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**Centre for
Evidence-based
Veterinary Medicine**
at the University of Nottingham

Veterinary services for household pets

The Centre for Evidence-based Veterinary Medicine's response to the Competition and Markets Authority's working papers and external research papers

27th February 2025

In response to the papers published in February 2025 relating to the Competition and Markets Authority (CMA) investigation into veterinary services, and the invitation for comments on the evidence gathering and analysis to date, we would like to contribute some considerations on the recent findings.

The Centre for Evidence-based Veterinary Medicine (CEVM) is a research and knowledge exchange centre at the School of Veterinary Medicine and Science at the University of Nottingham. A fundamental aim of the CEVM is to support the veterinary professions (veterinary surgeons and veterinary nurses) to ensure that the provision of care for animals and their owners is appropriate for the circumstances of the individuals involved and is as grounded in as much research evidence as possible.

We urge those involved in the CMA investigation to appreciate the huge strides that have been made over the past 15-20 years towards a more evidence-based and rationalised veterinary profession. This includes movement towards the adoption of a shared decision-making approach whereby listening to owners is one of the critical steps towards ensuring that the care being given is appropriate, particularly for the welfare of the animals that veterinary professionals have a responsibility for.

As a multidisciplinary body consisting of veterinary and non-veterinary members who specialise in evidence synthesis, knowledge exchange and practice-based research, we have four specific points to raise in response to the current review of veterinary services.

Point 1: The reasons variations in care arise

A key part of evidence-based veterinary medicine (EBVM) is the application of evidence by the veterinary professional to each animal/s and owner/carer. The way this application happens will be different depending on the context and circumstances of the stakeholders involved and can result in seemingly different approaches or management plans for the same condition or problem. This is, and always has been, a critical part of EBVM and is a cornerstone of good practice. It is particularly important because numerous factors influence decisions about what care is appropriate for an individual animal or a group of animals, including owner preferences and considerations specific to animals such as temperament and welfare. Decisions are shared, where possible, between the veterinary professional and the animal owner. In summary, variations in care can arise from a range of well-intended motivations, which ultimately aim to maintain the best interests of animals.

Point 2: How published research-based veterinary evidence has (or has not) been utilised as part of the investigation

Within the 'Overview of our working papers' paper:

In Point 2.5 'Information sources and evidence', sub-point (j) on Page 17, it states that 'Relevant academic literature' was an information source used during the investigations. However, there appears to be no substantial reference to this in the working documents as to how literature was obtained, or how information was extracted or used.

- The 'importance of undertaking a thorough and well-evidenced review' and taking the time to 'properly assess the evidence' has been recognised by the investigators (stated in Point 1.12 on page 17).
- The CEVM are aware of much published literature, particularly over the last 15-20 years, in which veterinary professionals and animal owners are the focus of the work, along with how cases are treated in veterinary practice and the actions and expectation of clients (an example selection might be Mellanby et al. 2011; Robinson et al. 2014; McDermott et al. 2015; Belshaw et al. 2016; Robinson et al. 2016; Kogan et al. 2017; Pugh et al. 2017; Corah et al. 2018; Belshaw et al. 2018a; Belshaw et al. 2018b; Wareham et al. 2018; Belshaw et al. 2019; Corah et al. 2019; Singleton et al. 2019; Summers et al. 2019; Corah et al. 2020; Kogan and Oxley 2020; Kuhl et al. 2021; Rodríguez et al. 2021; Schofield et al. 2021; Woolley et al. 2021; Gibson et al. 2022; Gray and Radford 2022; Hagan et al. 2022; Hall et al. 2022; Irwin et al. 2022; Kuhl et al. 2022; O'Neill et al. 2022; Pergande et al. 2022; Tamayo Cuartero et al. 2023; Gibson et al. 2024; Wallis et al. 2024).
- These publications investigate some of the same areas as those which have been the focus of the research undertaken on behalf of the CMA. If the published literature has yet to be examined, it is our recommendation that this is carried out to fully appreciate both the quantity and breadth of literature available that could assist the investigators, as well as an understanding of the changes seen over time (complementing the 'snapshot in time' approach of the investigation). This will help to anchor any conclusions drawn from the investigation, and any subsequent recommendations or changes that may be put in place.

In summary, it would be beneficial for the investigators to be more transparent about how the existing published literature has been incorporated into the investigative process. If extensive literature searching and assessment has not been conducted, we urge the investigators to do so in order to develop a comprehensive picture of the veterinary professions and their interactions with clients.

Point 3: Approaches used for data collection and analysis

We fully support the inclusion of qualitative research approaches in the investigation. Both quantitative and qualitative approaches typically result in valuable and insightful findings.

