

**Submission to the CMA in response to:
The provisional decision report Parts A & B and
Summary message from Martin Coleman**

22.1.2026

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Introduction

We appreciate that all initial responses to the provisional decision report should have been submitted to the CMA by 14 November 2025. We did not provide any feedback within that timeframe due to [REDACTED].

However, since the publication of the provisional decision report, we have been contacted by the CMA Working Group and have been issued with a notice to deliver financial data relating to independent vet practices.

Our reason for responding at this stage is as a result of it having become clear to us that the CMA did not hold a reliable independent data set on the financial performance of independent veterinary practices within the UK prior to the provisional decision being issued. In our view this impacts the ability of the CMA to issue any provisional decision report, other than as relates to the LVGs. This is inferred within parts of the report, although statements are made regarding independent veterinary practices which we do not believe fit with the information we hold and have provided to the CMA.

The proposed remedies are to apply to all veterinary practices, but those remedies have been determined without the requisite financial data on the independent veterinary sector.

Whilst we completely agree with and fully support certain proposed remedies, we have significant concerns regarding others, which we believe to be factually and fundamentally flawed due to incomplete data being held.

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Background

As set out within the summary, there is no NHS for pets, and the provision of care is provided by the private sector. It is inevitable that there will always be a potential conflict between care (animal welfare) and the cost of delivering that service.

It is an elective decision on the part of any individual to own a pet and, as a result, all spend relating thereto is discretionary. We acknowledge that animal welfare is addressed in UK law but the entire responsibility for animal care, and costs thereof, cannot rest solely with the veterinary profession.

All pet owners must take responsibility for being able to adequately provide for any pet they have voluntarily chosen to own. It would be rather like an individual buying a particularly fuel inefficient car and then bemoaning the cost of petrol to run the vehicle or the cost of the franchised motor dealers to service it. All individuals need to accept responsibility for their own decisions and actions.

However, we recognise and accept that anthropomorphism is well recognised in UK pet owners and that this character trait undoubtedly impacts the veterinary profession in the UK and pet owners' expectations of those professionals. Those expectations are ever increasing and demanding, which in turn has implications as to costs.

A key aspect of considering the profession as it is now, must take into account the history of the profession and what fundamental aspects have changed to be in the situation it now is.

Whilst there was a relaxation of rules regarding veterinary practice ownership in 1998, regulation and legislation have not kept pace with the changing landscape since that relaxation came in. Having been advising the profession since before that 1998 change came in, and throughout the decades of rapid change since, it is obvious now, with the benefit of hindsight, as to where the issues have arisen.

Also critical to consideration of the profession now is to take account of the roles played by veterinary practices and the veterinary surgeons within.

Vets historically played a key role within their communities. Traditionally, practices were dealing with all animal species, and the vets formed a key part of rural and suburban communities. Money was a by-product of the work vets undertook.

It is still the case today that individuals do not become vets through financial motivation. They are passionate about animals and the clinical aspects of the work they do. Having lectured vet students and practicing vets extensively over several decades, this is obvious and remains the case today. If the individual was financially focussed, they would tend to pursue a career in the other professions, commonly consulting, finance or law.

The difference that exists today is that non-independent practices are owned not by vets, passionate about animals and clinical work, but by those whose sole focus is financial return ie investors. Independent practices are still owned by those with the passion for animals and clinical challenge and development. The change in ownership and focus of a significant number of practices has forced change on those independent practices, simply to be able to continue to do the work they are passionate about and stay in business as an independent veterinary practice.

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A core requirement for the CMA to achieve its aims is to ensure that there is a thriving and expanding independent vet sector in the UK. This promotes consumer choice, increases availability of options for the consumer and, ultimately, will ensure an efficiently functioning market.

None of the remedies suggested appear, in any way, to support this requirement and critically risk worsening the position, with additional pressure and burdens placed on the independent practices in the UK. Given the work we undertake, a large part of our working time will be supporting practices through whatever changes ensue, to help them remain adequately profitable in order to be sustainable as independent veterinary businesses.

