarians.





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

### Reduced demand for livestock veterinary services

As a generality the demand drivers for the provision of large animal (production) veterinary services significantly differ from the provision of small animal services. Demand for farm vet services comes from both producers themselves and government, and animal production is shaped by agricultural policy and market forces (local, national, and international). As a large proportion of the costs are placed onto industry, without increased regulatory requirements to require veterinary involvement to ensure animal welfare and safety, particularly in the domestic supply chain, demand for veterinary services have declined over time. The genesis of the differing demand may also be linked to how veterinary services were historically provided to the livestock sector.

Veterinary science has a strong history in agriculture, with the profession being established from the driver of animals used for food and carriage. In the first half of the 20<sup>th</sup> century livestock animal veterinary services in Australia were traditionally provided by the government to the farming community without direct cost, funded through taxation. This arrangement was based on the belief that veterinary services were a "public good."<sup>14</sup> As a consequence government veterinarians dominated the profession with very few private practitioners. During the second half of the 20<sup>th</sup> century the delivery of production animal veterinary services morphed into a model where greater emphasis was placed on the delivery by the private sector.

The decline of the veterinary profession in rural Australia was considered to be of significant enough risk that early in the 21<sup>st</sup> century the government of the day commissioned review into the future requirements of animal health systems, the expected role and requirements for rural veterinarians to meet these needs, and strategies to ensure they are in place, known as the Frawley review.<sup>13</sup> The report noted that at that time, although there was no immediate shortage of veterinarians in rural Australia, if no action was taken and current trends persisted, shortages may arise, particularly in remote areas heavily reliant on production animal services.<sup>13</sup> These shortages have now been realised.

The Frawley report identified that private veterinary surgeons servicing the production animal sector continued to primarily focus on treating individual animals rather than providing whole herd/flock care and overall, only 20-30% of producers engaged with veterinarians, this was noted at the time to be a serious limitation of Australia's surveillance program.<sup>13</sup> One of the key recommendations from the review was to introduce policy that will increase the demand of veterinary services such as funded surveillance and/or quality assurance work by private practitioners.<sup>13</sup> Recommendations to make production animal work more attractive and accessible to early career veterinarians were also suggested.<sup>13</sup> Unfortunately there is not good measurement of the impacts of such changes, so it is difficult to ascertain the positive impact they have achieved.

Although the animal agricultural sector has continued to grow in the last 20 years, the demand for veterinary services has continued to decline. There is evidence that the majority (87%) of veterinary businesses had not experienced an increase in the case load of livestock since 2000, and some producers have not had a veterinarian on farm in a number of years.<sup>14 20, 26</sup> There is also some evidence of a reduction in demand of government veterinary services, particularly in the area of disease investigation and on farm work.<sup>27</sup> This may in part be due to the introduction of fee for service activities within some government jurisdictions.<sup>27</sup>

### Why has the demand for veterinary services in the livestock sector not increased despite a growth in the sector





The evolution of the animal production systems has meant that globally the veterinary profession has long aimed to transition from a reactive approach of treating sick animals to a proactive role as trusted advisors on animal health, working with producers to prevent illnesses and injuries. This shift towards preventative medicine is believed to offer various benefits, including improved animal health and welfare, disease prevention, and reduced costs associated with diseases and commenced in the second half of the 20<sup>th</sup> century.<sup>14 28</sup>

Despite the desire of the profession to shift to providing advice in the area of preventive medicine and optimising production animal health this remained elusive, with only small pockets of veterinary business (e.g. intensive industry and dairy consultancies) making the successful transition in Australia<sup>29</sup> and globally<sup>28 30 11</sup>. This is not necessarily surprising as there needs to be a correct combination of social, economic, and political factors for widespread adoption of preventative medicine veterinary services by producers, and if there is little evidence for the cost effectiveness of preventative services this can be very difficult to achieve.<sup>31</sup>

A major challenge for the livestock veterinary sector in both Australia and globally is to provide evidence that investing in preventive health through veterinary services does add value and helps producers to meet their statutory requirements and improve productivity and profitability.<sup>28</sup> It is difficult to evidence outcomes associated with veterinary advice or services using existing measures of farm productivity. As a consequence, the changing structure and profitability of the agricultural animal production sector over the second half of the 20<sup>th</sup> century has resulted in reduced demand for veterinary services as the market morphed into a user pays scenario, and veterinary care is considered an optional cost that needs to demonstrate a return on investment, although not necessarily financial.

There have been considerable advancements around preventative medicine and animal production, and veterinarians have been heavily involved in research in this area, but translational application of this academic knowledge to the agricultural sector has not necessarily seen the veterinarian as a key player, especially in extensive animal production systems. Rather it has increased the self-efficacy of producers, which has contributed to a decrease in the involvement of veterinarians at the grass roots level.

As self-efficacy of producers has increased and the veterinary profession has not been able to demonstrate clear evidence of improved productivity through involvement, the expenditure on veterinary services has become increasingly difficult to justify.<sup>32</sup>

*“Kilby and her husband Greg breed Angus at their property at Balladoran about 50km from Dubbo and while they haven’t faced extreme emergencies, for example losing cattle because a vet can’t get out in time, that’s largely because Greg, a farmer for 60 years, “is pretty handy”.”*  
(Weekend Australian 8/9<sup>th</sup> July 2023)

Reducing the demand for appropriate veterinary services poses risks to animal welfare, biosecurity, public safety, and legislative inequity.

Inequity in animal related legislation encourages self-efficacy of producers. For example, the 2022 TGA rescheduling of transmucosal meloxicam (Buccalgesic) for pain management in livestock during surgical procedures undertaken for animal husbandry. The rescheduling allows this drug to be sold in stock stores with minimal restriction where meloxicam is otherwise restricted by prescription in other species due to safety considerations. ([AVA submission, Proposed amendment to the poisons standard- 3.3 Meloxicam Oral Transmucosal preparations, January 2022](#)). Other barriers to utilising veterinary services include distance of travel required, cost relative to revenue generated from individual animals, and confidence in veterinary services.<sup>32, 33</sup>

All these factors have led to an overall decrease in engagement of the private veterinary sector with livestock production systems with a substantial number of producers not engaging with veterinarians for years.<sup>34 13</sup> In many instances where the veterinarian may have previously been the first point of contact, producers are now actively deciding not to involve veterinary services.<sup>32</sup>



### How viability is maintained in rural practices in the face of reduced demand for livestock veterinary services

Viability of rural mixed practices is reliant on companion animal medicine. This was initially acknowledged in the late 20<sup>th</sup> century in the Frawley review.<sup>13</sup> The review concluded that despite long work hours, rural practices produce lower returns on capital and were less profitable. They generated lower fees for services and at that time had higher practice costs.<sup>13</sup> In contrast to the human health sector and despite being considered essential, the higher costs of providing a veterinary service rurally versus in an urban centre, is not subsidised.

