

SPVS VMG Covid 19 Practical Help Survey Results

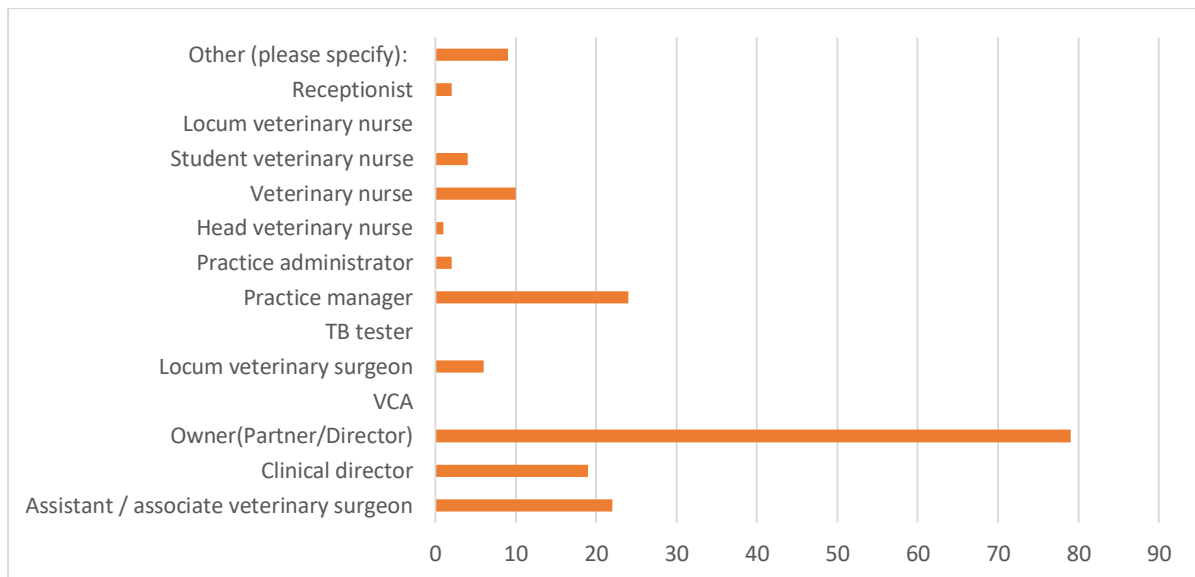
A survey was sent via SPVS, VMG to members of the profession to ascertain impact of COVID 19 and subsequent changes of working on veterinary practices.

A total of 171 responses were received between 24/03/2020 and 31/03/2020.

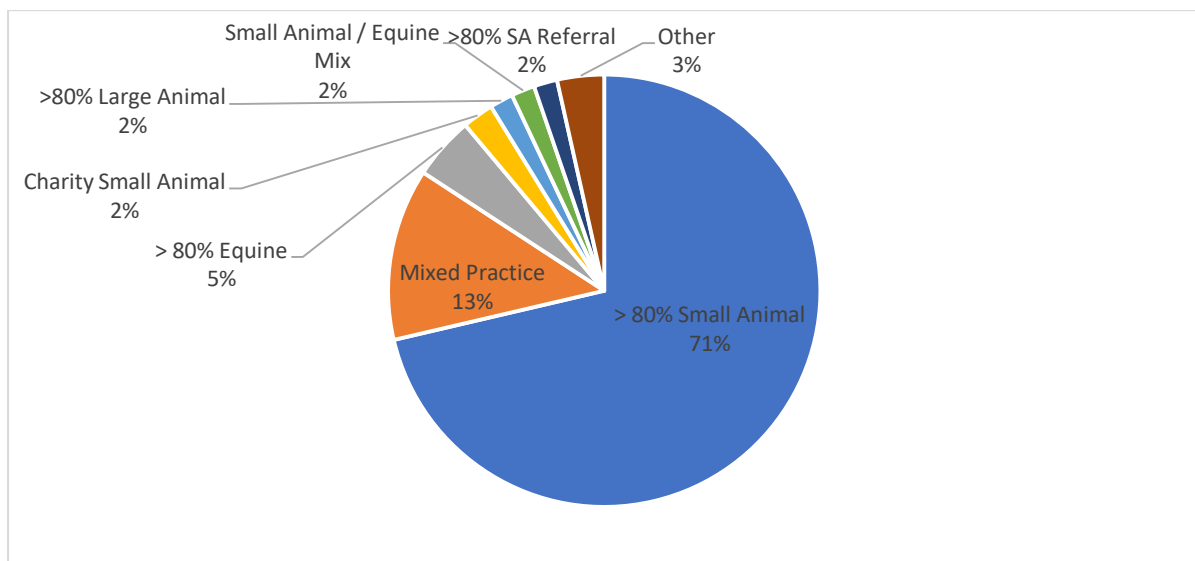
The aim was to use the information gathered to help tease out the concerns of the profession and identify future needs to help influence both policy and practical guidance to members.