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Fundamental Issues

We have grouped the fundamental issues into six main areas:

- Consolidation of veterinary businesses
- Supply of Veterinary Surgeons in the UK
- Veterinary practice specific inflation
- Transparency
- The David v. Goliath issue
- Perceived profitability and quantifying “excess profits”, if they exist
- Prescribing and supply of veterinary medicines

We have confined our comments to areas where we have experience, knowledge or data, primarily relating to independent veterinary practices and of the profession generally. Whilst we do have some knowledge of certain matters relating to LVG’s, we do not have direct access to specific data in respect of their affairs.

Consolidation of veterinary businesses

As has been extensively discussed within the reports, significant consolidation has taken place within the veterinary profession.

Without doubt, this has been the primary driver for change within the profession in the last decade.

However, this change in ownership and structure has happened during a period of unprecedented change generally, with Brexit and the pandemic having a significant contributory impact on the veterinary profession and on economies generally.

Supply of Veterinary Surgeons in the UK

Not mentioned within the summary document is the shortage of qualified veterinary surgeons within the UK and steps to address this issue.

The position on supply of vets in the UK was significantly worsened post Brexit and by the pandemic, with many non-UK vets leaving the country and significantly reducing the supply of active working vets.

 , and this will further shorten the supply of new graduates entering the employment market as veterinary surgeons.

RCVS can provide you with data on the average length of time a qualified vet is on the register in the UK, which we understand to be less than 5 years on average. Considering that many vets will have worked for 20, 30 or 40 years in the profession, to have an average time on the register of less than 5 years is of significant concern.

Nowhere in the remedies is mentioned any consideration of increasing the supply of available vets in the UK and we see this as a fundamental shortcoming in the proposed remedies at a headline level. If there is a real interest in resolving the issues raised, the long-term structural aspects must be addressed. Failure to do so will cause the issues to persist.

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Remedies which impose additional regulatory burdens on vets and independent vet practices will inevitably make becoming a vet less attractive, which risks further exacerbating the issues. The looming vet shortage issue was apparent 20 years ago and we have lectured on the subject at various times over the last two decades, highlighting the potential implications of a shortage in supply.

Quite simply, unless the supply of veterinary surgeons is improved, it is extremely likely that wage rate inflation within the veterinary sector will continue to far outstrip general inflation rates. The consequence of this will inevitably be an increase in fees raised by veterinary practices, as they simply need to do that to be able to remain in business. Saving pet owners £200 or £300 on medicines will do nothing to address the underlying problems.

We fully accept that this issue is far more difficult to resolve, but to ignore this point, which is the fundamental issue the profession faces, appears to be short sighted.

Veterinary practice specific inflation

Whilst references are made within the CMA reports to general inflation in the period 2016 - 2023, the critical point for any business is that business' sector specific inflation rate and that individual business' inflation rate. Those are determinant factors when running and managing that individual business.

To focus on general inflation and not the inflation rate applicable to one's own business is commercially naive and potentially financially disastrous for that business.

As a comparison, the farming industry has seen significant sector specific inflation rates (as high as 34% at one recent point), far outstripping general inflation rates. That was largely due to input prices due to the Russia Ukraine conflict and resultant global consequences but, nonetheless, it fundamentally impacted those businesses, their profitability and their ongoing sustainability and viability. The statistics are readily available on the number of farmers exiting that industry.

We know from data we hold that independent veterinary practice specific inflation rates have been significant. Those sector specific inflationary pressures have not gone away.

What appears to have been omitted is the fact that the actions of the LVG's have, in themselves, driven wage rate inflation for independent practices. Whilst the LVG's are able to financially sustain the level of salaries paid, with higher margins, better buying power and so on, the independent practices, as is stated within the report, charge less than the LVG's. However, those independent practices have to suffer the same wage costs due to the competitive position on veterinary salaries in the UK, as a result of a shortage of supply in qualified vets.

Further, certain LVG's made step changes in the rates of pay for newly qualified vets and qualified veterinary nurses within the UK. This move also impacted the salary rates that independent practices must pay to secure the services of staff, which are fundamental to providing a service to pet owners.

