

Impact of the Covid-19 Pandemic on Veterinary Nurses

**A survey report for the Royal College of Veterinary
Surgeons: Summary of findings**

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Institute for Employment Studies

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Summary of findings

The survey

The 2021 online survey aimed to capture the experiences of veterinary nurses (VNs) during the Covid-19 pandemic, with particular emphasis on the impact of the pandemic on VNs' personal and working lives. The Royal College of Veterinary Surgeons (RCVS) commissioned the Institute for Employment Studies (IES) to carry out the survey on its behalf.

The survey was launched on 23 July 2021, via email invitations sent to 19,925 VNs, and closed on 24 August 2021, following three reminders to those who had not yet submitted their completed questionnaires. The final response rate was 16.6 per cent for completed and submitted questionnaires, rising to 23.5 per cent when partial completions were included. Headline results were sent to the RCVS on 8 September 2021, after which detailed, in-depth quantitative and qualitative analysis was carried out. This report presents the results of the full analysis.

A parallel survey of veterinary nurses (VSs) also took place within a similar time-frame; the response rate for the VS survey was somewhat higher, at 22.3 per cent for completed and submitted responses, and 27.4 per cent including partials. This summary report contains some comparisons between VSs and VNs, drawing attention to any significant differences between the two groups.

Respondent profile

Personal

- The large majority (96.5%) of respondents were female, with 2.7 per cent being male; the rest preferred not to say (0.6%) or preferred to self-describe (0.2%). Ages ranged from 19 to 83, with an average (mean) age of 36.8 and a median (middle value) age of 34.7. The large majority (96.8%) described their ethnicity as white, with others belonging to a black or minority ethnic (BAME) group (2.2%) or preferring not to say (0.9%). When asked about disabilities or medical conditions, 7.2 per cent said they had a physical disability/condition, while 6.2 per cent said they had a mental health disability/condition.

Just over one-third (34.6%) had dependent children living with them; the ages of their children were under five (40.6%), five to eleven (47.2%), 12 to 16 (29.7%) and over 16 (14.8%). A much lower 5.3 per cent said they provided care to an adult dependant.

The qualification year of respondents ranged from 1961 to 2021.

When asked if they were a 'suitably qualified person' (SQP), 13.2 per cent said they were.

The main differences when compared to VSs are that a higher percentage of VSs were male (32.3%), and VS respondents were notably older, with an average (mean) age of 43.3. In addition, VSs were also slightly more likely to be from a BAME group (4.3%); and a lower percentage of VSs than VNs reported physical disabilities/medical conditions (4.9%) and mental health disabilities/medical conditions (3.3%). The earliest reported year of qualification for VSs was 1940.

Work

The large majority of VN respondents reported that their main current employment category was working within the veterinary profession, either full time (69.3%), part time (26.3%) or in a voluntary capacity (0.1%). The rest were either working outside the profession (1.8%), taking a career break (1.5%), unemployed (0.6%), or retired (0.4%). Of the relatively small number currently working outside the profession, around three-quarters either do some work as a VN within the profession in addition to their main employment, or have worked as a VN within the profession at some point since 23 March 2020.

Compared to VSs, the only major difference is that a notably higher percentage of VSs were retired (4.4%).

Working as a VN during the pandemic

All respondents who worked as a VN during the pandemic were asked about the work they did as a VN during this period. These respondents were in one of the following three categories: currently working as a VN in their main occupation; working mainly outside the profession but also doing some work as a VN; not currently working as a VN but had done so at some point since the first lockdown on 23 March 2020.

- **Location:** The large majority (86.1%) of those who worked within the profession during the pandemic gave their work location as England, with 7.3 per cent working in Scotland, 4.3 per cent in Wales, and 1.3 per cent in Northern Ireland. The remaining 1.0 per cent said they had not worked in the UK at all during the pandemic, and were routed to the final section of the questionnaire and asked no further questions about their work, as the survey was designed primarily to capture the impact of the pandemic on those working in the UK.
 - **Type of location:** The majority of respondents described their working location as either urban (44.9%) or a mixture of urban and rural (37.8%), with a relatively low 17.3 per cent working in a rural area.
- The large majority of those working as a VN during the pandemic (88.8%) worked **within clinical veterinary practice**, with the remaining 11.6 per cent working **outside clinical veterinary practice**.

- Most VN respondents working outside clinical veterinary practice worked for a veterinary nursing college (22.5%), commerce and industry (15.6%), a charity or trust (12.3%) or another university / education establishment (9.6%).

Compared to VSs: VSs were notably less likely to be working in England (80.8%), and were more likely to be working in a rural location (20.9%). In addition, VSs working outside clinical veterinary practice worked in a greater variety of organisations, including some for which very few, or no, VNs worked: the Animal and Plant Health Agency (APHA), veterinary schools, the Food Standards Agency (FSA), and meat hygiene / official controls.

- Table 1 shows, for VNs working in clinical veterinary practice, their **type of practice**. It is notable that three-quarters (75.7%) of respondents worked in a small-animal-only practices.

Table 1 VNs working in clinical veterinary practice: type of practice

Practice type	No.	%
Small-animal-only practice	2730	75.7
Referral practice / consultancy	383	10.6
Mixed practice	322	8.9
Provider of out-of-hours services only	85	2.4
Equine-only practice	36	1.0
Practice types selected by fewer than ten respondents	19	0.5
Other	30	0.8
Total	3605	100

Source: RCVS Covid-19 impact survey 2021

Notes:

1. Respondents working in more than one practice were asked to select the type of their main practice.
2. 'Small-animal-only' includes small animal practices that treat exotics.