Profile of Respondents

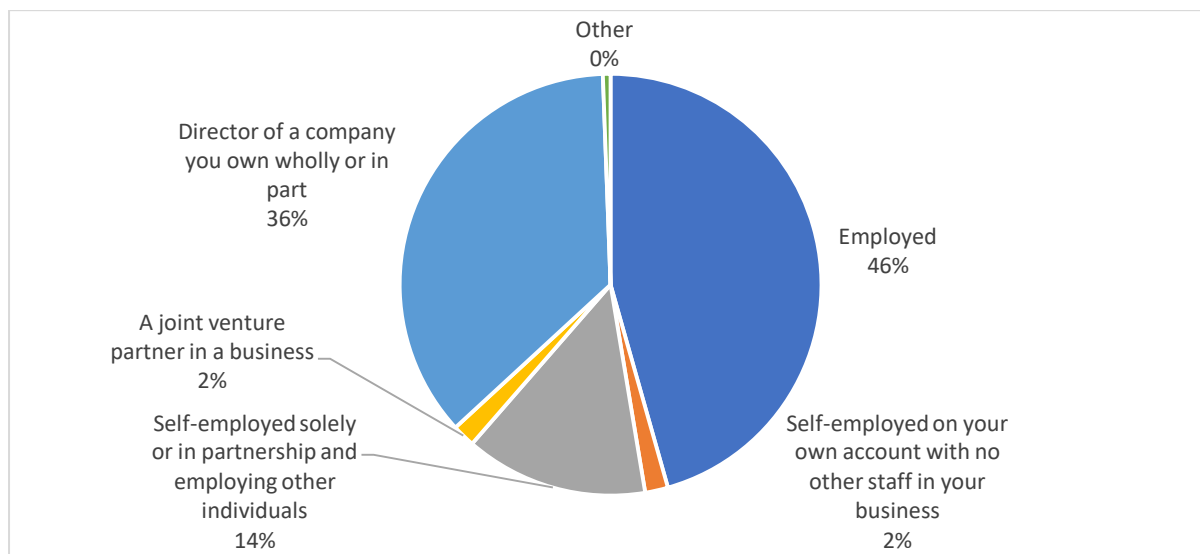
By role:



By business type:

