August 2026

PDSA response to CMA Vets market investigation: draft substantive Order and Undertakings consultation

Introduction

As the UK's largest veterinary charity, PDSA is dedicated to supporting people and their pets during difficult times. We believe no pet should be denied the veterinary care they need because of the owner's financial hardship. By providing free and low-cost vet care at over 40 PDSA Pet Hospitals across the UK we prevent suffering, help to relieve poverty and keep people together with their much-loved pets.
In the last year, the charity treated over 422,000 pets and supported more than 339,000 clients.

Response

PDSA was pleased that CMA had taken into account the position of ourselves, and other charities, in the Final decision report part B 24 March 2026, which stated *"2.86 - Having considered these responses, we have decided that charitable organisations providing small animal veterinary services should not be subject to the requirements of our remedies. Those organisations do not generally offer services that are made available to all pet owners and they do not, as a result, compete with commercial veterinary businesses. On that basis, it is not necessary to include such organisations within the scope of the remedies in order to address the AECs we have identified.".* PDSA would like to thank CMA for their recognition of the unique role that we, and other charities, play in the veterinary service provision sector.

PDSA therefore examined the proposed draft funding order and undertaking documents with interest and was pleased to note that this position had been carried through to those potential orders in the spirit in which it was intended. However, PDSA would like to highlight that we have major concerns that there appears to be no reference to it in the substantive orders and undertakings. This would appear to mean that if there are not substantial changes to these orders and undertakings then PDSA will be compelled to comply with remedies that it has already been recognised should not apply to our activities in both the final report and the draft funding orders and undertakings. This concern extends across all elements of the substantive order where the term FOP is utilised, from Pet Owner Empowerment, Ownership Information, Practice Information and the provision of Price Lists in particular.

PDSA understands that the term Qualifying Veterinary Business (as used in the funding orders and undertakings) may not be the most appropriate for these particular documents (given that the question is not necessarily whether a business qualifies to pay a Levy etc). However, PDSA cannot identify any clause or phrase that would ensure that the remedies imposed to address competition concerns within the sector do not become applicable to ourselves or other charitable organisations. Indeed, these documents all appear to be made applicable to all FOP's, which would encompass PDSA (we feel it is important that we are still referred to as an FOP), and would strongly suggest that it is necessary to specifically refer to the fact that the orders and undertakings should not apply to organisations such as ourselves.

PDSA's further comments on the documents and drafts provided are as follows:

Comments on the definitions

'Guidance' means the supporting guidance to the RCVS Codes – PDSA would suggest that this should be more specific as to the requirements being referred to, and should correctly read RCVS Codes of Professional Conduct

PDSA is unsure why the definitions here are different to those in the funding order and undertakings, which appeared to cover the species and circumstances more fully, therefore PDSA would suggest that rather than the existing text:
'Household Pet' and 'Pet' mean an animal such as a dog, a cat, a hamster, a gerbil, a mouse or other rodent, and any exotic animal (but not a farm animal or horse) that is kept for companionship or protection and habitually resides in the Pet Owner's dwelling.

It would be more consistent to continue to utilise the definition in the now published funding order, namely:
'Household Pet' and 'Pet' mean any animal kept primarily for companionship or protection and which habitually resides in the Pet Owner's dwelling, including dogs, cats, rabbits, rodents, birds, reptiles, amphibians, fish, exotic pet animals and other non-farmed companion animals, but excluding livestock, poultry, equines and any animals kept primarily for commercial, agricultural, sporting or working purposes.

PDSA would suggest that the term *'Practice Standards Rules' means the RCVS Practice Standards Rules.* does not accurately reflect the resources being signposted and would better read 'Practice Standards Scheme requirements'

Where the term "'*VMRs' means the Veterinary Medicines Regulations 2013 (SI 2013/2033).*" Is used, PDSA assumes that the reference is to the latest VMR's, which we believe may be better referred to as 'including Veterinary Medicines (Amendment, etc.) Regulations 2024.', this would then cover England, Wales, Scotland and Northern Ireland. The correct way to refer to these regulations in these circumstances may be worth checking with VMD.

'Veterinary Surgeon' and 'Vet' means a qualified professional responsible for diagnosing and treating illnesses and injuries in animals. Their role includes performing surgeries, prescribing medications, advising on preventative care. Veterinary Surgeons are registered with the RCVS which ensures they meet the required standards of education and practice.

PDSA would suggest that an additional definition is included which addresses the significant concern raised earlier in this response and provides the reassurance that PDSA will not be drawn into these measures, when the stated intention in the final report was to exclude our services.