■ Table 2 gives respondents' **position within practice**.

Table 2 VNs working within clinical veterinary practice: position in practice

Position	No.	%
Nurse	2110	58.1
Head nurse / Deputy head nurse / Senior nurse	1106	30.5
Practice manager / Practice administrator	121	3.3
Locum (temporarily fulfilling duties of others during their absence, or to cover vacancies temporarily)	100	2.8
Clinical coach	70	1.9
Practice owner / partner / director	44	1.2
Other	81	2.2
Total	3632	100

Source: RCVS Covid-19 impact survey 2021

■ **Practice ownership structure:** Table 3 shows that over half (59.1%) of respondents worked in a practice that was part of a corporate group or a joint venture with a corporate group.

Table 3 VNs working within clinical veterinary practice: practice ownership structure

Ownership structure	No.	%
Part of a corporate group	1911	52.6
Independent, stand-alone practice (e.g. a partnership)	909	25.0
Part of a joint venture with a corporate group	237	6.5
Independent, stand-alone practice that is part of a larger group (with some shared centralised support functions)	219	6.0
Charity	134	3.7
Veterinary school	122	3.4
Out-of-hours-only provider	65	1.8
Don't know / Other	36	1.0
Total	3633	100

Source: RCVS Covid-19 impact survey 2021

■ **Providing 24/7 emergency cover:** A small minority (3.8%) of respondents worked for a practice that was primarily or wholly an out-of-hours provider. The other respondents fell broadly into two groups when asked how the practice provided emergency cover: 50.4 per cent used a dedicated out-of-hours provider, while 43 per cent covered its own emergency work, either using the practice's VNs or with locum help, or co-operated with other local practices (2.4% used other methods, and 0.4% did not know).

■ **Size of practice:** When asked how many full time equivalent VNs worked at the practice, responses ranged from zero to 200, with a median (middle value) of 4.0 and a

mean of 8.2. The same question about VSs also yielded a very varied response, from zero to 300, with a median of 3.6 and a mean of 6.8.

Compared to VSs: A lower percentage (69.7%) of VSs worked for small-animal-only practices. In addition, VSs were less likely than VNs to work in a practice that was part of a corporate group or a joint venture with a corporate group (53.0%); and a lower percentage (43.5%) of VSs said their practice used a dedicated out-of-hours provider for emergency cover.

Personal experiences of working as a VN

Changes in working hours, working patterns and pay

- During the pandemic, almost half (48.9%) of respondents working as a VN said they had, at some point during the pandemic, had to work **additional hours** due to others being furloughed.
 - Of these, around two-thirds (68.2%) were paid, or mostly paid, for these additional hours, while 21.1 per cent were unpaid / mostly unpaid and 10.7 per cent experienced a fairly equal mixture of paid and unpaid.
 - The peak months for working additional hours were all during 2020. They were, in order: May, June, April, July, March and August.
- By contrast, a much lower 11.4 per cent experienced a **cut in working hours**, not including a furlough arrangement.
 - Of these, 58.9 per cent said this happened just once, with the other 41.1 per cent experiencing this more than once.
 - The peak months for experiencing a cut in working hours were in the early months of the pandemic in 2020. In order, they were: April, May, March and June.
 - The percentage by which working hours were cut was from one to 100, with a median of 35 per cent and modes (most commonly-occurring values) of 100, followed by 20, then 50.
 - Since the cut(s) in hours, 71.6 per cent experienced their hours returning to normal, and 12.3 per cent had an increase in hours compared to the pre-cut level; however, seven per cent said their hours had increased, but not to the pre-cut level, while the hours of 9.1 per cent had remained at the lower level.
- A very small percentage of respondents (3.6%) reported that they had experienced a **pay cut** that was not related to a cut in hours.
 - Of these, 64.5 per cent said this happened just once, while 35.5 per cent had experienced it more than once.
 - The peak months for pay cuts were again in the early months of the pandemic in 2020. In order, they were: April, June, July and May.
 - The percentage by which pay was cut ranged from one to 100, with a median of just under 20 per cent and a mode also of 20 per cent.