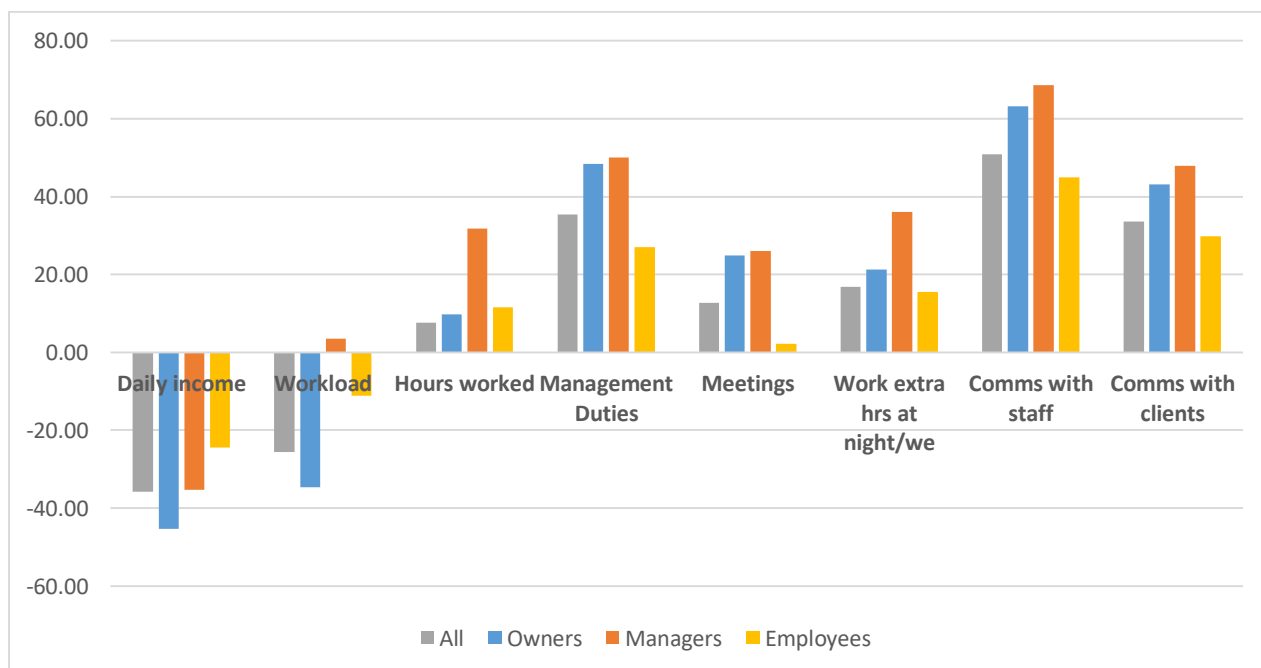


By employment status:



Challenges Facing the Profession

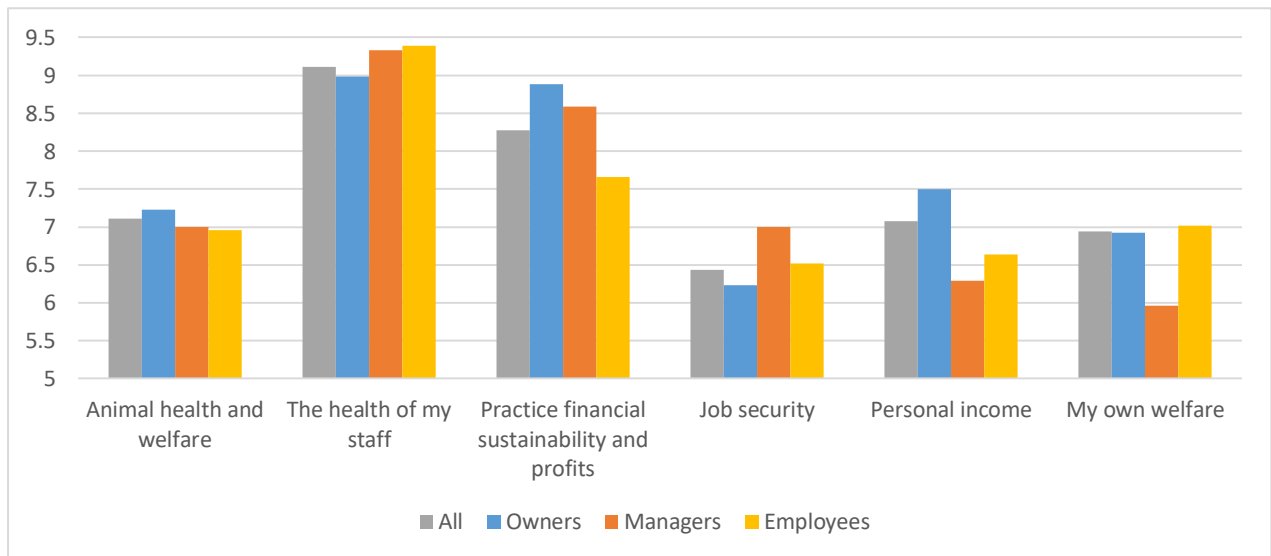
How have the following areas changed in the last WEEK compared with what you normally expect at this time of year?



