

**CMA market investigation into UK veterinary services for household pets
IVC's key observations on the Blue Marble consumer research report published on 16
December 2025**

1. Introduction and executive summary

1.1 IVC is committed to engaging collaboratively with the CMA in connection with its market investigation into UK veterinary services for household pets (the “**Vets MIR**”), to find effective, meaningful, workable, and proportionate solutions to industry-wide challenges. IVC therefore welcomes the opportunity to provide its views on the consumer research carried out in September and October 2025 by Blue Marble on behalf of the CMA (the “**Consumer Research**”) on potential remedies proposed in the CMA's Provisional Decision Report published in October 2025 (the “**PDR**”).

1.2 In summary, IVC considers that:

(A) The **Consumer Research validates the PDR's focus on a package of transparency remedies** designed to enhance pet owners' abilities to make informed decisions – but also **shows that the package should reflect the refinements proposed in IVC's submissions** to be fully effective and proportionate, and to avoid unintended consequences. See paragraph 2 below.

(B) However, the **Consumer Research** is based on qualitative feedback from pet owner focus groups, which are **ill-equipped to assess the full range of market consequences** (intended and unintended, and affecting independents as well as large veterinary groups (“**LVGs**”)) **of technical supply-side remedies** such as price controls. Therefore, the **findings on Remedy 11 (prescription fee cap) should not be relied upon** by the CMA in remedy design. In IVC's view, the PDR transparency remedy package's market-opening effects remove the need for price caps. See paragraph 3 below.

1.3 IVC looks forward to continuing to work with the CMA to further refine the PDR remedy proposals ahead of the Vets MIR Final Report.

2. The Consumer Research supports the PDR transparency remedies, as amended by IVC

2.1 IVC considers that the findings in the Consumer Research are generally **consistent with the PDR's focus on a package of transparency remedies** designed to facilitate more informed and effective consumer choice in UK veterinary services for household pets. In particular, IVC notes the clear support from pet owner respondents to the Consumer Research for enhanced (but meaningful and proportionate) disclosures by veterinary service providers on **practice ownership (PDR Remedy 1)**, **price lists (Remedy 2b)**, **written treatment price estimates (Remedy 5a)**, and **itemised billing (Remedy 5b)**. See further sections B and E of IVC's response to the PDR, dated 13 November 2025 (the “**PDR Response**”), for IVC's views on these remedy proposals.

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2.2 IVC is also encouraged that the Consumer Research **broadly supports IVC's proposed refinements to the PDR transparency remedy package**, summarised in Table 1.1 of the PDR Response, [REDACTED]

[REDACTED]. As IVC has explained, these refinements are required to fully align the PDR remedies with the '4Ps'¹ and applicable CMA guidance.² In particular, the following feedback from respondents to the Consumer Research corroborates IVC's previous submissions on the PDR remedies:

(A) **Remedy 4: Pet owner surveys on the customer experience would only be effective and meaningful if carried out at the clinic level, as brand- or group-level results would be unhelpful and misleading for pet owners.**

(i) Respondents to the Consumer Research considered that a pet owner survey would support "*comparison and transparency*" and "*encourage accountability and service improvement*",³ but also recognised that veterinary services are "*extremely variable*"⁴ between practices, and (group-level) survey results would "*not influence how they chose their veterinary practice given a perceived lack of granularity*".⁵ Indeed, most respondents indicated that they would prefer "*practice-level*" information that was more "*meaningful*".⁶

(ii) This pet owner feedback is consistent with IVC's submissions arguing for clinic-level (rather than brand- or group-level) pet owner surveys. As IVC has explained, it is entirely feasible to implement clinic-level surveys across the market in an effective and proportionate way, without imposing significant costs on vet businesses⁷ – to help drive service improvements at the clinic level.⁸ See further section B of the PDR Response [REDACTED]

¹ The '4Ps' set out in the CMA's Annual Plan (i.e. pace, predictability, proportionality, and process) are designed to drive growth by promoting competition, protecting consumers, and enhancing business and investor confidence. See [CMA's Annual Plan to drive growth by promoting competition, protecting consumers and enhancing business and investor confidence - GOV.UK](#).

² CMA guidance on markets remedies indicates that remedies should be proportionate, and not more costly or onerous for market participants than is needed to be effective. See https://assets.publishing.service.gov.uk/media/6728f949fbd69e1861921b06/Draft_markets_remedies_guidance.pdf, paragraph 3.5.