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Therefore, independent practices have faced a real rate of inflation within their businesses at a level significantly in excess of the rate of general inflation, and to reference that general rate of inflation is misplaced.

We have monitored independent practice financial data for many years. In independent practices, the salary costs have, in general, increased at a more rapid rate than the increase in turnover each year. ie the total salary costs as a percentage of turnover have increased.

This picture is worsening due to the fact that the Government has implemented significant increases in the National Minimum Wage (NMW) and applied a significant uplift in the employer's National Insurance costs of employing any member of staff.

Increases in the NMW have a ripple effect through many levels of lower paid staff within a veterinary practice, as they do for many businesses, and must be taken into account when considering any remedies proposed.

Therefore, the position continues to worsen based on the most up to date financial information that we hold for independent practices.

Transparency

We wholeheartedly agree with the need for there to be transparency as to business ownership. This should not only extend to FOP's but also to referral practices, crematoria, buying groups, online pharmacies and another other related (and integrated) businesses.

The issue that independent practices have faced for many years is communicating their independence to their clients, non-clients and the wider pet owning populus.

The ultimate ownership and control of LVG's has been veiled in most situations, although some LVG's do trade nationally under a common name and brand which is immediately and clearly visible.

We have worked with independent practices for many years in considering ways in which they can communicate and promote their independence, to give pet owners clarity when choosing a practice.

The critical issue is that independent practices do not have a marketing team and often suffer a restricted level of resource. The cost of marketing the message of independence is, very often, substantial and something that they cannot afford to do. They simply do not have the time available to focus on marketing, as they are so heavily engaged in pet health and clinical work.

We have supported the Federation of Independent Veterinary Practices in promoting independence and clarity for pet owners. However, that organisation does not have the reach or funding to do what is needed.

As referred to below, the RCVS, BVA and BSAVA may well have a role to play in this to help address the situation far more effectively than requiring individual businesses to deal with it.

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The David v. Goliath issue

As has been the case historically, independent vet practices tend to be smaller businesses. Adopting the Banking sector's classifications, generally, a business with an annual turnover below £25m is considered to be small ie it does not have a separate financial identity to those who own it, in the eyes of the Banks.

The independent veterinary practice sector is fragmented, and the businesses tend to be small. They have no tangible buying power or economies of scale.

Those businesses are negotiating with substantial corporate businesses for their needs; pharmaceuticals, medical equipment companies, pet insurance businesses. Those substantial businesses hold the power to do as they wish.

The only way in which independent practices can enhance their position is working with good wholesalers, join a buying group or work collaboratively. Critically, the ultimate beneficial ownership and control of many wholesalers and buying groups are not independent. This fact creates further consolidation of buying power. Working collaboratively risks criticism from the CMA and others.

This David v. Goliath position then also extends into the competitive positioning between independent practices and the LVG's, as referred to elsewhere.

Perceived profitability and quantifying "excess profits", if they exist

As we have previously raised with the CMA, determining excess profits in a professional setting is challenging.

Traditional textbook methods are inherently flawed, particularly those seeking to consider any form of return on capital, as has been adopted by the CMA.

Taking an example of a qualified lawyer, with a laptop. That lawyer, with access to appropriate online resources, will be able to generate substantial fees from their professional work. Their capital is a laptop, and their return on capital would apparently be huge. That does not determine those profits as "excess", simply that they are earning money from using their 'grey matter'.

The independent veterinary profession primarily generates profits from the knowledge and intelligence of the vets working within those businesses.

We have seen an increase in equipment required to deliver the ever-advancing range of services pet owners expect their vets to offer. The charges for services involving those items of equipment will naturally be considered in light of the costs of the equipment, the cost of maintaining those items and the time to deliver the service. There is significant commercial risk of expending money on an item of equipment that does not get used frequently.

The issue in considering the return is that the charges will include professional time, the level of which will be significantly influenced by the item of equipment and procedure that item of equipment is used for.

Therefore, a measure considering the cost of capital is inherently flawed in this situation also.

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The only measure which is of relevance to independent practices is a fully costed adjusted net profit (ANP).