For this question scores were converted so that zero indicates no change, a positive figure represents an increase and a negative figure a decrease.

The daily income reductions were higher for owners (45%) than employees (25%). A similar finding was observed for workload. Managers and owners have seen significant increase in extra work/ management with the majority of time allocated to additional staff communications.

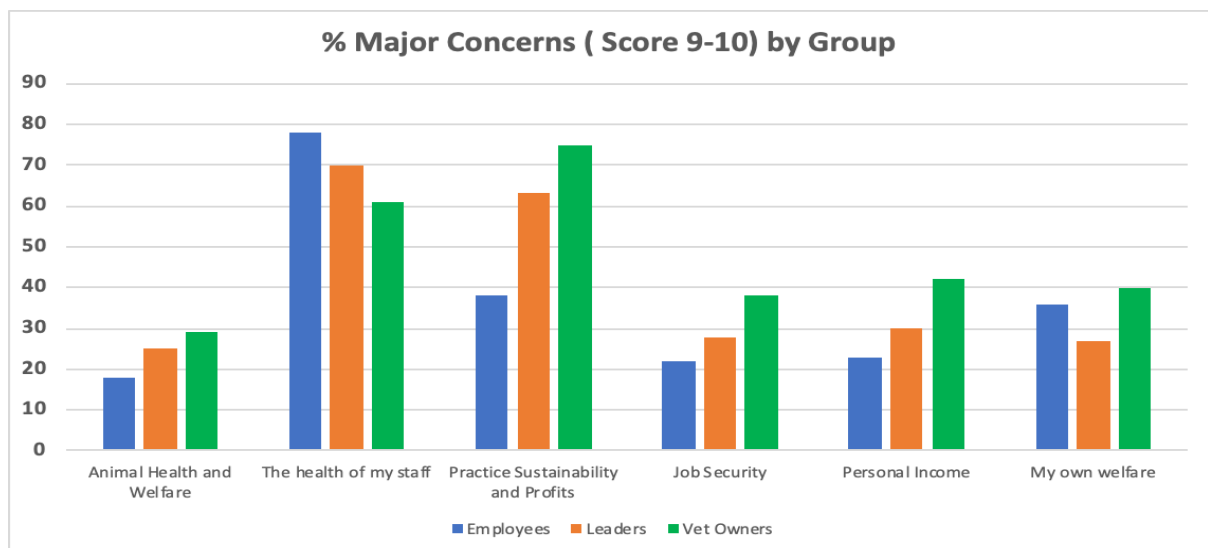
In the light of the current crisis how concerned are you about the following areas?



A score of 10 meant most concerned, and 0 least concerned.