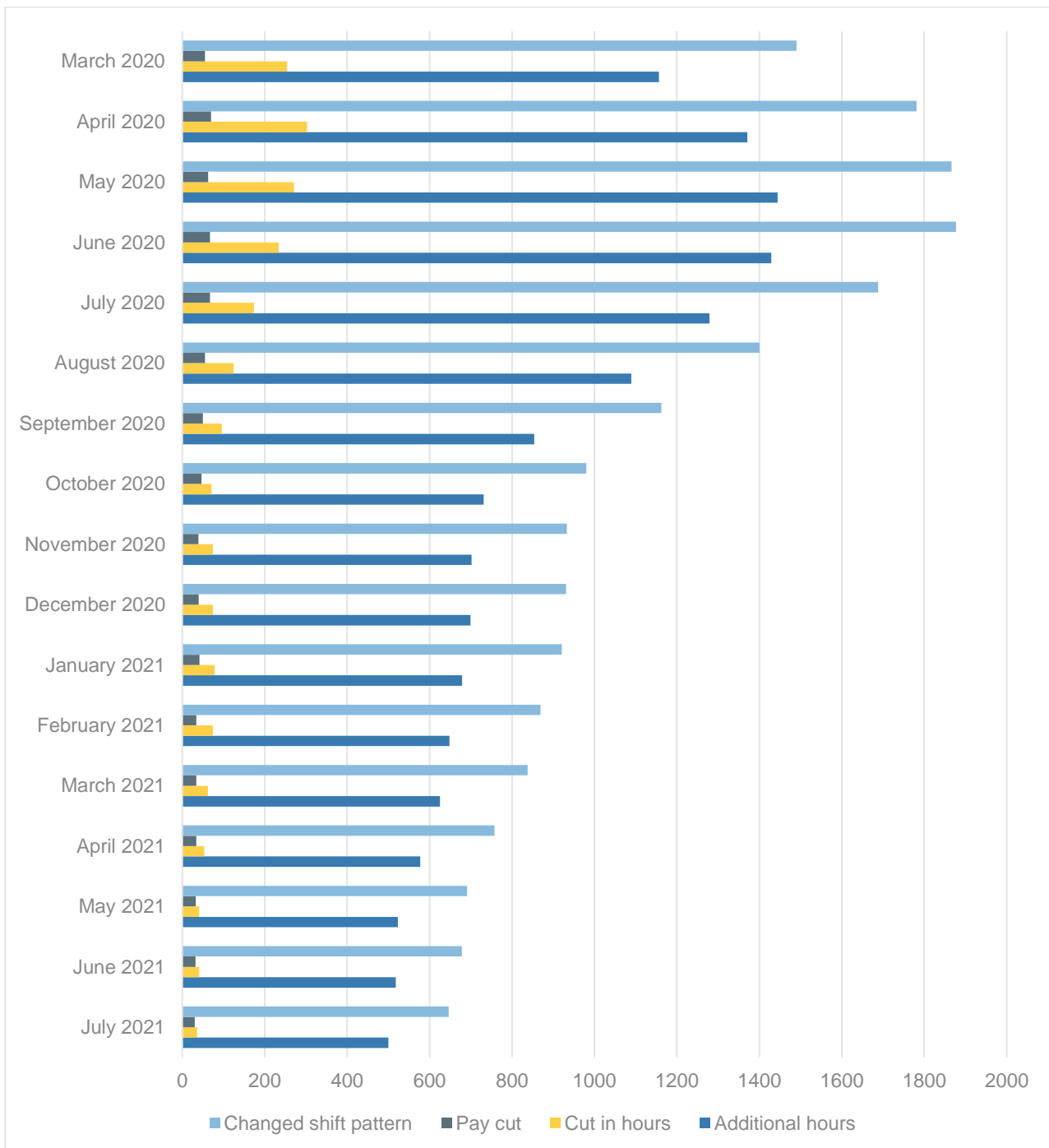
- Since the cut(s) in pay, 43.7 per cent experienced their pay returning to normal, and 9.6 per cent had an increase in pay compared to the pre-cut level; however, 8.1 per cent said their pay had increased, but not to the pre-cut level, while the pay of a fairly large 38.5 per cent had remained at the lower level.
- Around two-thirds (66.6%) of respondents had experienced a **change in shift pattern** at some point during the pandemic.
 - The change in shift pattern meant that, compared to before the pandemic, 28.5 per cent had done more weekend work, 27.7 per cent had done more evening work, and 22.9 had had to work on weekdays more often; 21 per cent reported other results (around half of those experiencing changes reported more than one result).
 - The months during which respondents experienced changes in shift pattern were particularly notable in the first six months of the pandemic in 2020. In order, these were: June, May, April, July, August, March and September
- Figure 1 presents the overall month-by-month picture of these changes in working hours, working patterns and pay.
- **Compared to VSs:** VSs were a little less likely to say they had to work additional hours, but were also notably less likely to have been paid for any additional work. VSs were also twice as likely as VNs to have received a pay cut, although the numbers receiving a pay cut were still relatively small (7.2% of VS respondents). However, a lower percentage of VSs (57.1%) had experienced a change in shift pattern. Overall, the month-by-month picture of changes in working hours, working patterns and pay were fairly similar among VNs and VSs.

Redundancy, furlough, self-isolation and shielding

- During the pandemic, a low 2.3 per cent said they had, at some point during the pandemic, been **made redundant**.
 - Almost all (96.6%) of these reported just one redundancy.
 - When asked how easy or difficult it was to find a new position, responses ranged from zero (extremely difficult) to ten (extremely easy), with a mean of 7.3, a median of 7.5 and a mode of ten. Overall, this suggests that the majority of the relatively small number of VNs who experienced redundancy found it fairly easy to find a new position.
- Over one-third (37.4%) of respondents had been **furloughed** at some point during the pandemic.
 - Of these, the large majority (87.1%) were furloughed just once, with 9.5 per cent experiencing two periods of furlough and 3.4 per cent more than two.
 - For most (73.9%) of those who were furloughed, their employer did not top up their salary; however, 13.8 per cent had their salary topped up to 100 per cent while 12.3 per cent experienced a partial top-up.

- The peak months for being furloughed were all during 2020. They were, in order: April, May, June and March. Furloughing dropped significantly from August 2020 onwards.

