

Response to the CMA findings and proposals on veterinary services for household pets

[REDACTED] - Registered Veterinary Nurse

Veterinary Regulatory Framework and Regulatory Reform

10. Recommendations for future regulatory reform

It's in no one's best interests for the RCVS to continue dominating all decision-making and regulation across the veterinary sector.

It is ultimately up to legislation to determine what veterinary professionals can or can't do, not the RCVS. They are our governing body and officially represent public interests, but RCVS Council is also 2/3rds dominated by veterinary surgeons (13 elected and 3 appointed), with 6 lay members and two **appointed** RVNs. They are also the Royal College responsible for veterinary surgeon training and development.

Altogether, this is a massive conflict of interests. It's not possible for RCVS Council to be truly impartial and act only in the public interest when the majority of members are vets. As human beings, they have conscious and unconscious biases inherent to their profession and its position within the industry, whether they acknowledge that or not.

They are motivated to prevent RVNs from gaining any power or autonomy within our industry because they feel it will devalue their own profession. It won't, our jobs are already separate, we'd just be able to utilise our years of professional training and CPD without having to ask permission from a colleague.

The RCVS are also motivated to protect their control over the industry and both professions. In recent professional consultations about legislative reform and the future of the RVN, **they expressed a desire to extend their authority to include animal care paraprofessionals, such as farriers and groomers**, without relinquishing the veterinary surgeon RCVS Council majority. This would result in mandatory RCVS regulation of these paraprofessions, who would likely be allowed no more voice or power to self-govern than we are as RVNs. It's a wide-reaching power grab.

To prioritise animal welfare would be to empower and invest in RVNs. We are the primary inpatient care providers and by extension the patient advocates. We are the engine at the core of every practice, responsible for not just biosecurity, but anaesthesia preparation, monitoring, management and recovery (from admission to discharge), radiography, phlebotomy, running, analysing and sending lab tests, administration, monitoring and recording of medications and IV fluids, wound management, emergency

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triage and stabilisation, managing daily surgical schedules... I could go on and on. We don't just clean the tables and assist the vet, and haven't since probably the 1990s.



It would also be possible to accuse the industry of gender-based oppression and discrimination against a powerless, poorly paid and undervalued profession comprising around 97% women, versus the roughly 60% female veterinary surgeon profession (RCVS, 2024), within which the male population are known to dominate leadership positions.

Royal College of Veterinary Surgeons (2024) 'Surveys of the Professions 2024: reports published', *News*, 27 November. Available at: <https://www.rcvs.org.uk/news-and-views/news/rcvs-news-surveys-of-the-professions-2024-reports-published/> (Accessed: 11 November 2025).

Medicines and competition with online pharmacies

5. Medicines market opening remedies

6. Medicines: prescription price controls and medicines price controls

Online pharmacies sell medications to pet owners for similar or lower prices than practices I have worked in can get them from the wholesalers they have to use. It doesn't seem possible to compete or match the prices of online pharmacies without making a loss, so I feel practices may have to eliminate or minimise their in-house pharmacies to survive the proposed remedies. This would reduce consumer choice and convenience, and would negatively impact animal welfare if treatment can no longer be started at the time of consultation.

While it seems clear that LVGs have increased prices and then failed to invest the extra money back into the industry, I don't think they'll willingly allow their profits to drop, and I expect they'll find ways to shift the burden onto pet owners and veterinary staff.

Veterinary businesses urgently need mandatory regulation to replace the professional regulation they were beholden to when only vets could own practices. There need to be real consequences to corporations and business owners for prioritising profits over patient welfare.

I would recommend an enquiry into where online pharmacies are sourcing their stock from and why they can buy it so much cheaper than veterinary practices can. If they are obtaining stock from suppliers vet practices aren't permitted to use, should that be allowed to continue?

LVGs that own online pharmacies stand only to gain from the current proposed remedies, and they're already out-competing independent clinics and forming into a small number of near-monopolies. I don't think trying to force clinics to compete with a market that has an unfair advantage will solve the competition problem or benefit animal welfare, and I think it'll more likely just drive up prices elsewhere.