In the last 20 years rural practices have become even more reliant on companion animal care for financial viability, leading to a decrease in services provided to livestock.<sup>29</sup> The challenges around maintaining a skill set within a rural practice to service the livestock sector when demand is inconsistent and eroding, and in the face of increasing demand in companion animal practice, has led to private practices reducing or limiting their service offering for large animals.<sup>29</sup> There is an increasing sentiment that the rural practice model has now morphed into predominantly companion animal practice (veterinary care for individual animals with emotional value)<sup>14</sup>

### How the changed business model impacts the shortage of veterinarians in regional, rural and remote New South Wales

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.”*

- Provision of afterhours services for companion animal species – in urban areas there is likely to be access to an emergency centre.
- Limited employment opportunities for partners or other family members – given Australia has reached gender parity around education, the realities of the 21<sup>st</sup> century is that, for professionals in relationships both are likely to have career aspirations. In many cases it can be difficult for the career aspirations for both people to be met in urban centres (and is likely one of the reasons for decline in desire to participate in business ownership), and this is amplified considerably in regional and rural settings.
- Limited pathways for experienced companion animal veterinarians to upskill in large animal veterinary care.



**Recommendation 8: The NSW Government Veterinary professionals are extended the same opportunities as other professions that are being encouraged to move to regional, rural and remote areas.**

Although producers continue to have a demand for veterinarians to be available for reactive services for individual animals, the maintenance of this skill set to deliver livestock veterinary services and serve industry on an as required reactive basis has not been sustainable. This is reflected in the percentage of the veterinary workforce providing livestock veterinary services and the aging demographic of that workforce.

The erosion of this skill set is problematic as private veterinarians are an integral contributor to an effective animal disease surveillance system. Private veterinarians are at the forefront for the detection of disease and have further potential to capitalize on existing relationships with producers and other stakeholders to improve surveillance outcomes.<sup>34</sup>

These challenges are further complicated by the veterinary education system, which has been adversely affected over decades by various changes in education, fiscal and social policy. One of the unintended consequences is reduced exposure of veterinary students to rural practice due to limited funding. Students undertaking veterinary degrees must bear the full costs of WIL (travel, accommodation, loss of earning from employment etc), creating significant barriers to them undertaking WIL in non-urban veterinary practice. This has contributed to the decline in the number of graduates who wish to work in the livestock sector.

### Summary

The erosion of skill set in livestock veterinary services has reached the point that there is now not sufficient capacity within the profession to meet the demand required by livestock producers. This could be considered a classic example of a “use it or lose it” scenario. The unintended consequence of requiring industry to engage the veterinary profession as an optional user pays service after a history of it being delivered as a funded public good has meant that even the aspects of the service producers require are no longer available.

Rural veterinary practices are highly reliant on companion animal practice to maintain viability. The rural companion animal veterinary service provision model is not as attractive to veterinarians.

*“There are several centres that are no longer served by mixed local practitioners. This includes Parkes. The Forbes area has few available veterinarians. The number of Dubbo practices has reduced and many no longer do production animal work.”*

In 2020 a survey of 28 European countries was undertaken by the Federation of Veterinarians of Europe to investigate the shortage of veterinarians in remote areas. It determined that shortages had potentially severe consequences as ‘Veterinary desertification is the last sign before agricultural desertification’.<sup>35</sup>

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

Veterinarians play a significant role in providing medical care, treatment, and support to lost and homeless animals, as well as injured wildlife, ensuring their well-being and increasing their chances of finding a safe and caring home or returning to their natural environments, as animal welfare is a major tenet of a veterinarian's workload and is enshrined in the Code of Conduct.

The management of homeless animals, treatment of injured and ill animals (large and small) with no known ownership is expected when affected animals are presented to a veterinary practice, but as



these animals are either owned by the crown, are unowned or displaced, the care provided by the veterinary practice is generally unable to be recouped. The requirement of veterinary care in the NSW Schedule 2 Veterinary practitioners code of professional conduct is not in line with funding for the veterinary profession to provide adequate services for animals that are not privately owned without creating financial vulnerability for private veterinary practices.

The majority of the roles that veterinarians play in providing care to this group of animals also require infrastructure and equipment to deliver. As a generality this is provided either through charities that receive government funding such as the RSPCA, or by the private veterinary sector. Animal welfare charities and organisations who employ veterinarians can target their funding and other resources for these clients and animals. The private veterinary sector endeavours to provide similar services without dedicated resources or funding, which comes at a cost to their business – and the wellbeing of their team.

There are numerous roles that veterinarians have when providing care to these animals, listed here:

- **Examination and Diagnosis:** When lost, stray, homeless or wild animals are presented to veterinary clinics or shelters, veterinarians conduct thorough examinations to assess their overall health. They diagnose any underlying medical conditions, injuries, or diseases that may require immediate attention.
- **Medical Treatment or Euthanasia:** Veterinarians provide essential medical treatments to address injuries, infections, diseases, and other health issues. This may involve wound care, administration of medications, vaccinations, parasite control, and surgeries when necessary. In some cases where animals are severely injured or suffering with no chance of recovery, veterinarians may have to make the decision to euthanase them.
- **Emergency Care:** During emergency situations, such as accidents or natural disasters, veterinarians are often at the forefront of providing immediate care to injured animals and holding lost or displaced animals until owners are in a position to collect them.
- **Rehabilitation and Long-term Care:** Veterinarians are involved in the development of rehabilitation plans.
- **Collaboration with Animal Welfare Organisations:** Private sector veterinarians often work closely with animal shelters, rescue groups, and other animal welfare organisations to provide comprehensive care to lost and homeless animals. They may participate in desexing programs, vaccination campaigns, and educational initiatives to promote responsible pet ownership and population control.
- **Wildlife Rehabilitation:** Veterinarians play a vital role in treating and rehabilitating injured or orphaned wildlife. They assess their conditions, provide medical care, and work towards their successful release back into their natural habitats.
- **Biosecurity surveillance**