The remainder of the order and undertakings appear broadly in line with the remedies as outlined in the final report, and PDSA assumes that those businesses more directly impacted by the remedies will potentially have more detailed feedback in these areas.

Proposed poster and flyer

With regards the proposed poster and flyer, as presented in Draft Schedules 2 and 3, the concept of a poster informing pet owners that they may be able to source their medications

elsewhere more cost effectively is accepted and PDSA understands that the purpose of this consultation is not to revisit decisions that have already been made. PDSA believes that the impact of this remedy in particular is highly dependent upon the messaging and tone of any pet owner facing materials that are created.

PDSA is very reliant upon a viable, well distributed and effectively operating FOP veterinary sector to act as a 'staging post' and filter for demand for our services, there is a delicate balance between affordable FOP veterinary care (which could mean that fewer pet owners need to resort to charitable support – allowing us to focus our resources on those most in need) and measures that may impact the financial viability of practices and lead to unintended consequences. PDSA would like to remind CMA of our response to this matter in the consultation of May 2025 – "*PDSA would also be concerned at any remedy that may impact the financial viability of practices and reduce accessibility to veterinary care. It is possible that those smaller practices that cannot source medications at low prices compared to LVG's may be disproportionately impacted by this recommendation as they will not be able to compete with LVG's or internet sources.*
PDSA would ask the question in what other industry are businesses required to tell their customers the prices of their competitors and effectively encourage them to go make purchases elsewhere. It may be reasonable to raise awareness that medications may be purchased more cheaply elsewhere, but actively providing those prices feels like a disproportionate step."

Veterinary care is not just about medication costs, PDSA acknowledges that the proposed approach may benefit one particular sub-set of pet owners i.e. those who's pets have long-standing or chronic medication needs, however, as stated PDSA would be concerned by any measure that could impact upon the financial viability of practices in any one particular area of service provision and how practices may respond to those financial pressures.

PDSA would be concerned that if practices lose significant income in one area, in this case medication sales, they may be left with no option but to raise prices elsewhere in their service to compensate. The raising of consultation fees could discourage pet owners to attend veterinary practices in the first instance, and the raising of other fees e.g. diagnostic and surgical, could discourage owners from accessing those services - often at a time when their pet most needs them. If that were to be the case this rather 'blinkered' approach would counteract the financial benefits and animal welfare benefits felt by the subset of pet owners with chronic conditions and may just transfer the affordability issues to those who's pets have acute or emergency care needs.

PDSA is fully supportive of the concept that if a pet owner is struggling to afford any particular element of veterinary service, that credible and effective alternatives are made known to the client, be that alternative contextualised care plans or signposting sources of medication that may be more affordable. However, this should be an individualised consideration (according to client desires, perceptions and means) rather than a blanket, compulsion for all clients to purchase elsewhere.

PDSA would be more supportive of more suggestive and holistic messaging along the lines of 'if you are struggling to afford your pets care please speak to us and we may be able to

help, through the consideration of alternative treatment plans or informing you where you may be able to source medications more economically e.g. pharmacies or on-line'.

PDSA notes the suggested responses as published by BVA and, notwithstanding the above comments, is supportive of their concerns, therefore:

- We support the CMA's aim of promoting greater competition in the sale of veterinary medicines by raising awareness that a written prescription is available and that medication may be cheaper if bought somewhere other than the prescribing practice.
- We support a consistent approach to proactively offering a prescription, and as such support the CMA's requirement for RCVS to produce and distribute standardised literature.
- We do not support the text currently being proposed by the CMA, specifically "The same medicines may be significantly cheaper online". This text is not neutral or factual, is contestable and could lead to conflict, mistrust and impacts upon veterinary service provision.
- "Significantly cheaper" is both subjective and relative, and in many cases will simply not be true
- online pharmacies are not the only alternative dispensing option available to consumers. Other possible suppliers in an open market would be high street pharmacies and other veterinary practices
- Requiring practices to display the proposed text is likely to damage trust and the vet-client relationship, and in some cases could encourage verbal abuse and unnecessary altercation in the consultation room.
- We support the subsidiary text being proposed, specifically "You can choose where to buy your pet's medication. Compare prices online and at other retailers to see the savings you might make". This text should replace the proposed banner text.
- An acceptable shorter alternative for the banner text could be Savings may be available if you shop around for your medicines, with the proposed subsidiary text retained as it is.
- Refinements to the wording on the Standard Written Prescription Notice should also be reflected on the Standard Flyer for ongoing medication.