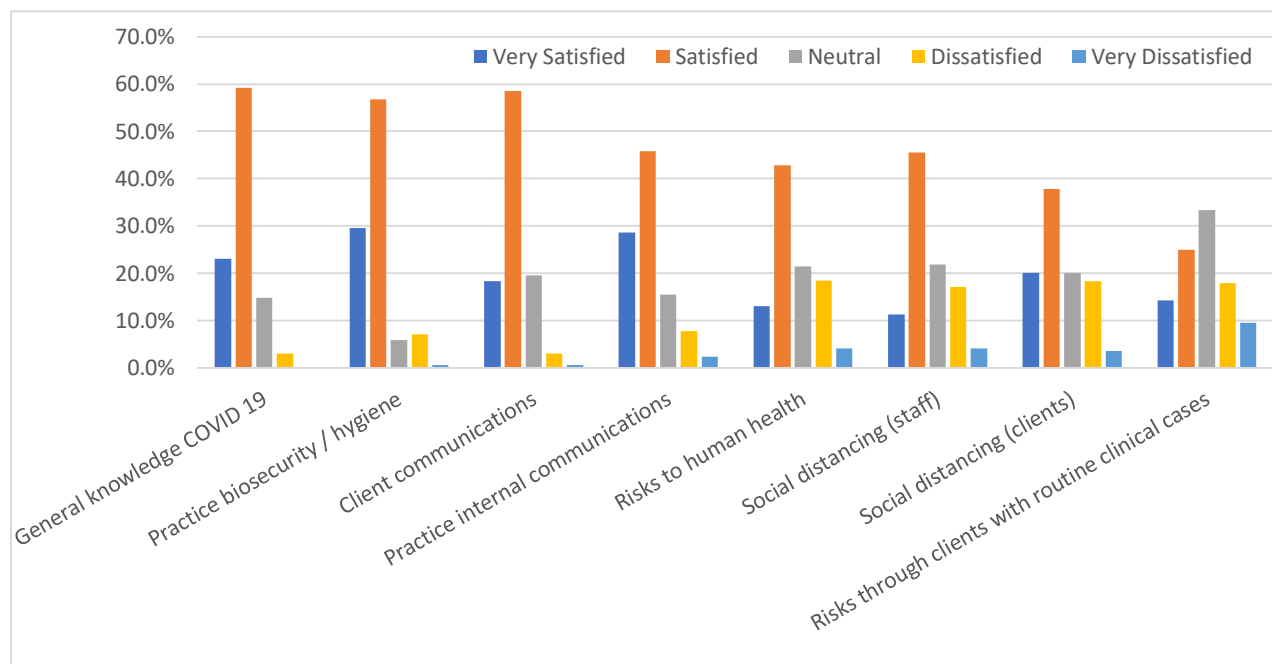
The predominant concerns for owners and managers is the health of their staff followed by financial concerns. Personal income was the highest concern for owners. Job security was the lowest concern for all groups.

More detailed analysis of this data filtering the data between employees, leaders (owners, directors, clinical directors, managers) and veterinary owners in private practice showed significant differences. Major concerns were defined as scores of 9 or 10 on a scale of 1-10.