The spectrum of veterinary care that these animals receive is a personal or a practice/charity-based decision, and there is no routine approach across NSW. Some private practices will advise contacting another practice or charity and not see these animals, while others will provide pro-bono care and rehoming options. This inconsistency often leads to unrealistic expectations of the general public, which unfortunately when accompanied by client incivility can negatively impact the mental health of veterinary teams

*“I have been personally verbally abused when I have not been willing to board stray dogs or will not offer an after-hours consultation to a non-emergency wildlife case.”*



## Homeless and stray animals

Despite the collection of animal management fees, impoundment fees and government grants for decades by local government, there is no consistency of payment for use of veterinary services or private infrastructure for the animal management of lost, stray, and homeless animals and is frequently borne by the private veterinary sector. This is individual local council dependant with some supplementation from government and privately funded charities, which rely on donations to provide payment for veterinary services.

The cost and impact of the provision by the veterinary profession 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 (i.e., 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.

There is a lack of consistency between local councils of how they interpret legislation, engage and pay veterinary practices to manage strays and provide expertise around animal management in times of crisis. The AVA NSW Division 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 practices.

The costs associated with delivering this public good, that have been unable to be recouped and contributes to consequences of financial vulnerability, is leading to a reduction of provision of these services. Charity organisations are also at capacity, and the overall outcome is a decline in animal welfare.

*“Local governments also need to be prepared to compensate vets for their services, and not expect care of surrendered or stray animals at no or significantly reduced costs.”*

In 2020/21<sup>a</sup>, there were 44,000 cats and dogs that entered NSW council pounds, comprising 23,000 dogs and 21,000 cats.

When these strays are brought into veterinary practices, the initial protocol is to scan for a microchip and try to contact the registered owner. This process aims to swiftly reunite lost pets with their owners before contacting council. However, veterinarians often face labour, housing, and resourcing costs associated with providing these public good services. Adding to the complexity, emergency care may be necessary for some of these stray animals. In cases where the owner cannot be reached, this leaves veterinary practices in a predicament where they need to balance their ethical and regulatory responsibility towards animal welfare with the substantial financial implications of providing emergency treatment without any guarantee of compensation.

The compounding issues of strays when veterinary practices contact councils is evident from the [AVA survey conducted in September 2022 regarding veterinary practices engagement with NSW councils/pounds](#). The survey revealed that 96% of responding veterinarians receive strays at their practices, with 81% not receiving payment for their care and 92% indicating that any payment received fails to cover the full cost of housing and treatment. Survey respondents underscored several key problems needing consideration. Many veterinarians shoulder the financial burden of caring for strays until they are collected by the council, often having to wait for 2-3 days. In some instances, councils refuse to collect strays, particularly cats, shifting the responsibility and costs onto veterinarians. Complications arise due to difficulties contacting councils after hours, on weekends, public holidays, or during the holiday season. Additionally, there are instances where councils instruct

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<sup>a</sup> 2020/21 Data reported by NSW councils to the Office of Local Government.





veterinarians to release strays back onto the streets, a practice contrary to animal welfare and potentially in violation of the Prevention of Cruelty to Animals Act. Moreover, when veterinarians refuse to accept a stray and direct them to the council, they often face negative public backlash, leading to damaging business reviews and mental health strain for the staff.

**Recommendation 9: The AVA calls upon the NSW Government to explore solutions that support the veterinary sector in its role with stray animals, addressing the key issues outlined and promoting overall animal health, welfare, and public health.**

*“Our facility performs a large amount of gratis work in this area – on average we are involved with 3 to 5 stray animals per day and 3 to 5 wildlife per day.”*

It is essential that the costs of delivery of these services and the value it brings to the community is understood as it one area that is at risk of not continuing to be delivered if it is not adequately supported.

### Animal care in natural disasters

During natural disasters such as bushfires and floods, animals, like humans, often suffer significant impacts, requiring urgent veterinary attention to prevent prolonged suffering. Despite the essential nature of these veterinary care services, the financial burden often falls on veterinary private business.

In the 2019-20 bushfires, thousands of NSW farms were affected by significant livestock losses, and over 11,000 animals were registered at evacuation centres and animal safe places. Another example was the Lismore floods 2022. However, disaster reporting often omit the widespread impact on animals, including statistics on the number of injured and deceased animals. To rectify this, the AVA suggests disaster impact reporting include animal (livestock, companion animals, and wildlife) injury and death statistics to create a better understanding of the disaster impacts and the support provided.

### Housing of animals escaping domestic and family violence

Due to veterinarians trusted role in the community and the existence of existing relationships with a treating veterinarian, they can be [engaged in the emergency housing of pets that are displaced due to domestic and family violence \(DFV\)](#). Veterinarians may also be engaged by local police or support services to provide accommodation for the animals owned by victims fleeing DFV, as emergency accommodation available for victims of DFV often do not facilitate animal housing.

There is strong evidence that ongoing risk to dependent animals can be a major contributor to people staying in situations that put them at risk of DFV. In some areas of the state, animal welfare organisations and emergency shelters fill this gap, however when these are not available, private veterinary businesses fill the gap. Funding to support this capability has been available in the past by the state government, but it focussed on short-term grants not long-term support for this capability that is key for public safety across the state.

### Wildlife care

There is little data available as to the financial and social value of the delivery of privately funded veterinary care to wildlife. The data available provides evidence that private veterinary practices are not able to recoup their costs, with 92% of survey veterinary respondents stating that they never or





rarely received reimbursements for services provided to wildlife.<sup>36</sup> Furthermore, in that study it was estimated that the costs borne by each veterinary practice annually were \$111,000.<sup>36</sup>

The wildlife data available suggests that most practices would see around 260-520 wildlife cases/year which in 2016 suggested an annual case load for NSW of 177,580 – 355,160 patients. This is considerably higher than the number presented to rehabilitation and wildlife carers in NSW, which was 226,474 wildlife over a 6-year period from 2005-2011.<sup>36</sup>

*“A workforce under pressure is also less likely to provide free services”*

**Recommendation 10: The NSW Government commits funding to develop and implement a framework that provides regulatory and appropriate financial support to the provision of veterinary services for lost, stray and homeless animals, injured wildlife and during emergency situations provided by all sectors of the profession (charities and the private veterinary sector).**

### **(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**

Animal welfare, that is the way animals are treated and looked after, is very important to the Australian community. The current inadequate capacity of the veterinary workforce is negatively impacting on all aspects of animal welfare and places animal related industries at risk in terms of both biosecurity and social licence.

