



Response To CMA Remedies Working Paper May 2025

RAMP would like to thank the CMA for the Remedies Working Paper sent out May 2025 and for the wide research into the workings of the CQC and regulatory bodies.

RAMP would like to respond that the CMA's lack of analysis of the musculoskeletal (MSK) section of the industry is disappointing. We would point out that the competitive forces within the veterinary surgeon's realm has a serious impact on the MSK sector:

1. Most MSK professionals are themselves small businesses – in many cases, single person freelance professionals. They are therefore vulnerable to these forces when referral or delegation decisions are being made by veterinary surgeons.
2. We take it that your reference to physiotherapy at point 3.20 (b) “For example, where the duration of a service (such as a consultation or physiotherapy session)...” applies to employees of a veterinary business providing that service. This leaves aside the majority of regulated MSK professionals (Chiropractors, Osteopaths and Physiotherapists) who work outside such businesses.
3. RAMP strongly advises that all neuromusculoskeletal services should be provided to pet owner's animals **only** by professionals qualified in that service (ie one of the 3 professions mentioned above) to the industry standards as set by RAMP. These standards are understood by the veterinary professional associations. DEFRA also supported this development in 2015, when their RMPR consultation identified a need for regulation in the MSK sector: “MSK therapies should only be carried out by those persons who are appropriately competent in order to do so without causing any avoidable pain, distress or suffering to the animal.” On “4/8/16, DEFRA released a statement saying “Defra welcomes the development of RAMP; an industry-led solution to the MSK confusion. It meets the requirements of the current law, meets the findings of the RMPR evidence-gathering exercise and meets the subsequent outcomes which were sought.” RAMP has never received any challenge over their development of these standards from the RCVS and so we take it that they are familiar with these standards.
4. Historically, MSK has commonly been called “physiotherapy” (with a small 'p' to denote the generic description rather than the profession) since the Exemptions Order 1966 and used to describe all manual treatments (i.e. Chiropractors, Osteopaths and Physiotherapists – note the capital 'P'). RAMP suggests that the use of this term “physiotherapy” (small 'p') is confusing, vague and devalues the profession of Physiotherapy. RAMP now suggests the generic term

“musculoskeletal treatment” – ie “MSK” – to cover all three professions. This means that the term “Physiotherapy” describes **only** the service provided by regulated professionals qualified in that treatment mode.

5. Further, where veterinary businesses advertise the provision of “physiotherapy sessions” (as per your example at 3.20(b)) they should only be utilising these regulated professionals to ensure reliable, safe and high-quality services actually support animal health and welfare.
6. Where MSK professionals are employed by any veterinary practices, any complaints about them should be managed by the MSK regulator (RAMP) rather than the vet's regulator. (RAMP's FTP processes will be reviewed to update them in light of the current DEFRA review of VSA reform.)
7. In parallel, where veterinary businesses do not employ suitably qualified and regulated MSK professionals, they should at least sign-post local freelance MSK professionals to ensure pet owners can make appropriate choices over treatments for their animals. This satisfies your recommendations at 3.3 “Increased transparency could support pet owners to make more informed decisions about which basic services and treatments they wish to purchase.” Of course, some practices may wish to go further and develop good working relationships with regulated MSK professionals in the surrounding area so that they can refer in a proper and timely fashion (with the owner's consent).
8. We agree with your point at 2.38, “the regulatory framework does not help drive competitive processes and good consumer outcomes (and consequent benefits to animal welfare) in the way we would expect in a well-functioning market.” RAMP is currently working with DEFRA to shape the reform of the VSA to empower MSK regulation in order to match the levels of control over MSK provision that the RCVS has over medical provision.
9. Your Remedy 25 recommends the establishment of a new Veterinary Ombudsman, which RAMP previously suggested (Response to the 2024 CMA report: Veterinary Services for Household Pets in the UK, April 2024, point 5: “One possible area of consideration is the potential to create an Ombudsman Service for the veterinary industry. Given the widespread ownership of pets in the UK, increasing complexity of veterinary practice ownership, the power differential between householders and multinational corporations, the relatively recent intake of vet nurses to the RCVS, the challenges in the regulation of veterinary MSK practitioners and the recent complaints about vets' increased prices...”). We maintain that this would benefit pet owners by creating an independent 'referee' for the industry.
10. In Remedy 28, you recommend the expansion of the role of vet nurses to help to “support animal welfare, improve job satisfaction and career progression, and lessen the burden on vets” (6.116). “Our current view is that it may be appropriate to recommend that government seeks to legislate to expand the role of RVNs. While the exact scope of any expanded duties is not for the CMA to prescribe, it appears to us that this could have a positive impact on the veterinary profession, animal welfare, competition and consumers.”(6.117). RAMP notes your choice of words “lessen the burden on vets” – this suggests that medical procedures are central to this expansion idea. RAMP wishes to ensure that the role expansion is not allowed to creep into the MSK domain, because this would introduce under-qualified personnel – via a disconnected backdoor – into a regulated professional scope of practice. This would then split the regulatory functions across two regulators (RAMP and the Vet Nurse Council), creating confusions and duplications, and effectively lower the standards of MSK treatment within vet practices.

These clarifications will have a positive effect on the supply of MSK professionals resulting in growth of this sector of the industry, which is currently underutilised, as required by the current Chancellor of the Exchequer. This means that supply will increase to meet demand and the MSK professions will thrive, complementing the medical services for best animal welfare and easing the burden on vets.

Vav Simon on behalf of RAMP Council.