However, part of the effectiveness of communications relies upon the readability of any materials created and our team have suggested some comments on the proposed resources, as they currently stand, as below:

- The "*In some cases,…" text on both documents is disproportionately small compared to the rest of the text. This should be a similar size (or only marginally smaller) to the rest of the text as it is a key factor for the client's consideration.
- The phrase "Compare prices online and at other retailers to see the savings you might make" is unclear. Clients need to ensure that they include the cost of a prescription within their calculations.
- The graph on the 'long term medication' flyer is confusing, as it seems to imply that savings increase over time when it is designed to show cumulative benefit. In addition, the wording of 'hundreds of pounds' seems incongruous with the rest of the messaging which doesn't have a numerical figure. More generic wording would avoid clients assuming that they will save hundreds of pounds in a few months.

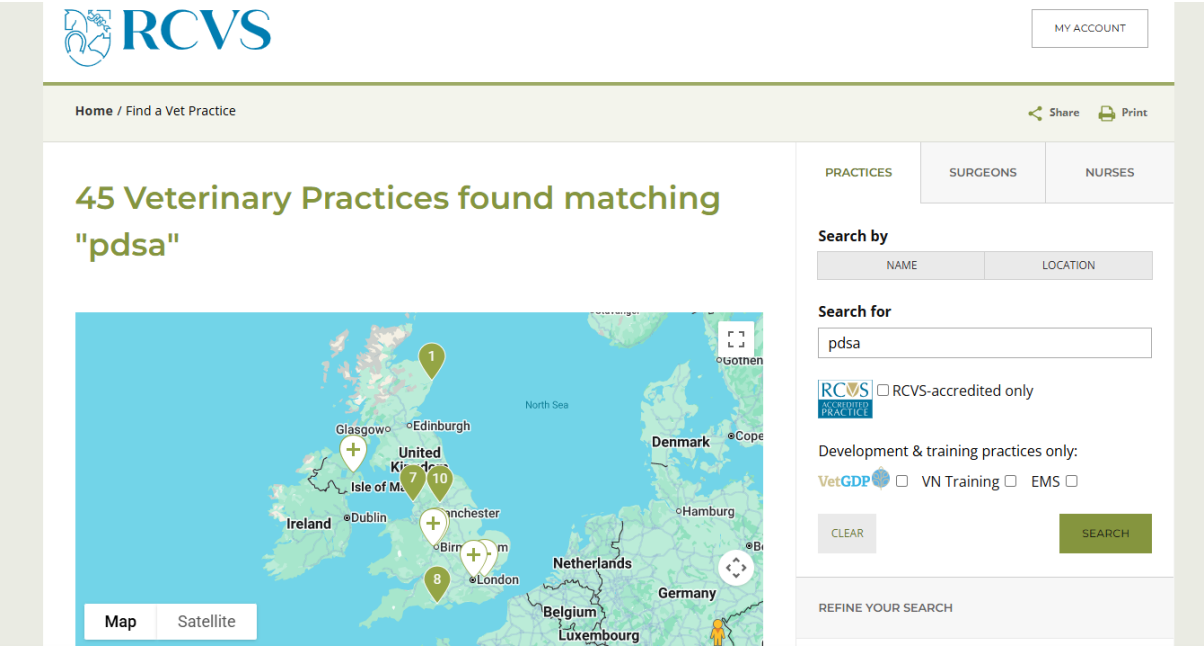
- On both assets it should be noted that there will be a delay in receipt of medications due to processing and posting of the online pharmacy, clients may not be aware that delivery can take up to 5 days at the point of requesting a written prescription which will influence their ability to make an informed choice.

Comments specific to the Undertakings

PDSA would like to re-iterate a point made in the response to the funding order and undertakings, namely that we believe that the fact that the organisation is not deemed a 'Qualifying veterinary business' (as described in those documents) should not preclude having a presence on the RCVS Find a Vet platform, this is important from both a credibility and service accessibility perspective.

The proposed undertakings state:
4.4 The RCVS shall make the Find a Vet Information publicly available on the Find a Vet Platform in an accessible and user-friendly manner, ensuring that the Find a Vet Information is made available on the Find a Vet Platform as soon as reasonably practicable following the RCVS's receipt of such information from Relevant Veterinary Businesses.

PDSA would suggest that the platform is able to flex to accommodate the level of information according to the categorisation contained within the orders, it is important that as registered veterinary practices (RVP's) PDSA Pet Hospitals are still visible and searchable as at present:



PDSA would therefore accept that as an FOP it should continue to submit the data it currently supplies to RCVS to ensure that it is recognised as an RVP, and to appear accurately depicted as such on the Find a vet platform. However, PDSA continues to believe that it should not be mandated to submit additional information, that the Qualifying Veterinary Businesses may be required to, ensuring that PDSA is not exposed to the levy nor the administrative burden that the orders may impose upon qualifying veterinary practices.