Animal related industries – including livestock production systems, animal sporting endeavours (horse and dog), animal breeding activities

Animal related industries require a social licence to operate. The acceptance and approval of these industries by the community is contingent on the premise that animal health and welfare is maintained to a very high standard. The critical thinking and problem-solving skills developed and honed in an animal health context, coupled with their subject matter expertise, make veterinarians essential for animal health and welfare. The veterinary profession also helps maintain and enhance this social license through animal welfare advocacy, compliance and regulation, research and innovation, and education and outreach.

Many animal-related industries infer that veterinarians are an essential component of how their animals are managed to help maintain social licence, yet engagement of veterinary services is optional. An example of this would be the lack of regulatory requirement of veterinary input into the domestic red meat supply chain.

*“Concern about our trading partners expectations for veterinary oversight of animals on farms which is not happening and for our own city dwelling meat eaters who no doubt believe there is far more veterinary input than what truly exists.”*

Those animal related industries that have a more precarious social licence to operate have incorporated veterinary input into their operating systems. For example, regulatory requirements of horse racing require veterinary input into numerous aspects of the operating system to protect animal health and welfare.

#### *Livestock industries*

While animal health risks to date may have been managed, there is always the prospect of a more significant threat, and incapacity to deliver appropriate veterinary services is likely to limit the effectiveness of any response.



The value of livestock farming to the Australian economy is substantial. In current times, protection of economic value is interlaced with the social licence for farming to operate. However, due to the agricultural business model, limited government support for producers, and veterinary services being a user pays system, may result in producers being reluctant to engage with veterinary services. Increased emphasis on animal welfare, by the media, by the retail sector and by consumers, suggest engagement will be expected to rise in the future. The Australian *Red Meat Advisory Council (RMAC)* in a recent strategic report noted that the risk associated with loss of consumer and community support is valued at around \$3.9 billion over the current decade.<sup>37</sup>

Although there is a limited supply of information on cost versus benefits for increased animal welfare, the RMAC provides some useful benefit-cost ratio estimates for improved welfare, as follows:

PILLAR	BCR		PRIORITY	BCR		IMPERATIVE	BCR	
	2020	2030		2020	2030		2020	2030
CONSUMER AND COMMUNITY SUPPORT for the industry's products and practices	5.6	13.4	Welfare of the animals within our care	7.9	17.3	Continuous improvement of animal welfare	9.6	25.4
						Minimising risk and impact of emergency disease	13.0	13.0
						Minimising the impact of endemic disease	0.7	3.3
			Stewardship of environmental resources	1.6	8.0	Minimising industry impact on the environment	5.0	15.2
						Sustainable management of the natural resource base	0.2	4.3
						Adapting to climate variability	0.9	6.8
			Red meat in a healthy diet	1.3	2.9	Positioning red meat as a preferred component in a healthy diet	1.3	2.9

Figure 17 - Benefit-Cost Ratios for Expenditure on Improved Beef and Sheep Welfare <sup>37</sup>

A number of key observations could be made from this table:

1. Benefit-cost ratios (and therefore by implication the level of risk) associated with social licence for animal industries accelerate over the current decade.
2. At all stages, the issue of animal welfare profoundly dominates costs and concerns (risks) associated with broader environmental and dietary (human health) concerns.

The implications here are that the most important future investment in protection of Australia's significant meat, dairy, and animal fibre industries lies in health and welfare of livestock. While this involves a range of measures, the advisory and interventional roles of the veterinarian are critical to every innovation and their absence would be to the detriment of overall animal welfare.

Within this table it should be noted that in the short-term, reducing the risk of EAD is an important factor expected to have significant benefit. The optional model of veterinary engagement with some types of animal industries, particularly extensive farming systems, means that risk mitigation techniques around EAD, such as surveillance, are no longer occurring for the reasons outlined in TOR section (h). In Australia 10 years ago, areas with the highest surveillance activity intensity aligned well with the distribution of the likelihood of disease introduction, establishment, and spread, with the exception of the northern Australian coastline, and these aligned with the locations of private and government veterinarians. <sup>38</sup> It is unclear if this remains the case, given the continued erosion of supply of veterinary services in rural and regional areas. The widespread distribution of the recent EAD Japanese Encephalitis Virus before detection provides cause for concern.

*“Increased farmer knowledge and support from government agencies has kept only a small presence of veterinarians on the farm. Certainly not enough to control a major outbreak of an*



*exotic disease as has been demonstrated by recent outbreaks of fowl plague, fire ants, varroa mite, etc.”*

The recent federal senate inquiry report looking at the adequacy of Australia’s biosecurity measures and response preparedness, in particular with respect to Foot and Mouth Disease and Varroa mite,<sup>39</sup> acknowledged these risks and made several recommendations.

**Recommendation 11: The NSW Government through funding encourages industry and the veterinary profession to collaborate and develop a framework or solution that will improve integration of veterinary services into animal production systems that is workable for all parties.**

#### *Animal sporting endeavours (horse and dog)*

Animal sporting endeavours that are undertaken for the entertainment of society face an erosion of public support without a strong foundation of animal welfare and rehabilitation. The veterinary sectors that predominantly service this area, namely equine veterinarians and greyhound or sporting dog veterinarians, are in shortage which negatively impacts animal welfare, potentially both at the time of the event and in the general care that is required of these animals to undertake their endeavours. The equine industry is a multi-billion-dollar industry that is at risk if veterinary capacity is not increased. Unregulated activity related to animal health of this group of animals is common and has contributed to the erosion of veterinary capacity to the detriment of animal welfare, and deregulating (through legislation or sporting code regulations) veterinary related activity is likely to threaten the social licence to operate.

#### *Animal breeding activities*

When there is not sufficient veterinary capacity to support animal breeding activities, there is a high risk of harm to the animals involved. There may be increased reproductive losses, and negative welfare implications for the individual animals. Veterinary guidance and genetic counselling are key to good breeding practices and for the reduction in inherited diseases and defects.