Figure 1 Changes in hours, pay and shift pattern: number of VN respondents experiencing these changes, month by month



Source: RCVS Covid-19 impact survey 2021

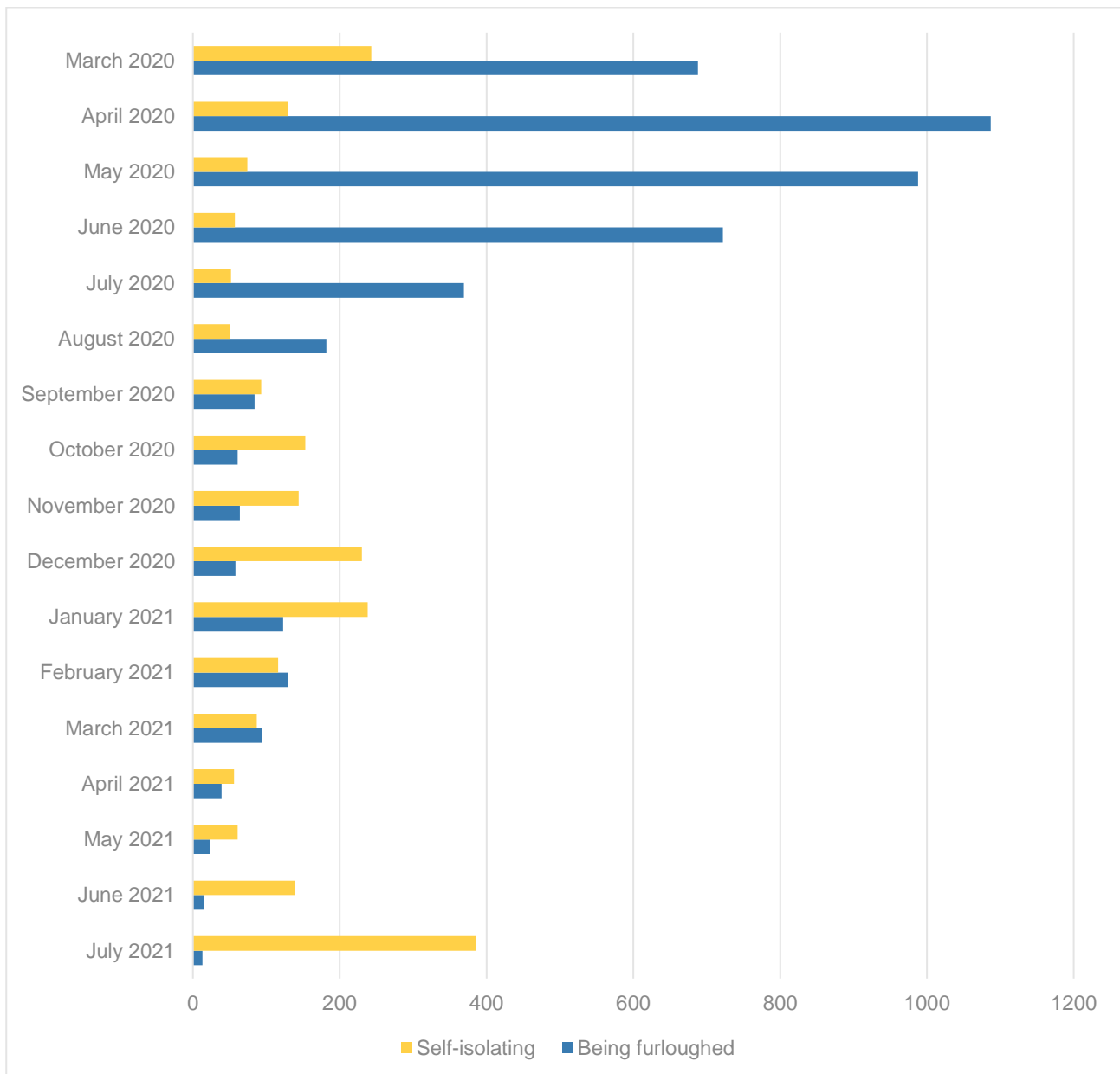
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- Well over one-third (40.2%) of respondents had needed to **self-isolate** at some point during the pandemic.
 - Around two-thirds (66.3%) of these had only experienced one period of self-isolation; however, 24.6 per cent had to self-isolate twice, six per cent three times, and 3.1 per cent four or more times.
 - The reasons for self-isolating were spread fairly evenly over most of the options provided: symptoms but no confirmatory test (17.1%), contacted from Test and Trace due to contact at work (16.6%), a positive test (16.3%), contacted by Test and Trace due to contact elsewhere or unknown contact (15.4%), a household member with a positive test (14.1%), and a household member with symptoms but no confirmatory test (10.2%). Only 'quarantine due to travel' yielded a low response (2.2%).
 - During the period when Government rules allowed it, nine per cent of respondents had been able to avoid self-isolation due to being able to explain they were wearing appropriate PPE at the time of the contact.
 - The peak months for having to self-isolate followed a different pattern from most of the other incidents reported in this section, possibly due to the greater availability of tests as the pandemic progressed combined with the various pandemic waves. They were, in order: July 2021, March 2020, January 2021 and December 2020.
 - A relatively low eight per cent of respondents had needed to **shield** for health reasons at some point during the pandemic.
 - Of these, only 26.9 per cent had been able to work remotely while shielding, with the remaining 73.1 per cent being unable to do so.
 - Figure 2 presents the overall month-by-month picture of furloughing and self-isolating experienced by respondents.
 - **Compared to VSs:** A notably lower percentage of VSs (22.6%) experienced being furloughed at some point during the pandemic, and a slightly lower 6.5 per cent of VSs had needed to shield. However, when shielding, a notably higher percentage of VSs (44.9%) had been able to work remotely. Otherwise, the differences between the two groups were small, and the month-by-month patterns of furloughing and self-isolating were fairly similar.