We have provided a comprehensive data set to the CMA in respect of independent practices. As was discussed, comparison of the independent practice data set with that for the LVG's is not realistic for a myriad of reasons and we are advised this would not be done.

We have provided additional commentary, alongside the data set provided, to give further explanation of matters to be taken into account when assessing profitability.

We note that various references are made to profitability within the provisional decisions report, with a comment made that '*.....some independents [are] making profits that we would not expect in a well functioning market*'.

Our fundamental concerns here are that this comment is made:

- a) without any reliable data set as to the profitability within the independent sector; and
- b) that the profit figures being considered are (most likely) not adjusted to give a true and fully costed level of profitability, which is fundamental to any such review.

As we have discussed with the CMA working group, LVGs and independent practices are two entirely separate businesses, and we believe it is misleading and inappropriate to group them all within the 'veterinary profession'.

Whilst the LVG's and independent vets both deliver veterinary services, one group does so solely as a means to generate profits, whereas the other has always focussed on the animals, clients and clinical care, and the monetary outcome was simply something that followed.

Within the summary, it is stated that '*We have **not** conducted a similar profitability assessment of independent vets*' (emphasis added). However, the statement is then made that '*some [independent vets] have significantly higher margins than others*'.

We are at a loss to understand how that statement can be made, when there is no reliable financial data held, nor a profitability assessment undertaken.

Further, a critical point that has been entirely missed is that, in an independent practice setting, the individual owners of those businesses have to take on personal business debt to fund their buy in to the practice. That debt and cost of servicing is not reflected anywhere within the practice financial data but is a real and actual cost of owning and operating those businesses. To make a true comparison of profitability, one has to take into account the entirety of costs relating to that business.

This situation is further exacerbated by the fact that when considering an individual who has bought into a practice, they will need to earn adequate profits from that practice to service not only the interest on the debt but also to repay the capital.

In cash flow terms, for an individual to extract monies from a practice to repay the debt, the practice first of all needs to make a profit. Assuming a limited company structure, those profits will be subject to corporation tax at 25%, before leaving funds available to distribute as a

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dividend to that individual. If those dividends are subject to the additional rate of tax in the individual's hands, they will incur a personal tax charge of 39.35%.

The net effect of this is that for every £100 of profit generated, £25 would be paid in corporation tax and £29 in income tax on the dividends, leaving £46 (46%) to repay the capital on the debt taken to buy in.

Therefore, whilst assessment of practice profitability for independents will indicate the profitability of the practice itself, it takes no account of the funding structure for that specific business, due to the way in which independent practices function and are financed (and always have been).

In the financial data we have provided to the CMA, we have highlighted this issue and provided examples to illustrate the **need** for a practice to generate adequate profit in order to service all debts, whether that be debt held on the practice balance sheet or debt held off balance sheet in the hands of individuals.

This is of key importance to ensure succession and growth in the independent veterinary sector, and this, in turn, is critical to enhancing consumer choice.

To seek to apply a single set of remedies to the 2 businesses, differentiated only by how long they have to implement change, appears iniquitous to us.

Prescribing and supply of veterinary medicines

Many references are made to the pricing of medicines and the charges made for the supply of those medicines. Suggestions are made within the summary that independent practices should join a buying group or similar. The huge concern that our independent practice clients have is that those buying groups are predominantly owned by the LVG's and, therefore, in joining those buying groups, they are simply empowering the LVG's and giving them more buying power and control.

Reference is made also to online pharmacies and, again, the ultimate beneficial ownership of many of those online pharmacies is not independent.

As referred to below, there are direct economic consequences for a loss in any margin within an independent practice, which needs to be recouped somewhere, to maintain the financial viability of that business. The Marsh Report identified this 20 years ago, it is nothing new.

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Observations on the CMA Proposed Remedies

Choosing a Vet Practice

We know from many years of data that the bulk of pet owners choose their vet practice based on personal recommendations. This is the same for many of the professions. Historically, the pet owner had options of selecting from many independent vet practices in any geographical area. However, with the consolidation seen in the sector, that choice has been significantly restricted. They may be able to choose between LVG's but the choice between LVG and independent has significantly altered.