#### Individual animals

At the very best, the inadequate capacity to provide veterinary knowledge and services to meet demand of individual animal care results in a delay in care, at worst it results in no care, and in some cases leads to prolonged suffering or an inhumane death. Unfortunately, negative animal welfare impacts as a result of reduced capacity are felt across the entire economic spectrum but are likely most pronounced at the lower socioeconomic end. The community has indicated that the provision of regulated veterinary services to all animals is essential in our society, similar to human health services. There is expectation that these services will be available on demand and geographically distributed to benefit all. In addition, the community expects there to be mechanisms in place to serve the animals owned by those who don’t have the means to provide care. Funding for services that are sporadic and variable can cause community confusion and erode long-term engagement with the veterinary profession.

### **(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**

Access to veterinary care for members of the public, particularly those with lower incomes or who live in regional, rural, and remote locations, can be hindered by several barriers. The same social determinants of health that impact human health outcomes also have impacts on animal welfare.<sup>40</sup>

These can be divided into several areas:



- **Affordability in light of the costs of delivery and business model:** This particularly impacts those with lower incomes. As discussed above, the cost of delivery of 21<sup>st</sup> century veterinary care that the community expects is expensive to deliver. Given the lack of public funding, the full cost of care needs to pass on to the animal owner. The profession's desire to manage affordability for animal owners and deliver public good has resulted in underinvestment in the labour component contributing to the shortage.

*“The current business model used by the profession is one of payment for services rendered and goods sold, and where the cost of goods and services must be slightly lower than the price paid. Unless the business is viable, it will close.”*

The spectrum of economic groups within the community from high to low socioeconomic status means that the profession offers a spectrum of care to try and cater for a variety of needs. Unfortunately, the misconception that human health care is inexpensive to deliver due to a heavily funded system leads to unrealistic expectation of animal owners - that all people should have access to the highest quality care for their animals at little cost.

*“There is a disconnect between the true cost of care and perceived cost of care due to Australia's wonderful public health system including Medicare. The public needs to be educated on the true cost of healthcare, and why looking at raw figures veterinary care is so much cheaper compared with the human equivalent. Animal ownership is a responsibility and with that comes the financial planning for appropriate veterinary care.”*

Mechanisms to try and address this affordability is currently in the form of pet insurances and buy-now-pay-later schemes. They have assisted to some degree in the mid to higher socioeconomic community groups but are not adequate for lower socioeconomic groups as they are expensive or can increase debt exponentially. In addition, many of these clients are ineligible for credit products or struggle to be approved in a timely fashion when their pet is requiring treatment. Many veterinarians experience emotional conflict in cases where a client is unable to afford care for their pet, again contributing to poor mental health and a lack of job satisfaction. Pet insurance is an emerging industry in Australia and needs to mature into a more cost-effective system if greater uptake is going to be realised.

The historical premise of managing affordability through small individual veterinary business offering large discounts or lines of credit is not acceptable and can lead to significant business stress and underinvestment in the labour component of the profession.

With the veterinary shortage, the remuneration of veterinarians has improved somewhat, due to private market forces. This has resulted in an increase in fees to animal owners, which has further reduced the affordability within the lower socioeconomic groups.

Animal charities offset some of the challenges around affordability for lower socioeconomic groups; however, their geographical locations often limit them in the majority to urban centres.

- **Inability of the profession to service people experiencing vulnerabilities:** People who are responsible for the care of animals may be experiencing vulnerabilities which can create barriers to accessing veterinary services. People experiencing vulnerabilities are often in low socioeconomic groups. These vulnerabilities can include:
  - homelessness or risk of homelessness
  - domestic and family violence
  - advanced age
  - physical disabilities



- mental health challenges
- neurodiversity
- language and cultural barriers

In the human health sector, there are allied industries that provide mechanisms for people to access human health care. In the veterinary profession such mechanisms are very limited, with the concept of veterinary social work being very new and evolving. An uptake of veterinary social work by the profession is likely to reduce the barriers in this group of people, however, resourcing should not be borne by the private veterinary sector.

### **Recommendation 12: The NSW Government support extending access to the national Translating and Interpreting Service for veterinarians.**

- **Distance to travel:** Limited access to reliable transportation (private and public transport options that will allow animals to be transported, especially if unwell) can pose a barrier for animal owners, particularly those in rural or low socioeconomic areas. The distance to the nearest veterinary clinic or hospital may be prohibitive, making it challenging to seek veterinary care in a timely manner, or at all. This is increasingly problematic in rural areas for both large and small animals when veterinary services have been discontinued.<sup>32, 33</sup>

The advent of digital technologies has disrupted the way veterinary care can be undertaken, especially in rural and remote areas. Unfortunately, current regulatory requirements are not able to nimbly adapt to allow full adoption of such technologies to help address the barrier of distance to travel.

- **Stigma or Fear of Judgment:** This is a factor for those in lower socioeconomic groups and in those participating in animal related industries. Financially disadvantaged pet owners may feel embarrassed or judged when seeking veterinary care, so they decline to do so.

In contrast producers may see veterinarians as having a conflict of interest, in that veterinarians may be potentially seen as inspectors or “welfare” officers who could/would flag real or perceived short fallings on properties concerning disease surveillance.<sup>34, 41</sup> This is supported by a recent survey examining engagement of private veterinarians with disease surveillance activities where 54.3% of respondents advised that they had wanted to submit samples to exclude a notifiable/reportable disease, however the owner/carer has declined consent to do so. One of the main reasons recorded for declining testing included the owner/carer is worried their property will be quarantined 52%. (unpublished Biosecurity Queensland/Australian Veterinary Association, Emergency animal disease testing survey analysis, 2023)

## **(I) 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**

The veterinary workforce is a complex system where there are many factors interplaying with each other, in some cases synergistically while at other times antagonistically. The veterinary workforce shortage has been decades in the making and while the AVA is of the opinion that there are some short-term stop-gap strategies that can be put into place to assist, longer term strategies are required for sustained improvement. Individuals often have suggestions for specific strategies to support the current workforce based on personal observations and experience. It is not uncommon for these strategies to provide positive benefits to one sector of the profession yet have unintended consequences for other sectors.