³ Consumer Research, page 32.

⁴ Ibid.

⁵ Consumer Research, page 9.

⁶ Consumer Research, page 32.

⁷ Some respondents to the Consumer Research indicated a fear of "*manipulation by large groups*" of the survey (Consumer Research, page 9). As explained in Annex 1 to the PDR Response (paragraph 1.16), it is essential that the CMA's final survey design does not allow practices to influence the results in any way, to ensure this remedy is effective and trusted by pet owners.

⁸ Allowing practices to see their survey scores in a timely fashion would help them improve on the basis of, and stay accountable to, the pet owner feedback provided. Given that Consumer Research respondents indicated that this is a clear benefit of a pet owner survey (see page 32), the CMA's final remedy design should ensure that practices, and their owners, have access to pet owner survey scores in a comprehensive (subject to any necessary anonymisation) and timely manner.

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- (B) **Remedies 3 and 4: Subjective pet owner surveys should be supplemented by prominent and accessible information on objective clinical care standards** to allow for meaningful quality-based competitive differentiation between vet businesses, including on comparison websites such as RCVS Find A Vet.
- (i) The Consumer Research found that “*many participants said they sought indicators of service quality*”,⁹ and raised concerns about “*the lack of quality rating metrics*” on the comparison website. Indeed, “*a majority considered quality metrics, for example reviews or performance ratings, to be the most important information when making a decision about veterinary care*”.¹⁰
 - (ii) This feedback is consistent with IVC’s submissions throughout the Vets MIR that quality is a critically important outcome in a healthcare market such as veterinary care, and consumer outcomes cannot be properly understood without reference to quality.¹¹ This is why IVC has proposed a more comprehensive quality framework as a key element of the transparency remedy package, which would incorporate subjective measures of customer experience and objective measures of clinical care, and could be prominently displayed on comparison and clinic websites and in-clinic. See further section B of the PDR Response [REDACTED].
- (C) **Remedy 3: A pet care plan (“PCP”) value calculator on comparison websites (such as Find a Vet) would not be helpful to pet owners.**
- (i) Pet owner feedback indicated that a PCP value calculator would be difficult and confusing to use,¹² and ultimately the Consumer Research noted that there was “*little interest*”¹³ in the concept.
 - (ii) Instead of a PCP value calculator, IVC has suggested [REDACTED] [REDACTED] that improving upfront transparency for pet owners can be effectively and proportionately achieved by first-opinion practices (“FOPs”) publishing meaningful and accessible information on PCPs (on services included and value for money) online and in-clinic, under Remedy 2d. [REDACTED] [REDACTED]. See further section B of the PDR Response [REDACTED].

⁹ Consumer Research, page 24.

¹⁰ Consumer Research, page 44.

¹¹ See e.g. IVC’s response to the CMA Issues Statement dated 30 July 2024, paragraph 9.14; IVC’s response to Question 20, RFI 9 dated 7 October 2024; IVC’s response to Question 11, RFI 11 dated 13 November 2024; PDR response, paragraph 3.19.

¹² Consumer Research, page 49.

¹³ Consumer Research, page 48.

(D) **Remedy 7: Prescriptive requirements for artificial oral disclosures by vets on options for prescriptions or purchasing channels for veterinary medicines would lead to “over-communication”¹⁴ and increased consultation costs.**

- (i) Respondents to the Consumer Research expressed support for more transparency about prescriptions, with pet owners feeling that this would “*boost awareness and confidence in buying medicines elsewhere*”.¹⁵ However, they raised concerns about “*over-communication*” or “*excessive*”¹⁶ communications, “*awkward*” discussions with vets about purchasing medicines elsewhere, and “*knock-on effects*”¹⁷ on consultations (including consultation fees) from the additional burden on vet time.
- (ii) IVC identified similar concerns with Remedy 7 in section C (paragraph 4.4) of the PDR Response. To address these concerns, IVC proposed that enhanced pet owner awareness of prescriptions and online medicine channels can be effectively and proportionately achieved by: (a) incorporating an additional disclosure principle into the RCVS Code of Professional Conduct, as part of contextualised care¹⁸; and (b) additional written transparency measures, including publication of relevant information on prominent in-clinic signs and notices, clinic websites, in-clinic literature, appointment confirmations, and invoices, among others. This approach would also protect the clinical focus of consultations and the vet-client trust-based relationship (which the Consumer Research confirms is a concern for pet owners). See further section C of the PDR Response [REDACTED].