We are aware from current live data that there has been a significant increase in the number of start up independent FOP's and that trend appears to be continuing at pace.

Providing Price Estimates

We are not entirely sure why there is a perceived issue with a lack of providing fee estimates for work being done.

For most, if not all of our independent practices, the estimate of charges is included within the consent form generated from the Practice Management System which the pet owner signs, prior to work being undertaken.

This move was instigated many years ago so as to ensure there is clarity for clients and no nasty surprises in terms of the level of bills.

The practicality of veterinary clinical work is that the vet is dealing with living animals and things can change rapidly, which need to be dealt with there and then.

Therefore, whilst price indications can be given at the outset of a procedure, complications can and do happen, which does have a cost implication.

The concern is that the practicalities of the proposed remedies have not been fully thought through and have been considered in a static, theoretical environment, rather than a dynamic clinical or surgical environment that exists whilst treating animals.

To illustrate the point, it is therefore somewhat unrealistic to expect a vet to cease operating on an animal, speak to the owner to notify them that the costs are going up, and then return to operating on their animal. It is simply not practical.

Likewise, where an animal has been taken in out of hours and is receiving critical care, the estimate of fees could well change by 20% overnight. We would again suggest that it is unrealistic for the vet to ring an owner at say 3am to tell them that the amount of the invoice is going to go up by £100. That will cause more distress to the pet owner than a slightly higher bill.

Whilst we support the notion of complete transparency on fees and forewarning clients on fees, we are not dealing with a widget manufacturing process, where everything is predictable. We are more concerned with living animals where there are a multitude of unknown factors at play.

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Written Prescription Charging

We note that within the remedies it is proposed that there will be a set charge for a vet providing a written prescription.

It is suggested that this figure be set at £16 including VAT i.e. £13.33 net to the practice.

We also note that this figure has been, to an extent, plucked out of the air based on the current limited survey of charges raised for providing a written prescription to pet owners of between £15 and £25 including VAT.

When considering the current charges for a written prescription, one has to consider how those charges have been arrived at. Within independent veterinary practices, there has never been a full cost analysis undertaken to determine what the correct charging should be based on the costs of the practice. The figures, in most cases, have evolved over time with no underlying basis to determine costs.

Before determining what any charge should be, we would suggest that a proper analysis needs to be undertaken as to what is involved in delivering a written prescription.

Having discussed the matter with a number of our independent practice clients, the process is different for a first or one-off written prescription and for issuing a repeat written prescription for previously prescribed medicines.

Broadly speaking, the process is entirely vet centred, as they are the individuals who have to physically sign the prescription being given.

As alluded to within the report, there are issues in terms of fraud pertaining to written prescriptions. In order to address that point, there is significant change required which will undoubtedly carry cost.

Returning to the process of issuing a prescription, the steps required are:

1. Vet to review clinical notes for the individual animal.
2. Vet to establish whether the animal has been seen within the required period to confirm the animal is under their care or whether a fresh visit is required.
3. Review of case history to ensure that the medicine continues to be appropriate and required.
4. Note of when the last medicines were prescribed/dispensed.
5. Review of medicine selection to ensure it remains current.
6. Prepare the written prescription.
7. Print and sign the written prescription.
8. Email the signed prescription to the client to ensure that there is an audit trail of the prescription being issued.

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We have then undertaken a time and motion study to establish the range of time that it takes for the vet to be able to deal with those steps. This is influenced by the complexity of the case and a number of other factors.

The range of time taken by the vet in order to deal with the above normally ranges from 13 minutes to 20 minutes. We know that the average charge out rate for a first opinion vet in a consult room is in the range of £160 - £180 per hour.

That cost is determined as the charge for veterinary time needs to recover all costs of running the practice. This is a tried and tested basis of charging within professional services.

If we assume a charge out rate at the lower end of that range of £160 per hour, this gives a **cost** to prepare and produce the written prescription of £34.66 plus VAT (£41) to £53.33 plus VAT (£64).

Having been through this process with independent vets, the responses are always that they “do not feel able to charge that much” or they “cannot charge that much because nobody else does”. This indicates to us a morality to charging rather than a commerciality to charging by independent vets.