The long-term strategies to address the underlying causes and modify the structure of the profession to adapt to the changing needs of society are going to require complex system engineering thinking, collaboration, innovation, and further data collection to produce strategies where the outcomes do not have unintended consequences, and are not to the detriment of animal welfare, the community or the profession.

**Recommendation 13: The NSW Government provide funding to resource the development of prioritisation and planning of the longer-term strategies that will have the most effective workforce outcomes for all stakeholders the veterinary profession serves and the profession itself.**

The AVA is of the opinion there are intervention points to break the pathway to inadequate capacity to deliver veterinary knowledge and services to meet demand. Some of these are within the remit of the profession to develop and apply, while others require external support from those who benefit from the veterinary profession, that is the wider veterinary industry, animal related industries, and the community through the government.

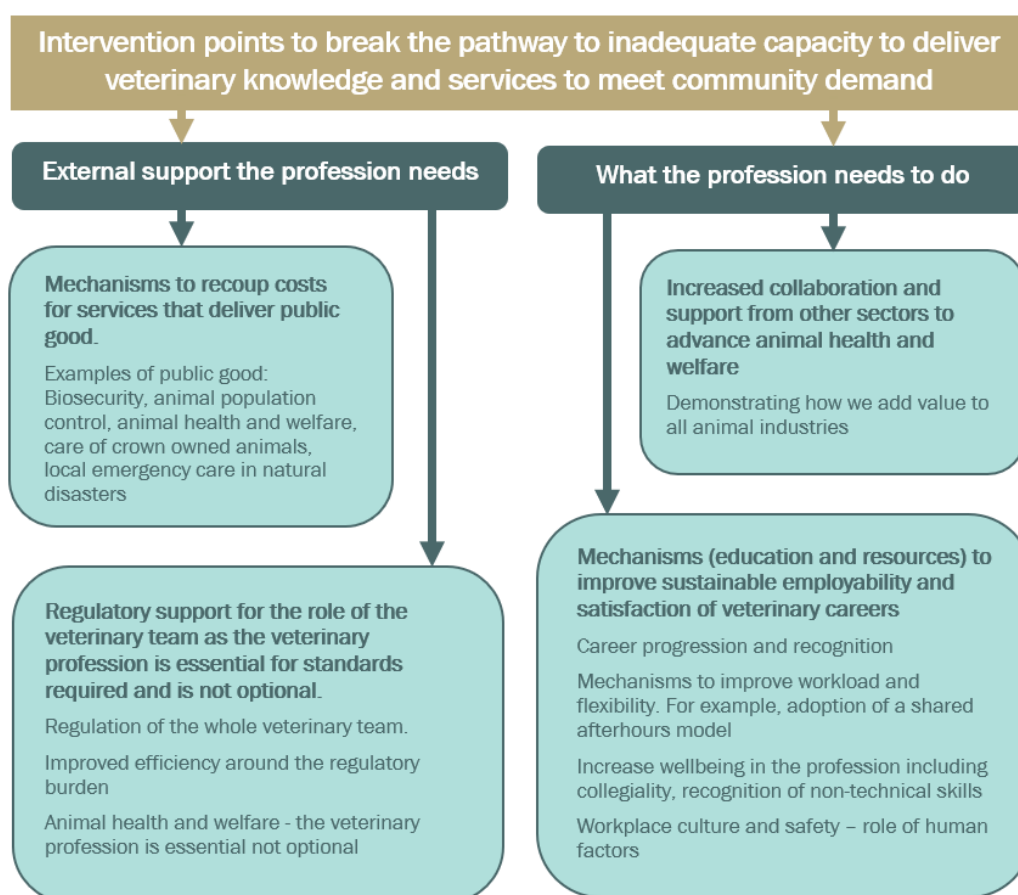


Figure 2- Intervention points to break the pathway to inadequate capacity to deliver veterinary knowledge and services to meet community demand.

### Long term strategies

Long term strategies must address the barriers to veterinary care. Although it is not the intent of the profession for this to occur, these barriers are increasing.

Long term strategies must address the long-term outcomes the profession needs to achieve. These outcomes include:





- **Sustainability of the profession by reducing financial vulnerability.** This will provide the necessary input to allow an increased investment into the labour component which will allow many of the challenges of sustaining a workforce to be addressed. **Providing a mechanism for the private veterinary sector to recoup the value of services of public good that they deliver would contribute to this.** The public good benefits all the community, and it is the community through the government that needs to fund its provision. This includes ensuring that veterinary departments within government are adequately funded, that charities are adequately funded and the private veterinary sector who provides the majority of the public good is able to recoup the costs associated with this. Without adequate funding, veterinary services cannot operate in a competitive market where normal market forces exist (supply and demand) and there is impact on the price of labour which cannot reflect the competency of veterinarians required by registration.
- **Areas of public good that need to be addressed are:**
  - Biosecurity and surveillance – this includes all animals, not just livestock. Zoonotic diseases are a major threat to human health and the veterinary profession has an extremely important role to play in this area.
  - Animal care during emergency disaster situations
  - Animal management of strays/homeless animals
  - Animal population control – desexing
  - Veterinary care of animals owned by the Crown (wildlife)
  - Provision of veterinary education through WIL
- **Regulatory support for the role of the veterinary team, and recognition that the veterinary profession is essential for standards required, not optional.** The provision of veterinary care must be regulated to protect animals and the community. Strategies the AVA believes would enhance regulatory support include:
  - Regulation of other members of the veterinary team – that is veterinary nurses and technicians, who could undertake an increased complexity of activities under the overarching supervision of the veterinarian. The complexity of veterinary science and the skill set of the profession have parallels with the human health sector, and the veterinary sector needs to evolve to accommodate this.
  - Legislative reform that would provide flexibility to the veterinary team around the way veterinary knowledge and services are delivered in rural and remote environments (e.g., telemedicine).
  - Strategies to improve efficiency around the required regulatory burden.
  - Legislative reform to enable the costs of legislated requirements of basic care (first aid) to be recouped.
  - Support of the lifelong learning required by the profession to remain contemporary.
  - Given the increase of abuse and assault by the public, be provided legislative protections for veterinary team members similar to the [Crimes Legislation Amendment \(Assaults on frontline emergency and health workers\) Bill 2022](#) and [Crimes Legislation Amendment \(Assaults of Retail Workers\) Bill 2023](#).