(E) **Remedy 10: Prescriptions defaults “*risked confusion, extra costs, and reduced flexibility*”.¹⁹**

- (i) The Consumer Research found that Remedy 10 was the “*least intuitive*” of the remedies tested,²⁰ and offered an “*unclear benefit*”.²¹
- (ii) IVC has previously proposed that, at the very least, there should be a streamlined process for recording default preferences to avoid disproportionate

¹⁴ Consumer Research, page 11.

¹⁵ Ibid.

¹⁶ Consumer Research, page 58.

¹⁷ Consumer Research, page 11.

¹⁸ Pursuant to this principle, vets would provide pet owners with information on alternative options for purchasing medicines as part of the broader requirements to seek informed consent from pet owners for the proposed treatment pathway. This would be implemented through a concise, targeted clarification within the Communication and Consent section of the RCVS Code’s Supporting Guidance (paragraph 11.2). [REDACTED]

¹⁹ Ibid.

²⁰ Ibid.

²¹ Consumer Research, page 65.

disclosure requirements and the corresponding burden on vet time (and pressure on consultation fees), and simplified reporting of results to the RCVS for a less onerous reporting burden. See further section C of the PDR Response. However, IVC submits that the CMA should consider setting aside this remedy proposal entirely given the negative pet owner feedback noted in the Consumer Research.

3. The Consumer Research's findings on the prescription fee cap (Remedy 11) are unreliable

3.1 IVC has **significant methodological concerns** about the reliability of the Consumer Research - which is based on qualitative feedback from pet owner focus groups - for supporting **Remedy 11** (prescription fee cap).

(A) Although the Consumer Research finds "*strong support*"²² for a prescription fee cap among survey respondents, **this result is entirely unsurprising** – all other things being equal, consumers naturally favour paying less for the same service.

(B) However, the **Consumer Research does not – and is not well-placed to – effectively consult pet owners** on whether a **prescription fee cap is beneficial to sector stakeholders having regard to the significant risk of unintended consequences it carries**. These risks include distortions in market, consumer, and clinical outcomes, such as higher in-clinic treatment prices, and the potential that shortcuts may be taken during prescribing, with corresponding risks to animal welfare. These unintended consequences carry profound negative implications for the entire sector, including independent businesses as well as LVGs. Please see further paragraphs 5.5 *et seq.* of the PDR Response.

(C) Ultimately, **consumer focus groups** are methodologically well-suited to qualitative research on (remedies focused on) pet owner awareness or the customer experience - but **are not informative for technical supply-side remedies such as price controls**, because pet owners are not well-placed to provide an informed, holistic view on their effectiveness or unintended consequences across the market (e.g. because pet owners are not familiar with the cost structures of running a veterinary business). For this reason, IVC considers that it is inappropriate to include a prescription fee cap remedy within the scope of the focus group research.

3.2 Therefore, IVC submits that the **Consumer Research's findings on a prescription fee cap carry significant evidentiary shortcomings** and **should not be relied upon by the CMA to inform remedy design** in the Vets MIR. In IVC's view, the positive market-opening and pro-competition impact of the PDR's proposed price transparency remedies are a good reason not to maintain price controls (at all, or at least not indefinitely) – as the transparency remedy package will sufficiently enhance pet owners' awareness of their ability to request a prescription, the prescription fee levels charged by different providers, and the potential to make savings by

²² Consumer Research, page 11.

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purchasing veterinary medicines online. See further section D of the PDR Response for IVC's submissions on the prescription fee cap proposed in the PDR.

4. IVC encourages the CMA to continue to work closely with industry stakeholders to finalise the Vets MIR remedy package ahead of the Vets MIR Final Report.

4.1 Notwithstanding these concerns with the Consumer Research's findings on Remedy 11, **IVC welcomes the CMA's willingness to consult industry stakeholders on its consumer market testing of the PDR remedies proposals**, and is encouraged that the **results provide broad support for moving forward at pace with a package of transparency remedies** which (**subject to the refinements proposed in IVC's PDR Response** [REDACTED]) would effectively and proportionately enhance pet owner choice, whilst minimising unintended consequences for the sector.

4.2 IVC invites the CMA to continue to work constructively with industry stakeholders, including veterinary businesses (LVGs and independents), and governmental and industry bodies, to refine the Vets MIR remedy package in advance of the Final Report.