Responsibility for dependants

- During the pandemic, 25.7 per cent of respondents working as a VN had responsibility for school-age children.
 - Of these, one quarter (25.6%) were able to use key worker status at some point to enable their children to attend school in person.
 - A fairly low percentage (13.4%) of those able to use key worker status were single parents.
 - Of those who were not single parents, the majority (68%) had a partner who also had key worker status.

- The peak months during which the children of key workers were able to attend school in person varied considerably. In order, these were: February 2021, January 2021, March 2021, June 2020, July 2020 and December 2020.

Figure 2 Being furloughed and self-isolating: number of VN respondents experiencing these, month by month



Source: RCVS Covid-19 impact survey 2021

- All those working as a VN with responsibility for school-age children were asked if they had to provide home-schooling and / or supervise remote learning at any point during the pandemic. The large majority (87.8%) said they did.
 - The peak months for home-schooling and / or supervising home learning were early during the pandemic and during the start of 2021. In order, these were: May 2020,

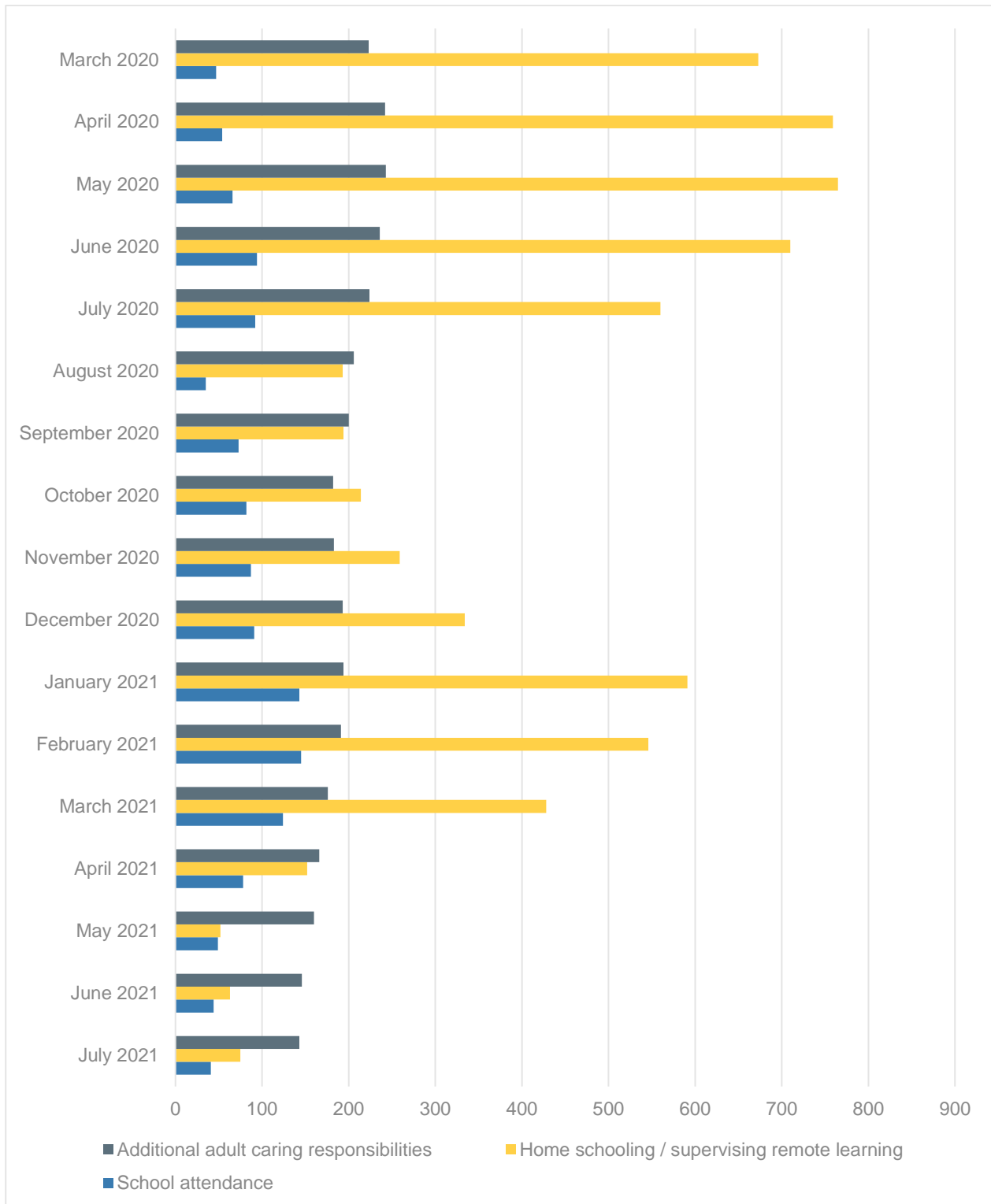
April 2020, June 2020, March 2020, January 2021, July 2020, January 2021, February 2021 and March 2021.