- **A workforce that is able to rapidly adapt to generational and societal change around workforce participation and surge at times of increased demand.** Strategies that would be important to consider are:
  - Improved data collection and management of the workforce - consistent data collection across all jurisdictions, this is a project that is currently being worked on involving multiple stakeholders within the profession, however implementation will require significant funding.
  - Workforce modelling to predict future needs in the face of varying demands will be required. It is currently unknown if the profession needs to graduate more veterinary students or if improved retention and regulation of the wider veterinary team would be sufficient. Until detailed modelling is undertaken strategies such as increase in student numbers could have long term unintended consequences.
  - Mechanisms to incentivise training for skill sets of need e.g., veterinary pathology, research veterinarians, public health veterinarians.
  - Mechanisms to achieve sustainable employability and career satisfaction – and by extension lower attrition rates. Examples include (some of these are currently being worked on by AVA and others)
    - Career progression and recognition pathways.
    - Mechanisms to improve workplace culture and safety, workload, and flexibility.
    - Increasing wellbeing in the profession through recognition of the importance of non-technical skills and other factors.
    - Collaboration with veterinary educators to allow the profession to prepare for generational change and for the educators to understand the needs of the profession. The recent veterinary education review by the Veterinary Schools of Australia and New Zealand has made a number of recommendations in this area.<sup>15</sup>
- **A vibrant rural veterinary community where the veterinary roles are sustainable and satisfying, all animals in those communities (livestock and companion animals) have access to veterinary care, and veterinary involvement in animal production systems is mandated as essential to enhance animal welfare and biosecurity.** Achieving this outcome will require a suite of strategies, many of which required engagement and collaboration with a range of stakeholders. Strategies that could be considered include:
  - Mechanisms to increase veterinary involvement in animal production systems through either mandatory requirement of veterinarians in the supply chain of all livestock products or through the provision of funding to encourage producers to engage with veterinarians around biosecurity and welfare in a scheme similar to the [Animal welfare pathway that the UK](#) has just instituted.
  - Mechanisms that provide business support through infrastructure or other incentives for the private veterinary sector to have a presence in rural communities. For example, funds to subsidise long term locum accommodation/relocation fees.
  - Profession led innovation to the afterhours model to improve access to veterinary care whilst improving sustainability within the profession.
  - Legislative reform that would provide flexibility to the veterinary team around the way veterinary knowledge and services are delivered in rural and remote environments.



- Mechanisms to enhance recruitment and retention of the next generation of veterinary team members.

**Recommendation 14: The NSW Government commit to legislative and regulatory reform to safeguard the role of the veterinary profession in the delivery of animal health and welfare, whilst making it adaptable to a constantly changing environment. This could be achieved by a review of the veterinary practice act and consider the interactions with other legislation including the prevention of cruelty to animals act.**

### Short term strategies

Short term strategies are required to act as a stop gap and allow time and resources to be directed to developing the longer-term solutions. The AVA believes there a number of shorter-term strategies that would be of use, including:

- Educational fee relief to incentivise early career veterinarians into rural areas as per the [AVA prebudget submission](#).
- Reduction of barriers to assist overseas veterinarians and veterinary nurses to enter Australia and achieve permanent residence.
- Inclusion of registered veterinarians within other current mechanisms to sustain medical and paramedical workers in rural areas, under the accepted One Health model approach for health in Australia.
- Increase exposure of veterinary students to rural veterinary practice by providing support for veterinary students wanting to participate in WIL placements rurally and remotely. This can be achieved by expanding existing HELP loans available for overseas WIL to rural and remote placements, and expanding the NABS subsidy scheme to all Australian remote, rural and regional locations, and make this an ongoing financial support for veterinary students undertaking their practical placements.

**Recommendation 15: The NSW Government considers funding around educational fee relief to encourage early career veterinarians to work in rural NSW.**

**Recommendation 16: The NSW Government includes veterinarians in existing mechanisms to sustain medical and paramedical workers in rural areas of NSW.**

### **(m) strategies to improve access to veterinary care**

The AVA's top welfare objective is that any animal that is under human care in Australia should be able to access veterinary care, and strategies must address the barriers to veterinary care. Strategies to improve the sustainability of the profession through supporting the workforce will improve access to veterinary care.

Given that the structure of the profession has evolved to a predominantly privately funded system, the key to improving access to veterinary care to the whole community is to support the existing structure that is in place and ensure there is synergy and symbiosis with government veterinary services and charities.

### Outcomes to achieve



- **Increasing affordability and accessibility through fostering partnerships between the private veterinary sector, animal welfare organisations, and community groups, to enhance service provision in underserved areas or to clients experiencing disadvantage, such as low income.**

Many initiatives such as subsidised veterinary care programs, mobile clinics, education campaigns, and collaborations between animal welfare organisations and veterinarians are undertaken with the aim to improve access to veterinary care for all animal guardians, regardless of income level.

These initiatives rely heavily on the support and contribution from private veterinarians, often in the form of significantly subsidised or fully pro-bono services. The private veterinary sector is unable to continue to sustain the delivery of these services.

The implementation of community centred veterinary practice with private-public collaboration would reduce pressures on mainstream veterinary practice. With public funded support, this would utilise existing infrastructure and workforce. Retention of professionals working within the sector would be improved by such initiatives – improving the sustainability of the sector overall.

Supporting mobile veterinary clinics or outreach programs that can bring veterinary care directly to underserved areas, especially in rural and remote regions improves access to veterinary care.

- **Collaboration of the profession with animal industries to develop long term strategies to improve access of veterinary care to maximise animal welfare and improve biosecurity.** Reversal of the issues being faced in the livestock veterinary sector will require a collaborative approach by industry and the veterinary sector (government and private) to ensure veterinary input into animal welfare and biosecurity is prioritised.

This was identified in the recent senate inquiry report looking at the adequacy of Australia's biosecurity measures and response preparedness, in particular with respect to Foot and Mouth Disease and Varroa mite.<sup>39</sup> This report acknowledged that veterinarians are an essential part of Australia's biosecurity system – holding key front-line defence roles in monitoring and surveillance, disease detection, EAD preparedness and response, and animal welfare. They acknowledged that attracting and retaining rural veterinarians is clearly challenging and complex, and will require a coordinated response between government and industry to address shortfalls in the medium-long term.