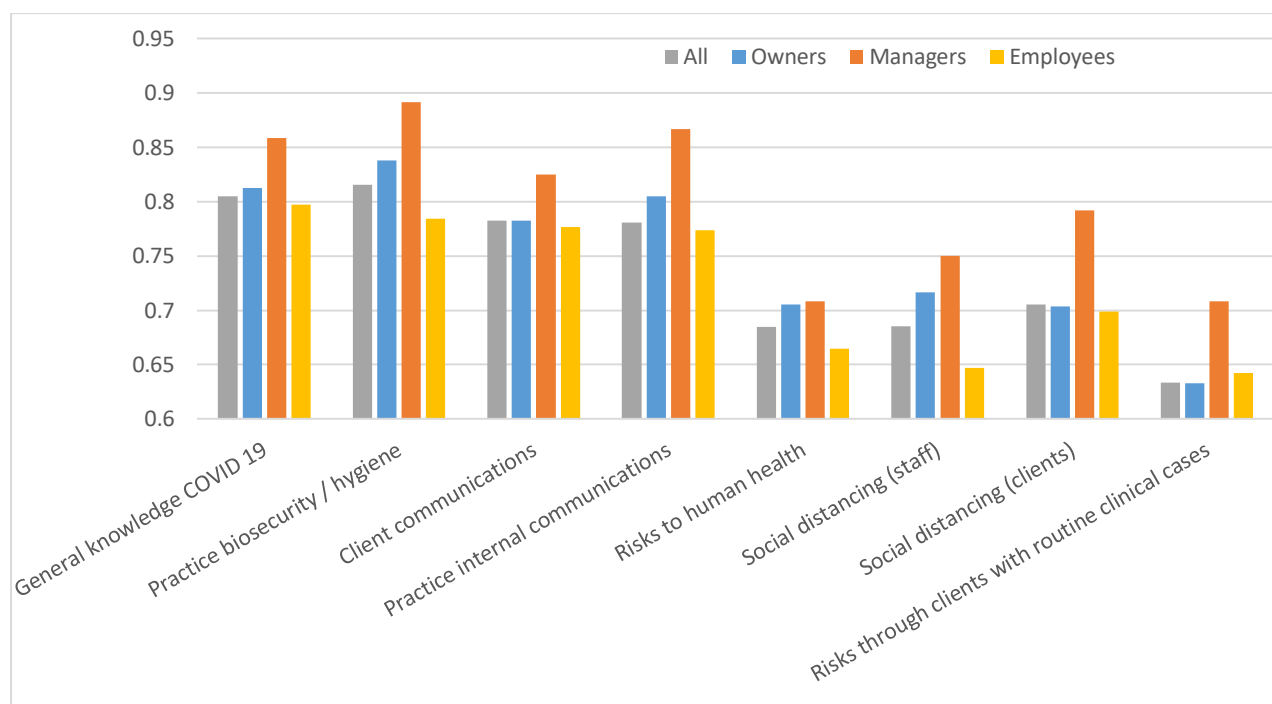


Veterinary owners in private practice had the highest concerns relating to animal health and welfare, sustainability, profits, job security, personal income and their own welfare. The veterinary owners had greater concerns about the health of their staff than their own welfare in line with other groups. This combined with the other stressors for veterinary owners clearly indicates that support is required for this group of our profession.

How satisfied are you with your knowledge of or ability to manage the following areas relating to COVID 19?



The results were then broken down for owners, managers and employees, with responses converted to a score to represent the level of satisfaction (1 = very satisfied):