- When asked to rate the level of support given by their employer when they had these responsibilities for their school-age children from zero (extremely unsupportive) to ten (extremely supportive), responses ranged considerably and demonstrated a fair degree of polarisation, with 13.2 per cent rating their employer's support at one but 21.8 per cent opting for the highest score of ten; no respondent opted for the lowest score of zero. Overall, the mean value was 6.0, the median value 5.7 and the modal value five.
- A smaller number (8.7%) had to take on additional adult caring responsibilities at some point during the pandemic.
 - When asked to rate the level of support given by their employer when they had these additional responsibilities from zero (extremely unsupportive) to ten (extremely supportive), the pattern of responses was similar to that pertaining to home-schooling / remote learning supervision responsibilities. Responses ranged considerably and demonstrated even greater polarisation, with 17.6 per cent rating their employer's support at zero but 21.3 per cent opting for the highest score of ten. The overall mean was 6.5, the median value was just under five and the mode was ten, closely followed by five, then zero.
- Figure 3 presents the overall month-by-month picture of school attendance, home-schooling / supervising remote learning, and additional adult caring responsibilities experienced by respondents with dependants.
- **Compared to VSs:** A slightly higher percentage (28.2%) of VSs had responsibility for school age children; however, a lower percentage (82.1%) had to provide home-schooling / supervise remote working. VSs were also less likely to have had additional adult caring responsibilities (6.3%). Otherwise, responses were fairly similar.

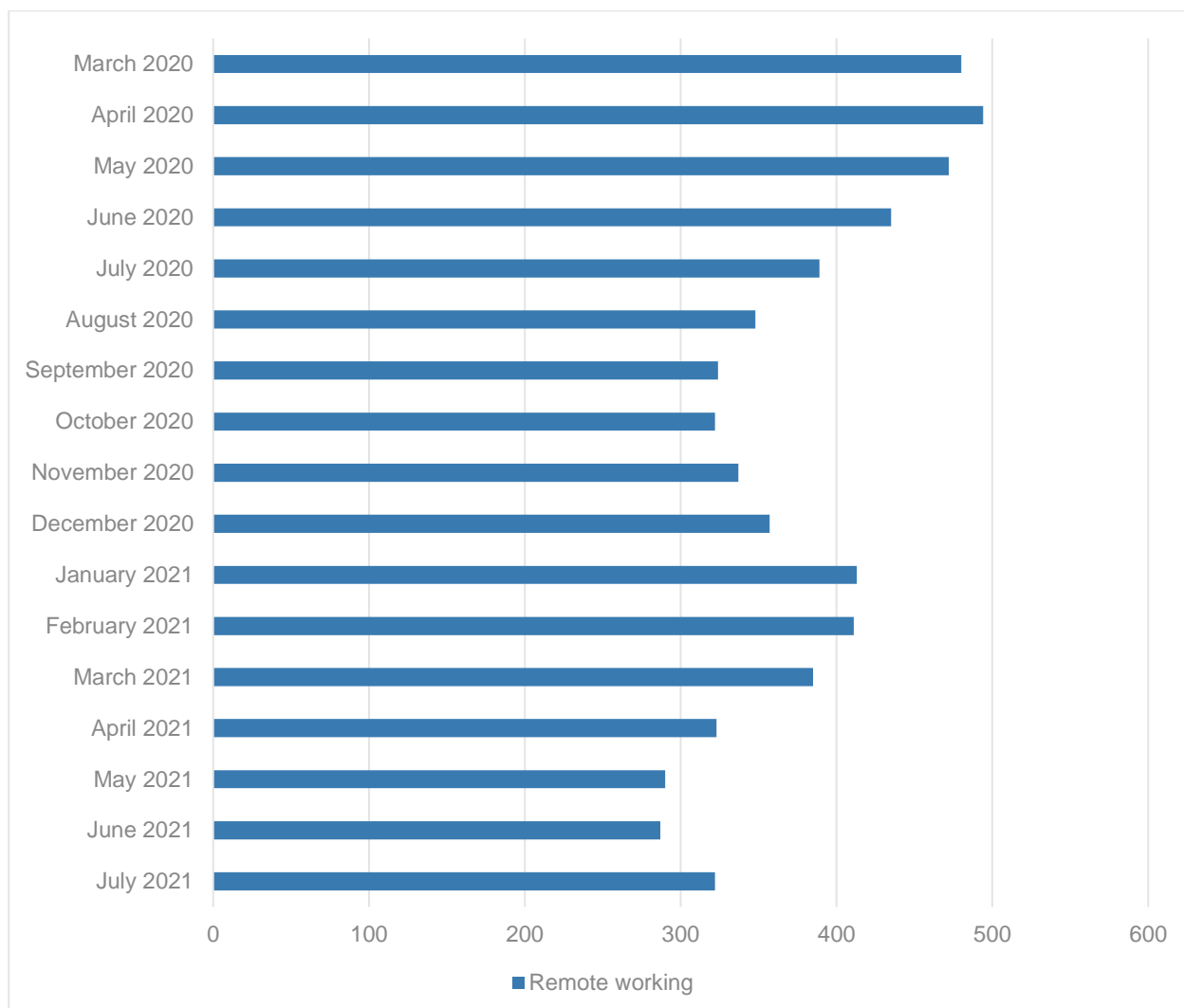
Working remotely

- Almost one quarter (23.5%) of VN respondents said they had worked remotely / from home at some point during the pandemic.
 - When asked for the reasons for working remotely, the most frequently-selected reason was 'following Government guidelines to work from home if able to do so' (24.7%) followed by 'not required to attend workplace in person' (19.2%), 'self-isolating' (11.5%) and 'caring for children' (9.8%).
 - The peak months for working remotely were during the first few months of the pandemic in 2020 and early in 2021. In order, these were: April 2020, March 2020, May 2020, June 2020, January 2021 and February 2021. However, of those working remotely / from home, every month from March 2020 to July 2021 inclusive showed at least 30 per cent doing so (see figure 4).
- **Compared to VSs:** A notably higher percentage of VSs (37.8%) had worked remotely at some point during the pandemic, although the reasons for doing so were similar, as was the month-by-month pattern.