Within the 'Qualitative research with veterinary professionals' paper:

- We support the investigators' sampling approach for veterinary professionals by using the RCVS list of registers as a sampling frame (page 10) and using quotas for key sampling criteria (page 10) to ensure that a range of different perspectives were captured. However, it is not stated how the quotas were decided upon, and how those who responded represented the initial quotas set, which is key to fully understanding and interpreting what was found. It is

stated in the paper that 'The research team made significant efforts to ensure that the research did not solely include the easier-to-reach or most available professionals' (page 10), and narrative details were given in Section 15.2 of the sample obtained (although it was not always clear what these statements represented e.g. 'A spread across the sample'). However, without specific details of how quotas were or were not met, it is difficult to interpret whether a range of perspectives has been captured in the research to date.

- The interview guides are lengthy and detailed (see pages 103-132) and are likely to result in large commitments of time for interviewees. It is likely that those who were in a position to be able to be interviewed could be a particular subset of professionals who may have specific perspectives. It would be beneficial to understand how many professionals were contacted to be interviewed and of these, how many declined or did not respond and what sampling criteria profile they had.
- Respondent identifiers given in the results primarily related to whether interviewees worked for a large vet group (LVG) practice or an independent practice. This implies that this specific sampling criteria was an important distinguishing criterion in the work but the reasoning behind this selection has not been described anywhere in the methodological approach or results. It would be beneficial to understand whether this distinction was part of the approach for the analysis as well as the reporting, as it has implications for the interpretation of the findings.
- To be able to identify whether any of the sampling criteria (and not only type of practice) is associated with specific actions or outcomes, more quantitative work would need to be undertaken (e.g. a questionnaire sent to all veterinary professionals) followed by rigorous statistical analyses.

Within the 'Vet users survey final report' paper:

We support the investigators' use of a broad sampling frame (the Postcode Address File) and the use of piloting and cognitive testing to ensure the questionnaire was suitable for the target audience prior to dissemination.

- In the 'Response Rate' section of the paper it states that:
 - o 'The CMA is generally cautious about giving full evidential weight to surveys that achieve a response rate below 5%.'
 - o 'Response rate based purely on the proportion of letters that yielded an interview (i.e. not factoring in eligibility) was 3.7%.'
 - o And then goes on to state:
 - o 'There are no definitive figures on how many pet owners there are (or how many visit a vet), and the survey was not designed to assess these questions. However, using the (CMA's) working assumption that c57% of UK households have a pet, the response rate including this important scoping criteria would be 6.3%. This means that even if every single pet owner has visited a vet in the last 2 years, the implied response rate would be more than 5%. If, say, we assume that 60% of pet owners have visited a vet within the last 2 years, the implied response rate would be 10.5%.'
- As well as looking at numbers of respondents, it would be beneficial to know which individuals responded according to whether the investigators' pre-planned quotas were met (as has been done for the respondents involved in the cognitive testing of the questionnaire - see Tables in Section 2.6). There have been previous studies conducted looking at the types

of pets people own in the UK (and other owner demographic factors such as location, age and gender; Murray et al. 2010, Purewal et al. 2019, UK Pet Food 2024) which may help to assist the investigators to determine whether the respondents obtained align with the general pet owning population.

- The questionnaire in Appendix B is lengthy and detailed and as mentioned for the veterinary professionals' study, is likely to result in large commitments of time for respondents. It is likely that those completing the questionnaire could be a particular subset of respondents who may have specific perspectives that differ from a broader range of respondents.
- Statistical testing was undertaken with a range of 'breaks' or variables, and type of practice (e.g. LVG versus independent group) appears to have been used heavily in the reporting of the data. As mentioned for the veterinary professionals' study, it would be beneficial for the interpretation of the results to know if only type of practice was explored, or if other 'breaks' or variables were explored in this way and were just not reported. If other 'breaks' or variables were explored, it would be useful to see the outcome of this analysis to understand further how the respondents related to the general population.

In summary, it would be pertinent to understand how the viewpoints gathered so far align with those in the vet users and veterinary professional populations. This is important given that any recommendations made by the CMA are likely to impact all sectors of the veterinary professions and vet users.

Point 4: Other information sources to consult

Within the 'Overview of our working papers' paper:

- It states that data has been utilised from two specific insurance companies to assess differences between businesses (Point 2.5(f) on page 16). We are in support of the use of a range of information sources to 'triangulate' what is found but feel additional, more broader data sources should be sought. Not all animals will be insured and preventive medicine interactions, although an extremely important part of veterinary practice, are not necessarily captured by this type of data (as noted by the investigators in sections 5.158 and 5.75 of the 'How people purchase veterinary services' and section 2.11 of the 'Business models, provision of veterinary advice and consumer choice' papers).
- Other sources exist that contain data from veterinary practices and will have a different subset of data from those with a commercial focus. Examples include, but are not limited to, SAVSNET (<https://www.liverpool.ac.uk/savsnet/>) and Vet Compass (<https://www.rvc.ac.uk/vetcompass/about/overview>).

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