The committee recommended that the Australian Government work with relevant industry bodies to design and implement measures to improve the capacity and capability of production animal veterinarians, particularly in rural and remote areas, including:

- enhancement of veterinarian attraction and retention strategies and initiatives such as graduate and rural practice incentives.
- compensation paid to veterinarians in the event of their involvement in an EAD response; and
- increased utilisation of rural and remote veterinarians in surveillance and monitoring activities.

The AVA is supportive of strategies to achieve these.

*“It is imperative to recognize the critical role of regional and rural veterinarians in maintaining both biosecurity and animal health. These professionals are often the first line of defence against infectious diseases and play a vital role in safeguarding the agricultural sector. Therefore, any changes or decisions made*



*should prioritize their presence on farms and in remote areas to ensure prompt and effective response to veterinary issues.”*

- **Expansion of the regulatory framework of the veterinary profession to include veterinary nurses, veterinary technicians and potentially paraprofessionals. These professionals would need to operate under the licensure and supervision of a qualified veterinarian to ensure monitoring, accountability, and maintenance of standards.**
  - The veterinary profession is adamant that veterinary care must be regulated to protect animal health and welfare of all species and the safety of the community. By extension this means that those providing that care must be regulated and it be enforced. It is the opinion of the AVA that there needs to be legislative reform to remove exemptions for animals such as wildlife, fish and production animals or particular painful husbandry procedures from animal welfare legislation to maintain consumer confidence in modern animal welfare legislation.
  - There has been commentary that through deregulation of acts of veterinary science and rescheduling of medications the public would have greater access. The AVA strongly disagrees. There is serious risk to animal health and welfare, public health and safety, community trust and the social licence obtained from animal welfare standards, required for trade. The AVA’s concerns include:
    - **Erosion of quality:** Deregulation removes the regulated standards and oversight required to maintain Australian standards of welfare and safety. Without equivalent education and training it is not possible to maintain the quality of veterinary care and animal and public safety. Currently, veterinarians in Australia must meet specific high-level educational and licensing requirements to practice. Deregulation could allow individuals with minimal training or qualifications to provide veterinary services, procedures or use pharmaceuticals which compromises the quality and safety of animal healthcare required for standards of animal welfare, public safety, and quality assurance for trade and performance.
    - **Lack of standardisation:** The current regulatory framework ensures a standardised level of veterinary services, education, care and professional conduct among veterinarians. The lack of uniformity without veterinary regulation in the delivery of veterinary services, will make it difficult for animal owners to assess the qualifications and competency of providers without assurance of knowledge and experience.
    - **Reduced mechanisms for the community to register concern about veterinary care:** Without appropriate regulatory oversight there will be fewer mechanisms in place to address complaints or hold providers accountable for substandard or negligent care. This will negatively impact animal welfare and put the public at risk. Alternatively, there will be an increased cost of oversight and regulation for animal and human health and safety when currently restricted procedures and pharmaceuticals are performed or administered without what is currently considered appropriate training.
    - **Impact on animal welfare:** Deregulation is likely to undermine the ability to enforce standards and protocols that ensure the well-being of animals. It is unlikely that the framework around the operationalisation of animal welfare legislation would be able to deal with this.
    - **Erosion of trust in the quality of the provision of veterinary services.** The current regulatory system helps maintain the credibility and trust associated



with veterinary care, which is a crucial part of animal industries social licence to operate. If deregulation leads to a decline in the quality of care, as it is likely to, this will erode public confidence in animal industries to operate and potentially threaten market access of export of animal related products.

*“Deregulation of acts of medicine deregulated in other states has had negative impacts. For example, when lay pregnancy testing for cattle was allowed in QLD, one of reasons given for allowing this and taking it away from being an act of veterinary science was because farmers and industry said that vets couldn't keep up with the current demand. This reduces passive bio-surveillance on farms.”*

- **Collaborations. with other sectors to allow improved access to people experiencing vulnerabilities**

Veterinary teams are not trained, experienced, or supported to provide optimal care and service for socially complex client situations that frequently arise when interacting with clients experiencing various types of vulnerability. This very often results in poor wellbeing outcomes for all concerned – the animal, the client, and the veterinary team.

This cohort of clients are rapidly increasing, with more frequent situations where client expectations and their capacity or capability to receive the expected care for their companion animals cannot be met. Veterinary teams working collaboratively with allied human health professionals in the area of social work have been shown to deliver the best outcome for clients, veterinary teams and animals. Veterinary Social Work (VSW) is an emerging field in Australia, and veterinary social workers provide the added benefit of being trained and experienced to embrace a multi-disciplinary and holistic approach to managing often complex human social needs in the context of veterinary care. The inclusion of this skill set in the clinical environment team improves the wellbeing and mental health of veterinary teams.

*“When you look at the contributing factors of burnout; it's the people side of practice; it's not actually the animals. And the social workers can navigate that territory”*

## (n) any other related matters

### (n1) veterinary education

Much commentary has been put forward by the profession around veterinary education. For the committee's awareness the Veterinary Schools of Australia and New Zealand have released a review of veterinary education.<sup>15</sup> The AVA is supportive of the majority of the recommendations as they pertain to the profession.

### (n2) Veticare

On 2 August 2022 the [‘Veticare’ motion](#) was passed in Victoria to address problems in the animal health system in Victoria, detailed as an inability to “provide high level care to all animals who pass through their doors - due to a range of reasons, such as staff shortages, resourcing and the financial restraints of owners”.

Although the AVA appreciates the acknowledgement of the benefits of pet ownership and the pro bono work of veterinarians, the mechanism to provide government funded public veterinary hospitals in competition, rather than in support of the current investment of veterinary infrastructure and public good by local veterinarians and charities, could undermine the provision of local veterinary services





and reduce the ability to apply appropriate rates for indicated care (market failure) whereby adding to the problems.

The AVA fully supports increased government funding to support veterinary care, however suggests supporting the extensive infrastructure and educational investment already operating in local communities. The unintended consequence of increasing competition with veterinary hospitals advantaged by government funding may further drive down the appropriate invoicing for indicated services, impacting already low remuneration and working conditions of veterinarians and their teams. Rather, supporting the broad areas of public good provided in local communities such as wildlife, stray animals, free and low-cost services for hardship and people experiencing vulnerability, to assist local veterinary practices to be appropriately remunerated for work in private - public partnerships. This will support the veterinary profession to be sustainable and acknowledge the work of veterinarians.

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