



Assistance Dogs UK

A voluntary coalition of assistance dog organisations

Assistance Dogs UK (ADUK) response to CMA consultation on the proposal to make a market investigation reference into veterinary services for household pets in the UK.

Summary

ADUK would like to express our total support for a Market Investigation into the Veterinary sector. We believe that structural changes identified in the CMA's initial review are causing a crisis in the sector, both for those working in it and for pet owners. It is our view that the growing consolidation of the market into large integrated groups is leading to increased costs, decreased transparency and - in some cases - decisions and actions that are not always in the animal or client's best interests. We offer our full support to this investigation, and urge that legally enforceable remedies are implemented to address the multiple concerns already identified and set out in our document below.

Background on ADUK

Assistance Dogs UK (ADUK) is a voluntary coalition of assistance dog organisations that have been accredited by one of the international standards bodies in assistance dog training and welfare - namely Assistance Dogs International and The International Guide Dog Federation. ADUK's 13 members are as follows, and in addition to these we have 6 organisations who are working towards accreditation and full membership:

Autism Dogs, Canine Partners, Darwin Dogs, Dog A.I.D., Dogs for Autism, Dogs for Good, Hearing Dogs, Guide Dogs, Medical Detection Dogs, The Seeing Dog Alliance, Service Dogs UK, Support Dogs and Veterans with Dogs.

Together, our members train dogs to support disabled people with a wide range of needs. These include guide dogs and hearing dogs, dogs that detect imminent and potentially fatal medical episodes, dogs that assist with physical tasks, dogs that support people with autism, dementia and PTSD. For many clients, especially older people, the dog is their only company and support. Some organisations breed and train the dogs which are then partnered with a disabled person, some work with rescue dogs, and others work in partnership with disabled people to train their own pet dogs as accredited assistance dogs. Whatever the route in, these dogs all perform life changing and life saving work, and live as part of a household in the same way that a family pet would. The animal/human bond is extremely strong, and the dogs are of the utmost importance to the wellbeing of the disabled person and that of their families.

Our members have over 7000 active 'partnerships' (meaning one person and one dog that is trained to mitigate the person's disability), and at least another 1000 dogs living with owners as retired assistance dogs, dogs in training, ambassador dogs etc. We know that there are also thousands more partnerships in the UK, involving people who have either trained their



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own assistance dog or worked with a non ADUK member charity. All of these people are consumers of veterinary services, and are responsible for accessing and often paying for care for their dog when it is needed. Disabled people that are partnered with assistance dogs rely on their dog to support their independence, so the health and welfare of the dog is of the highest priority. Self-evidently, there can be challenges physically getting the dog to a vet, but there are also financial challenges - disabled people have much higher rates of relative income poverty than working-age adults generally, and in addition they are likely to have higher costs of living due to the additional costs of managing and mitigating their disability. So, disabled people who rely on these essential assistance dogs to live independent lives and connect them to their community, are facing real challenges when it comes to ensuring that they can access the veterinary care they need to keep their dogs healthy and able to support them in their everyday lives.

Our input to the consultation

It is our belief that systemic changes in the veterinary sector, specifically the consolidation into large integrated groups, are having a major impact not only on the disabled owners of assistance dogs but, at times, on the dogs themselves.

We have set out below some of our specific concerns. These relate to practices owned by large groups, and not to independent practices most of whom provide an excellent and much valued service to our members.

- We are seeing spiraling costs and veterinary inflation of 30%+, and this is extremely challenging for dog owners, especially those who have additional financial difficulties because of a disability. There seems to be little consistency or transparency, for example we have seen prescription charges vary in one month from £18 to £58, and this is making it extremely hard for owners to manage. We have had reports of regular price increases (sometimes two or three times a year), with no explanation offered other than that the prices are set elsewhere and that it is out of the hands of the local practice.
- This level of price inflation is causing insurance premiums to rise rapidly, with higher excesses and limitations, and more exclusions, and this again is very difficult for dog owners to manage. We are seeing that insurance costs are increasingly unaffordable for many of our partners, and the insurance policies that they have for their dogs cover a decreasing proportion of the vet costs that they incur.
- In terms of routine care, it has previously been the case that assistance dogs could be offered free vaccinations through the vaccine manufacturer. Whilst this remains a possibility, we are seeing an increase in vet practices refusing to use the vaccine reimbursement cards, or adding consultation and administration prices that are higher than the vaccination cost.



