Vets Market Investigation: VDS response to Consultation on draft substantive Order and Undertakings (and associated documents)

Date: 20.8.2026

Author: [redacted], Director of Membership, Veterinary Defence Society

Who we are

The Veterinary Defence Society (VDS) is the largest and oldest professional indemnity insurer to the veterinary professions in the UK and the Republic of Ireland. We are a mutual organisation run by experienced veterinary surgeons on behalf of the veterinary professions. Our purpose is to protect and support veterinary professionals, practices and businesses, enabling them to focus on animal health and welfare. This involves much more than simply providing insurance for when things go wrong. We are committed to providing holistic risk management services to our ~47,000 vet and RVN members. This includes providing them with a dedicated advice service run by vets and helping veterinary teams learn from errors and near misses using our VetSafe quality improvement tool. We also deliver non- clinical training in areas like communication skills and complaints handling to upskill our members and build strong vet- client relationships. The VDS employs 49 veterinary professionals all of whom have had experience working in veterinary businesses including running and owning veterinary practices, many of whom continue to work in veterinary practice alongside their VDS roles.

Introduction

We are grateful for the opportunity to provide written feedback on these documents and for the CMA's willingness to meet with the VDS and take on board our verbal feedback in relation to complaints and redress which is one of our particular areas of expertise.

Please note that we have fed back separately and in detail about *Draft Schedule 4- complaint log* (both verbally at a meeting on Monday 10th August and in writing on Tuesday 18th August).

Feedback

Other than in relation to the complaints log, the VDS has five main areas of concern:

1. **Referral centres and Out of Hours providers appear not to be required to comply with all CMA orders/ undertakings**

It is VDS's strongly held opinion that in order to protect consumers, veterinary referral centres and OOH providers must be required to comply with all the same orders/ undertakings as FOPs for the following reasons:

- This is in the best interests of pet owners. Pet owners will expect the same standards of care and service when visiting referral centres and OOH providers as they receive from their FOP.
- Many veterinary practices provide referral services, first opinion services and out of hours services under the same roof and provided by the same veterinary professionals. Not requiring all three to meet the same requirements of the orders/ undertakings is illogical and will create confusion for pet owners and veterinary teams alike. There is also a risk that the lack of consistency will create a two-tiered approach to pricing in FOPs that carry out a significant amount of referral work.
- If different Orders will be required by each of the three offerings, it is essential that the CMA advises such practices (of which there will be significant numbers) how they are expected to comply.
- It is inconsistent to require referral centres to publish a price list but not require them to provide written estimates, itemised bills, written prescriptions or information on own brand medication and for them not to be subject to the prescription price cap or the Orders relating to cremation services.
- Given the fact that the services provided by referral centres are often more costly, more complex and riskier than those provided by FOPs it is unreasonable and not in consumers' best interests not to require them to meet all the requirements of the Order in relation to written estimates, itemised bills, prescriptions and medication.
- Given the higher cost and higher risk of services provided by referral practices which often leads to them experiencing higher levels of complaints than FOPs it is illogical not to require them to meet the requirements of the Order in relation to complaints and redress.
- It is wrong and unworkable to expect FOPs to include the costs of treatment at a referral practice in their 12-month estimate. Whilst it will be almost impossible for a FOP to predict the costs of 12 months' worth of treatment at their own practice (see point 2 below), it will be wholly impossible for them to predict what the diagnostic and treatment costs provided by another veterinary surgeon at a separate veterinary business will be over a 12-month period. Animals are usually referred to a specialist practice because they either require treatment that is outside the skillset of their FOP or because they require investigation

beyond the capabilities of their primary care practice. It therefore places an unfair burden on a FOP to provide an estimate for treatment at a referral centre when the FOP will have limited knowledge of what care might be required or what complications may be encountered. This is especially illogical given that referral centres are not required to provide such an estimate to the pet owners engaging their services.

- It is unfair to veterinary professionals employed by referral practices not to include referral centres in the Order relating to Article 13 (ensuring that veterinary professionals can act in accordance with the relevant provisions of the RCVS Codes and Guidance) and may put them under undue pressure by their employers.
- If, as we have been told, referral practices are "out of scope" and there really is no way to include them in the Orders, we urge the CMA to provide clear, unambiguous communications both to the veterinary professions and the public as to the reasons for this decision in order to ensure animal owners are not disappointed when they do not see the same changes in their referral practices as they will be seeing in their FOPs. Failure to ensure this is clearly communicated will lead to more complaints against veterinary professionals and businesses with all the associated stress and mental health issues which you are already aware of are rife within our professions.

2. FOPs required to provide an estimate covering 12- months' worth of treatment

12 months is a long period of time in the lifespan of a domestic pet (equivalent to 6 or 7 years in humans) and it is unrealistic to expect that an estimate provided on day one will still be valid and accurate/ appropriate for a period of 12 months as the animal's disease may have progressed significantly over that time and the initial treatment being suggested may no longer be appropriate given the dynamic nature of disease processes- especially for chronic medicine cases.
As noted above, it is also unreasonable to expect a veterinary professional to make recommendations in respect of treatment plans being undertaken subsequently at a referral centre as the fact the referral is deemed necessary means the patient potentially has a complex condition or requires complex treatment/ surgery which is out with the skill set/ experience of the referring vet. Referral practices are not required to provide such an estimate, so it is inconsistent to expect FOPs to do so on behalf of the referring vets.

3. Title of veterinary nurse

As veterinary nurse is not a protected title, the definitions section (page 17) should have "Registered" added to the definition of veterinary nurse.

4. RCVS powers of entry

We are very concerned about RCVS being given powers of entry to veterinary practices without appropriate checks and balances being in place. The DEFRA Policy paper "Our vision for a thriving veterinary sector" which lays out plans for reform of the Veterinary Surgeons' Act 1966 includes their proposals regarding checks and balances in relation to RCVS powers of entry. In order to ensure any powers of entry by RCVS are proportional and fair, the same checks and balances must be included in the CMA Order.

5. Decision tree

As we have previously notes, as the VDS support the majority of UK veterinary practices with complaints, it should be compulsory for the RCVS to consult about the Decision Tree (rather than consultation being optional) so that the VDS can feed into the consultation.

As we have done previously, the VDS would be pleased to meet again with the CMA to discuss and explain all our comments, in particular those about not requiring referral practices to comply with certain Orders as we believe this will not only be unworkable but will cause tensions and confusion for the professions and the public alike.

The Veterinary Defence Society Limited

Email: admin@thevds.co.uk **Web**: www.thevds.co.uk **Tel:** +44 (0) 1565 652737

Registered Office: 4 Haig Court, Parkgate Industrial Estate, Knutsford, Cheshire, WA16 8XZ. Registered in England and Wales no. 2159441

Registered Office: 5th Floor, Block E, Iveagh Court, Harcourt Road, Dublin 2. Registered in Ireland no. 909190. VAT Reg No. 485678428