Figure 3 Key workers’ children attending school, responsibilities for home-schooling / supervising remote learning, and additional adult caring responsibilities: number of VN respondents experiencing these, month by month



Source: RCVS Covid-19 impact survey 2021

Figure 4 Remote working: number of VN respondents experiencing this, month by month

Source: RCVS Covid-19 impact survey 2021

Vaccination status

- At the time of the survey, over two-thirds of respondents working as a VN during the pandemic had received their first and second vaccination doses (69.1%) or had received their first dose and intended to have their second (24%).
 - Of those who had not received their first dose but did intend to get vaccinated (3%), the main reason selected from the choices offered was 'lack of time' (17%). However, two-thirds (65.2%) of respondents in this position gave 'other' reasons.
 - Of the low 3.6 per cent of respondents who did not intend to get vaccinated, the main reasons were anxiety about side-effects (33.6%), and not trusting the vaccine (21.1%).
- **Compared to VSs:** A notably higher percentage of VSs (81.2%) had received both their first and second vaccination doses, and a lower 2.4% did not intend to get

vaccinated; of those not intending to get vaccinated, the most frequently-given reason was not believing it to be necessary.

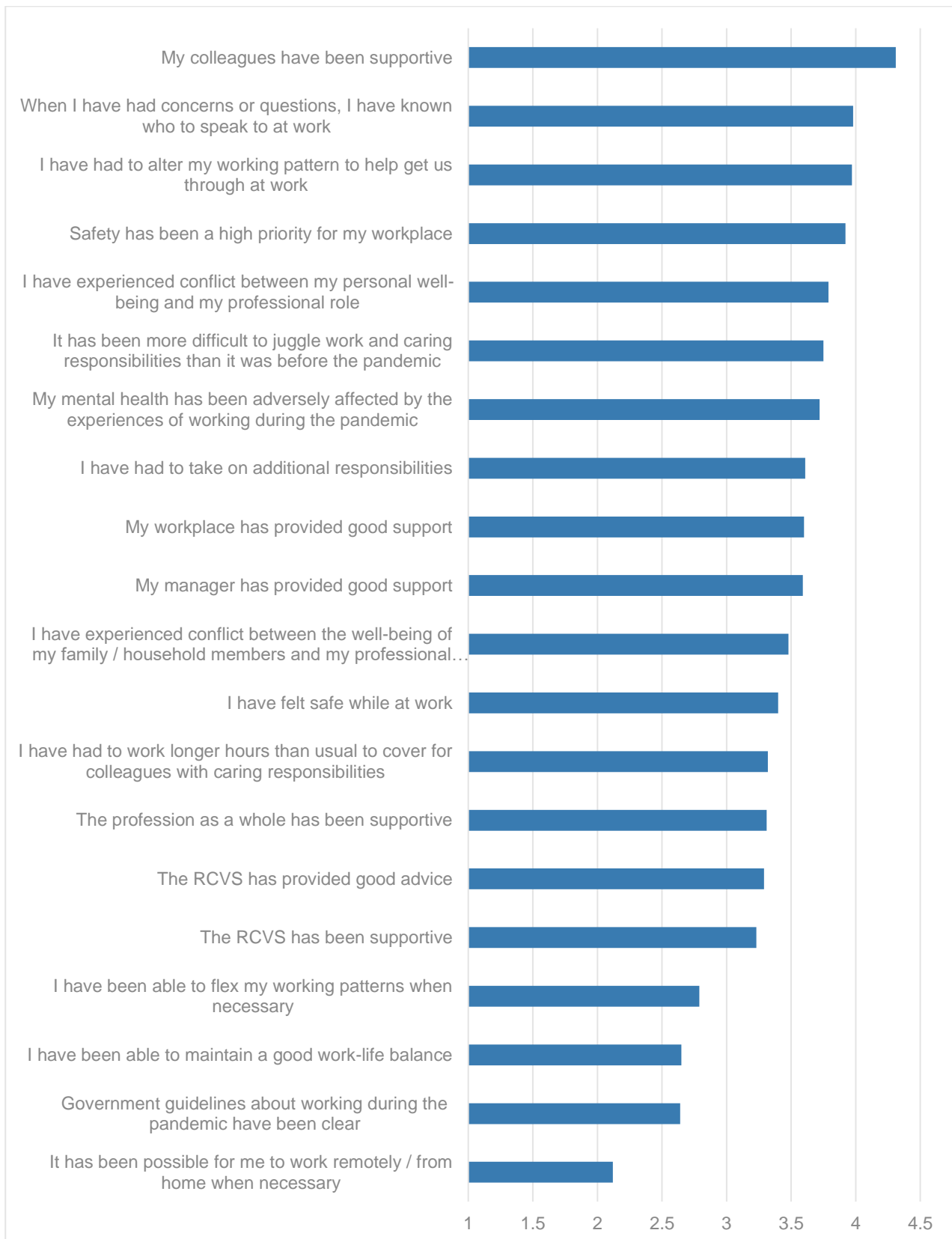
Attitudes

Respondents were asked to give their views about 20 statements relating to their work as a VN during the pandemic, using a five-point response scale ranging from one (strongly disagree) to five (strongly agree), with three (neither agree nor disagree) as the midpoint. An additional 'not applicable' column was included for respondents who did not find the statement relevant to them.