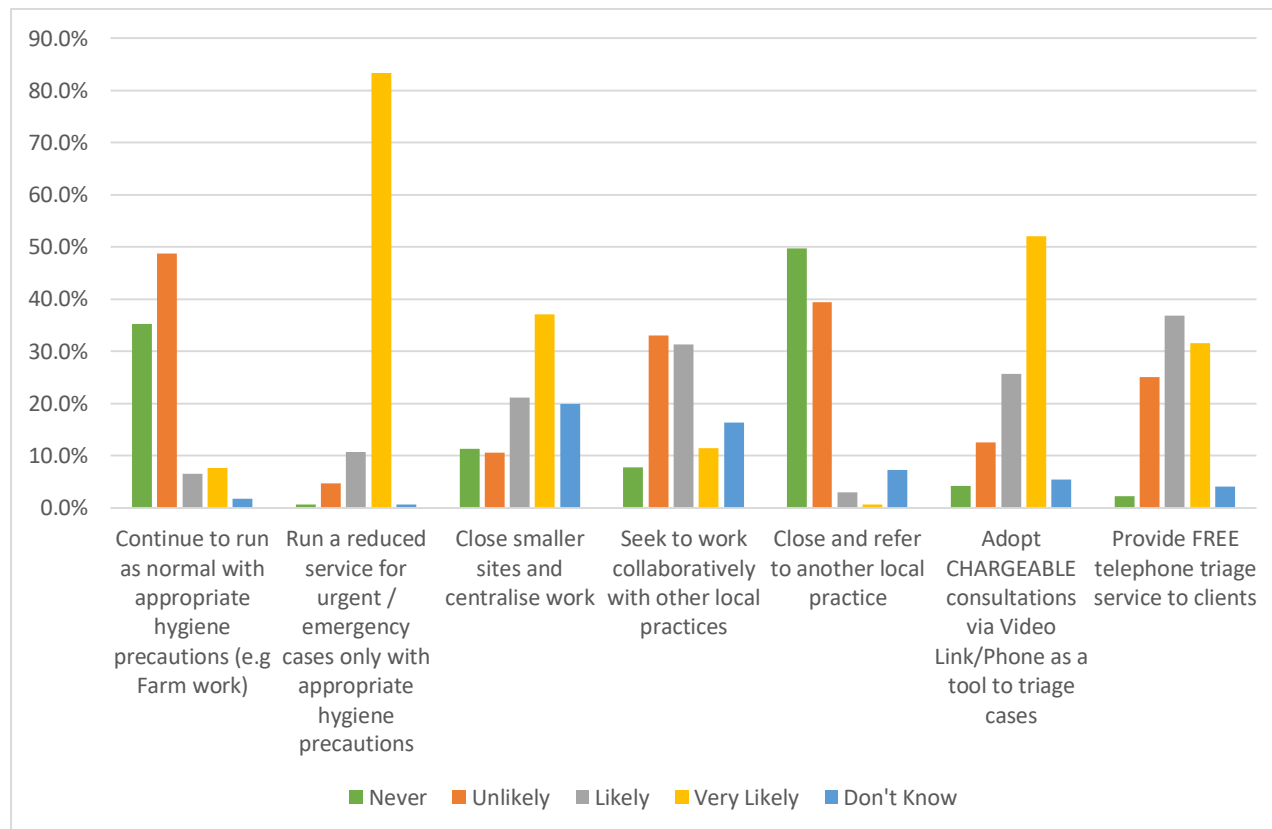


The respondents were generally satisfied with the general knowledge about COVID 19, practice biosecurity/ hygiene, client and practice internal communications.

The areas of greater concern relate to risks to human health, social distancing of staff/ clients and risks through clients with routine clinical cases.

How are Practices Responding to the Crisis?

In the light of the recent statement from the Prime Minister requiring people to stay at home unless shopping for essentials, exercising or for medical reasons, how is your business likely to react?



90% of practices plan to run a reduced service for urgent and emergency cases. The most likely result for practices is to close smaller sites and centralise work. 40% of practices are unlikely or never going to collaborate with other local practices. 8% may choose to close and refer to another local practice. 90% plan to adopt chargeable remote consulting and 67% plan to offer free of charge telephone triage for clients.

A selection of further comments from respondents is show in the following table:

Already give a lot of free telephone advice
Already introduced telephone / video consults - going well but charging med checks at only 2/3 and it is all taking a long time
As a locum I don't know how different practices will be responding, but I know I am likely to do less work.
As usual, you ignore government practice. At the very least, offer a not applicable option
Based in the Western Isles, we have been triaging cases by phone for the last 30 years. Large animal practice cannot continue "as normal" We have had instruction to attend emergency work but what else are we supposed to be doing? Cancelled a load of BVD blood sampling and dehorning today It is not essential work. Has nobody been listening to Government instruction? What we need is clear unambiguous guidance from RCVS.
Currently performing physical consultations of emergency and urgent cases which will become emergency or impact animal welfare if left with no clients present. All other cases are being assessed by phone consultation with video calls where appropriate.
Farm work is continuing as long as we can do it safely. Small animals is emergency and urgent work only

Find it difficult to charge for advice as have always provided free .
I don't think we're going to have staff wear masks and gloves when interacting with clients, we're keeping client interactions to a minimum, It would be nice for the next two or three weeks to just have a skeleton crew and take care of sick pets, puppy vaccines and maybe rabies-vaccines? I know they're worried about keeping everybody employed and meeting the bottom line. As in the last two days though routine appointments dropped off drastically on their own.
I have urged my CD to adopt online triage and improve hygiene and social distancing measures and feel at a loss by the pitiful response
I work for a charity and although we can't triage animals that are not under our care we will be providing more information for pet owners online and on the phone. We will not be charging for this but will ask for a donation.
Independent SA charity with limited outpatient service
LA busier than SA as cut out all routine SA which is not possible in LA More consultative work Routine prescriptions a nightmare -extension of panic buying
Lots of clients are not very tech savvy, especially older clients. The concept of paid telephone consultations is alien to most clients. There will be many mistakes made that will come to haunt us in the future. People will assume that they will be able to phone up for meds as normal in the future!!
Nurses are triaging then handing over to paid consult with a vet if needed
staff comment have prevent boss continuing to accept routine stuff
The hardest thing has been to get all the partners to agree to go onto emergency work only.
trying to get video consultations in operation. Waiting to speak to VetHelpdirect tomorrow courtesy of Boehringer
We already provide a free telephone service
WE ALWAYS PROVIDE FREE TELEPHONE TRIAGE
We are offering vet consults by telephone for a small fee.
We have already started video consulting and its working well to triage what needs to come to the practice and cant be left and what can be dealt with from home or in the rare cases of remote prescribing. The RCVS need to focus on this tool going forward and continue this practice of tele/video medicine and develop it further
We have closed 2 branches and are operating from the main hospital premises and 1 other branch, this may also close if needs to. Worried about lack of clarity as to what constitutes an emergency as many things can turn into an emergency if not treated promptly.
We have instigated Video and phone consultations - chargeable but gets refunded if client has to actually have an appointment
We have to charge for out triage time. If a follow-up appointment this will be deducted from the final bill. Payments being requested in advance over the phone.
We kind of do this anyway but I think we need to charge for vet time if the call is in lieu of a consultation.
We provide service to vets so some of the above not relevant
We started doing emergency triage a week ago by phone and setting up 3 month prescription. Only seeing emergencies
We still need to be here for welfare reasons and limited provision of vaccines for immunologically naive animals. Otherwise we risk a future issue. As long as guidelines for essential travel of clients and us and social distancing are observed that is OK by me.
regarding comments by members of the profession on social media, I am alarmed at the apparent willingness of some to completely abandon their vocation and animal welfare citing human health as the reason, when it is possible to provide a limited service within guidelines. Statements such as "every journey needs to be worth dying for" I have found alarmist considering the supposed education the authors have.
We would close & refer to another local if all in isolation/infected.