As can be clearly seen, the current charging level for producing a written prescription is well below what it should be based simply on time taken. To apply an arbitrary figure as a fixed price would seem to be at odds with the ability to run a business in an economic and cost-effective way.

Further, it puts significant time pressure on already time pressured vets.

A further consequence of the proposed remedy to seemingly promote and push consumers to use online pharmacies is that there will be a financial loss to the practice of any margin achieved from medicine sales.

The amount independent first opinion practices charge for medicine supplies is a function of what they are able to purchase the medicine for and that is determined by ultimately larger businesses outside of their control.

In practical terms, a client obtaining those medicines from an online pharmacy will mean that the practice loses any markup that they may generate on those medicines, thus reducing their profits. Further, restricting the amount that it is possible to charge for a written prescription will inevitably force businesses to provide a service at a loss.

The loss in value of the prescription charge, combined with the loss in margin on the medicines sold, will need to be recouped somewhere so as to maintain the profitability of the business at current levels.

As alluded to earlier, in our opinion there is no indication of excess profits within the independent veterinary sector. Therefore, there is a need to maintain those profits simply to be able to service all the financial obligations of the practice.

A direct consequence of the proposed remedies will be that fees will increase to make up for the loss in contribution from the prescription and the margin on the medicines.

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As a result, we would suggest that it is unrealistic to say that the proposed remedy in any way will benefit pet owners.

We have seen this precise situation in the farm animal sector and the consequences outlined above have played out exactly as described.

Highlighting the option of a written prescription and use of online pharmacy

A basic Google search of *"how can I buy medicines for my dog more cheaply"* would appear to give the pet owner the answer they require.

Logically, a pet owner will have to use the internet to buy their online prescription. Therefore, one would imagine that they would also be able to ask the question and identify the answer.

It therefore appears entirely nonsensical to impose a requirement on practices such as has been suggested.

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Observations on the provisional concerns

Turning to the summary of provisional concerns, again we feel there are some factual inaccuracies within what is stated and the conclusions reached are based on incomplete data.

“...pet owners may find it difficult to choose the vet practice, treatments and medicine suppliers that are best for their circumstances and be paying more than they would if the market were working as well as it could.”

We fail to see how this can be the case for all veterinary businesses.

Pet owners have free will and can select to use whichever practice they wish. Independent practices provide very clear information on their practices.

The issue is that there is lack of transparency as to the ultimate ownership of LVG owned practices, such that the pet owners are not able to make an **informed** choice as to selection of practice.

In respect of the pet owner's ability to consider treatment options, certainly based on information we hold, most if not all independent practices will outline a range of options available for all cases where options exist.

In the vernacular, this will range from a “treat and street” through to a “gold standard”.

In respect of medicines, we believe it is misleading to say that pet owners are not aware of options available. Written prescriptions have been available for many years, and as mentioned above, a basic Google search will provide all that information, quite clearly.

We are aware that some online pharmacies sell medicines cheaper than independent practices can buy the medicines. Levelling this playing field would appear to be the key issue to be addressed. However, that would involve dealing with large pharmaceutical corporations and others who are probably more challenging to deal with than independent veterinary practices.

The comment that the “...market [is] not working as well as it could...”, is something we fundamentally disagree with. We believe that this conclusion is drawn on the consideration of a certain part of the veterinary profession and veterinary market rather than on the complete picture. It is stated that the estimate of consumer detriment is based on the profits of the LVG's, yet the remedies and other comments apply to all FOP's. This would appear to us as entirely counterintuitive.

Finally, we agree that the regulation of vets is outdated. Changes to the VSA should have been made in 1998 when the relaxation on ownership of practices changed.

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Some alternative Remedies

As has been stated earlier, we entirely agree that change is required. However, we are keen to ensure that any remedies achieve the underlying aims of the CMA and are:

- Practical
- Appropriate
- Cost effective
- Capable of practical enforcement

Transparency

LVG's

Requiring all LVG's to rebrand all premises, websites and documents to clearly indicate the FOP is a part of that group is straightforward and swift to implement.