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- We are seeing mark up on drugs of over 200% versus trade prices in some cases. As an example, one owner was quoted £500 for 100 tablets by her corporately owned practice, but managed to get them online for £183. However, people do not generally understand that they are able to pay for a prescription and get the medication elsewhere, and this can be even more challenging for older people and people with disabilities. Customers are bewildered by the new practices, and find it impossible to navigate the system to secure lower cost medication for their dogs. In addition, we also do not believe that it is reasonable to have to pay two separate prescription charges if more than one medicine is needed at one time.
- We are concerned that the inflexible ‘top down’ processes, policies and pre-set diagnostic and treatment pathways are not always necessarily in the dogs’ best interests and are getting in the way of clinical freedom at a local level. For example, we believe that some of our clients’ dogs have been exposed to lengthy and potentially unnecessary diagnostic procedures and multiple anesthetics, when a simpler, faster, solution would have sufficed.
- In our experience, ‘first line’ vets are increasingly referring dogs to specialist diagnostic and treatment centres, rather than dealing with the issue locally as they would previously have been likely to do. Whilst clearly sometimes this is needed for the dog, we believe that there is pressure from corporate groups on vets to do this even when it is neither necessary nor desirable, and this is expensive and extremely stressful for all concerned. In addition, dog owners are being offered options such as ‘do you want a specialist or regular team to do this surgery’ which, as a lay person, they find difficult to assess. Inevitably, and given the importance of the dog, they often feel that they should automatically select the more expensive choices, even if they do not understand whether it is of clinical benefit to their dog. They can be left feeling guilty if they for example cannot afford the ‘gold standard’ pathway for their dog, and this is extremely stressful for them. Insurance policies do not always cover referral fees, or these can be capped for example at £90 when the consults are £200-£400.
- Whilst we welcome the benefits that technology brings, we have seen examples where it seems to be simply layering on additional costs. One of these is the use of AI by at least one large corporate group to read X-Rays even when, arguably, the vet themselves can do this. Clients have been told that it is corporate policy to use AI.
- Assistance dog owners are disappointed that the strong and trusted relationships they previously had with their independent vet are increasingly disappearing. They appreciated very much that the vet knew their situation and their dog, and was able to provide continuity of care.
- Given that the disabled person often has mobility and other challenges, having to travel to get to an emergency vet is very problematic, as is the fact that - when they get there - the vet often has little or no knowledge of their situation, and may often require a substantial up front payment before examining their dog. There is no option around this, given that first



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opinion vets do not provide out of hours care anymore, and so clients are forced to pay out of hours fees at referral prices. We understand that this situation is not simply the result of changes in market structure, but it is a significant issue so we felt it important to include it.

- Whilst we appreciate that the focus of the review is on individuals and their animals, we would point out that the ADUK charities (who are funded largely by donations from the public, foundations and trusts) are increasingly needing to give financial assistance to clients who are simply unable to pay the vet fees demanded. This increasing pressure on the charities' finances prevents them from being able to do other things such as expand their services to more people who need them.
- It is our view that the above problems are being driven by the pressures on vets from their corporate owners, and we feel that clinical freedom, and local knowledge & decision making, is increasingly being removed in favour of check lists, corporate processes, and KPIs around revenue, referrals, debit management and group income. We have been given many examples of vulnerable people asking for help or advice and being told by the front line vet that they would 'love to help but their hands are tied'. We have examples of vets telling clients that they have no choice over which brands of drugs to prescribe so can't suggest cheaper options - 'dedicated' products are the only ones offered, at a higher margin. Other products are removed from the system and are simply not available. The increasing numbers of non clinical staff that we are seeing both in middle management and in practices is, we believe, reducing the opportunity for practicing vets and veterinary nurses to influence decisions, and this is at odds with the RCVS' stated view that clinical governance should remain in the hands of their members.

In conclusion

We do not feel that the new veterinary market structure is serving customers well, and urge that the Market Investigation be done.

The current situation feels increasingly anti-competitive, leaving the customer with no clear or easy choice regarding services and pricing, and often disadvantaging those who benefit most from their essential and life changing relationship with their pets.

We therefore believe that strong intervention is required, such as has been seen in other markets and geographies e.g. Eire and France, to address the considerable risks we are seeing around customer satisfaction, clinical governance and financial stability, and to ensure that the veterinary market is fit for purpose for all of those who use it.

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