What Help is Required?

What further help would you like to see from professional organisations like SPVS / VMG/BVA?



Responses were converted to a score where 1 represents “Essential” to reflect the degree of importance attached to each intervention.

The most important areas to focus on are providing practical steps and guidance on possible options combined with clearer leadership as to what to expect next. Maintaining my staff welfare scored higher than help in maintaining own welfare. A weekly webinar would be valued by all and was more valued than a discussion group or help navigating to best websites.

Again, comments were invited, and a selection are provided here:

the problem is cashflow and revenue - nothing SPVS can do about that.
SPVS discussion list already proved invaluable in terms of both practical advice/ ideas sharing and moral support
SPVS and BVA have been very helpful. Just feel a bit like we are on the back foot all the time!
Need definite confirmation from DEFRA re TB tests -can we really social distance and what about farmer and vet handling the same crush and gate
More advice on what is deemed essential work. I emailed BVA but no response to date.
Including how to get financial support for those affected
I'm self-isolating but scared to return to work as I feel my workplace response is unacceptable for many reasons
I need advice on financial planning, obtaining financial support. The directors have not had any time off for over 6 months due to this and a previous crisis. COVID-19 is the last thing we need. We have got a good SA locum now but can't afford her. What do we do??
I have suffered a serious illness in the past 6 months which has been difficult to deal with but thankfully I am still here and doing well, but this crisis on top of that is a heavy load to bear without support. Thankfully

I have support but if SPVS can help that would be much appreciated. The area I find the toughest is the uncertainty which |SPVs might be able to help with.

I find it absolutely staggering that the veterinary organisations such as SPVS/BVA etc. are doing their very best to provide information and advice whereas our regulators who have ultimate responsibility are failing in their leadership and duty by firstly not offering financial support by cancelling/reducing fees and secondly are playing catch-up by copying and pasting the advice already out there by the other veterinary organisations.

I feel there really was no real input from RCVS until lockdown announced. We had implemented a low to no direct contact with clients system a week before this announcement. 2 weeks before lockdown we had split our team in 2, increased disinfection and were planning the next step. A lot of practices; business as usual- not acceptable.

Hellish

Guidance is not clear. Some practices are justifying boosters/ puppy vacs. Sprays and charity work.

Especially financial packages to help businesses

At the current news rate, we need a webinar more regularly than weekly

Appears to be so little information on government financial assistance for essential work organisations
Cannot furlough working staff! We are not making heaps of money like supermarkets... we are losing money!

15:10h on 24/3/2020 and still no update from RCVS on what work we all should be doing - local practice still doing first vaccines ! What constitutes an emergency? Our governing bodies and professional organisations should have foreseen this (practices did!) and pre-planned an immediate response.

Let down again,