Rather than pet owners having to trawl through websites to establish who the owners of the practice are, it should be immediately apparent from the outside of the practice premises, from the practice website and in all documents given to the pet owners, as to who they are dealing with.

Some of the LVG's already adopt this approach, such as CVS and Vets4Pets, but many do not. It is an unusual feature that where most businesses will invest heavily in branding, brand identity and brand promotion, within the LVG's, there is no such branding. Perhaps there is a reason for this?

The practices they have purchased commonly remain unchanged to the untrained eye. To those engaging with them, they have continued to trade under the former practice's name.

Independent Practices

In respect of independent practices, the problem that they have faced, for a while, is the external marketing and communication of the fact that they are independent practices.

This would be very straightforward to resolve by simply establishing a certification process through RCVS whereby independent ownership can be confirmed.

In our view, that process would take an organisation such as ourselves only 30 minutes to establish for each veterinary practice.

RCVS would then be able to allow certified independent practices to display some form of a logo that is immediately obvious to the public that they are dealing with an independently owned veterinary business.

Extending that thought process one step further, RCVS would then be in a position to maintain their Find a Vet service, clearly identifying those practices certified as independently owned and operated, and also identifying those practices that are part of a larger entity.

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The above two steps would be very straightforward to put in place, immediately resolve the transparency and identification of ownership issues and would remove the burden and costs from independent practices of proving their independence.

The Role of RCVS (and possibly BVA & BSAVA)

We entirely agree that RCVS have a pivotal role to play in the process. They are far better placed to communicate with the entirety of the pet owning populous than leaving individual practices to try and deal with a myriad of requirements.

If RCVS were to simply publish their requirements for veterinary practices and, as has been suggested, have the power to regulate the business in addition to the individual vets, then that would seem a far better solution than much of what has been proposed.

The suggestion that RCVS could and should do more also brings a number of benefits:

1. It gives a far easier mechanism for policing and regulation of one entity rather than a multitude of different businesses.
2. It enables pet owners to be directed to a central point so that they know what individual practices should be doing.
3. RCVS are better placed to communicate with the pet owning public at large.

For example, RCVS could simply have a very clear pet owners page on their website, with all of the information included. This would be very easy and straightforward to put in place. Directing pet owners to that location then also becomes more straightforward.

4. Funding of this would be far easier to facilitate by an increased charge to practices as an annual fee.
5. RCVS could quite easily publish on the same site a guide to interacting with your vet, how to obtain and written prescription and so on.

One business, one website, minimal cost, maximum consistency.

Price comparison aspects

Having attempted to undertake pricing reviews at various times, the proposals here will be unworkable and likely produce meaningless results, certainly for independent practices.

Many practices work in different ways and will have differentiation in the service they offer.

The provision of professional services is not a “compare the market” arena. It is not comparable to car insurance or utilities and the like.

It is highly personalised and dependent on the individual business. Simply stating the prices does not give any reference to what would be included in those prices or the quality of care and aftercare provided.

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Requiring individual practices to have a “common prices” page on their websites would simply be an extension of the existing Practice Standards requirement and would be something that could work in practice.

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Summary message from Martin Coleman**

Other Pertinent Factors

The veterinary marketplace is constantly evolving and the information held by the CMA refers to the picture at a point in time. It is inevitable that the information held will, in some cases, be out of date by the time it is reviewed in detail.

We know from the work we undertake with independent vets across the entirety of the UK that there has been a significant surge in startup independent veterinary practices caused by a multitude of factors. This is something that we support and encourage.

Part of the issue the CMA faces is that the time period under review followed a pandemic where the Banks ceased to lend money to new businesses. This impacted the veterinary practice start ups badly. Since normal lending has resumed, we have seen a significant number of start-up practices commence. However, with the time horizon under review, the impact is only beginning to show in the most up to date figures.

A key point for us is that this trend on new practices will improve choice for pet owners and start to dilute the control of LVG's of the availability of veterinary care to pet owners. It will take time, but we do not see this trend abating at present.

**MSVC Ltd
22.01.26**