Figure 5 gives the average (mean) scores for each statement overall, and shows that, overall, respondents felt they had good support from their workplace, their manager and, in particular, their colleagues; they felt safety was a high priority and knew who to talk to if they had concerns. However, many respondents have clearly found things difficult at times, in that they have had to alter their working patterns and take on new responsibilities, have found it difficult to juggle work and caring responsibilities, and have found it hard to work remotely, flex their working patterns, or maintain a good work-life balance. It is also apparent that the majority of respondents have experienced conflicts (between their personal wellbeing and their professional role, and between the wellbeing of their family and their professional role); there is also a high level of agreement that their mental health has been adversely affected by the experience of working during the pandemic.

- **Compared to VSs:** On the whole, VNs and VSs responded to the 20 attitude statements in a very similar way; in particular, the five top-scoring statements are the same, and in the same order. However, VSs were less positive about the advice and support provided by the RCVS, but more positive about the support given by the profession as a whole. In addition, VSs were less likely to agree that they had taken on additional responsibilities, worked longer hours to cover for colleagues with caring responsibilities, and that their mental health had suffered; and finally, although VSs overall disagreed they were able to work remotely when necessary, VNs were notably more likely to disagree.

Figure 5 Respondents working as a VN during the pandemic – average (mean) scores for attitude statements



Additional experiences of VNs working within clinical veterinary practice

At the start of this section of the questionnaire, VN respondents were asked whether they worked in clinical practice, or had done so at some point during the pandemic. Table 5 gives the results, and shows that the majority (84.9%) of those working as a VN during the pandemic worked wholly within veterinary clinical practice throughout; however, an additional 10.6 per cent had done some veterinary clinical practice work during this period. The 4.5 per cent who had not done any veterinary clinical practice work during the pandemic were routed to the final section of the questionnaire, while the 95.5 per cent who had worked within veterinary clinical practice wholly or partially during the pandemic were asked further questions.

Table 4 Status of respondents working as a VN during the pandemic

Status	No.	%
Worked wholly within clinical veterinary practice throughout pandemic	3230	84.9
Did some work within clinical veterinary practice during pandemic, but main role outside clinical practice	209	5.5
Worked within veterinary clinical practice for part of pandemic but no longer doing so because now in a different role	117	3.1
Worked within veterinary clinical practice for part of pandemic but now retired	78	2.0
Total doing only some work in clinical veterinary practice during pandemic	404	10.6
Did no work within clinical veterinary practice during pandemic	172	4.5
Total	3806	100

Source: RCVS Covid-19 impact survey 2021

- **Compared to VSs:** A somewhat lower percentage of VSs worked within clinical veterinary practice throughout the pandemic (82.2%) or had done so at some point during the pandemic (8.4%).

Working as a locum

Of those who worked within clinical veterinary practice, 6.3 per cent (209 respondents) said that, before the pandemic, some or all of their income had been from locum work. They were asked how difficult it had been, during the pandemic, to find locum work, on a scale from zero (extremely difficult) to ten (extremely easy). Responses ranged from zero to ten, with a mean of 6.9, a median of 6.4 and a mode of ten. This indicates that, although the majority of locums found it relatively easy to find work during the pandemic (52.9% gave a score above the midpoint of 5), a large minority found it more difficult; 25 per cent gave a score of zero, one or two.

Just over half (55.3%) of those who had worked as a locum before the pandemic said they were still doing so. Of these, 20 per cent experienced cuts in their daily or hourly rate compared to before the pandemic, although the majority (80%) did not. Overall, 46.1 per cent said their income from working as a locum stayed about the same during the pandemic, while 29.6 per cent reported decreased income and 24.3 per cent increased income.

- **Compared to VSs:** A higher percentage (10.4%) of VSs had worked as a locum before the pandemic, and of those, a higher percentage (65.9%) carried on doing so during the pandemic. Those VSs who continued with locum work found it somewhat easier to find work, in that the mean score of ease / difficulty was higher, at 7.6, and a lower 18.4 per cent scored it as zero, one or two. However, a slightly higher percentage (23.2%) of VSs experienced cuts in their daily or hourly rate.

Providing remote advice and (for SQPs only) remote prescribing

All VN respondents working wholly or partly within clinical practice during the pandemic were asked about the provision of remote advice to clients about their animals; VNs who were SQPs were also asked about remote prescribing. A little over half (53.5%) had personally provided remote advice; however, of the 330 respondents who were SQPs, only 22.7 per cent had personally carried out remote prescribing. The peak months for providing remote advice were during the first six months of the pandemic in 2020. In order, these were: June, May, July, April, August and March; however, the numbers did not start to decline fairly quickly until March 2021.

- The numbers of SQPs carrying out remote prescribing were relatively small (between 34 and 54 each month), and varied little until 2021, when they started to decline from March onwards.

Table 6 gives a breakdown of the types of animals for which VNs had personally given remote advice, and shows that mostly, remote advice was for animals known to the VN and/or to the practice; however, almost half (47.2%) of VNs providing remote advice had done so for completely new animals. On average, each VN respondent selected three of the categories of animals for which they had provided remote advice.

Table 5 Remote advice provision during the pandemic

Types of animals	No.	%
Animals known to you personally: existing condition	1268	72.3
Animals known to you personally: new condition	933	53.2
Animals known to the practice, but not to you	1430	81.5
Animals known to another veterinary practice, referred to you for specialist advice	534	30.4
Animals from another veterinary practice known to your practice, that was temporarily or permanently closed due to the pandemic	574	32.7
Animals not previously known to you, your practice or another practice known to you (i.e. completely new animals)	828	47.2
Totals	5567	317.2

Source: RCVS Covid-19 impact survey 2021

Note: Respondents were asked to select all categories that applied to them.

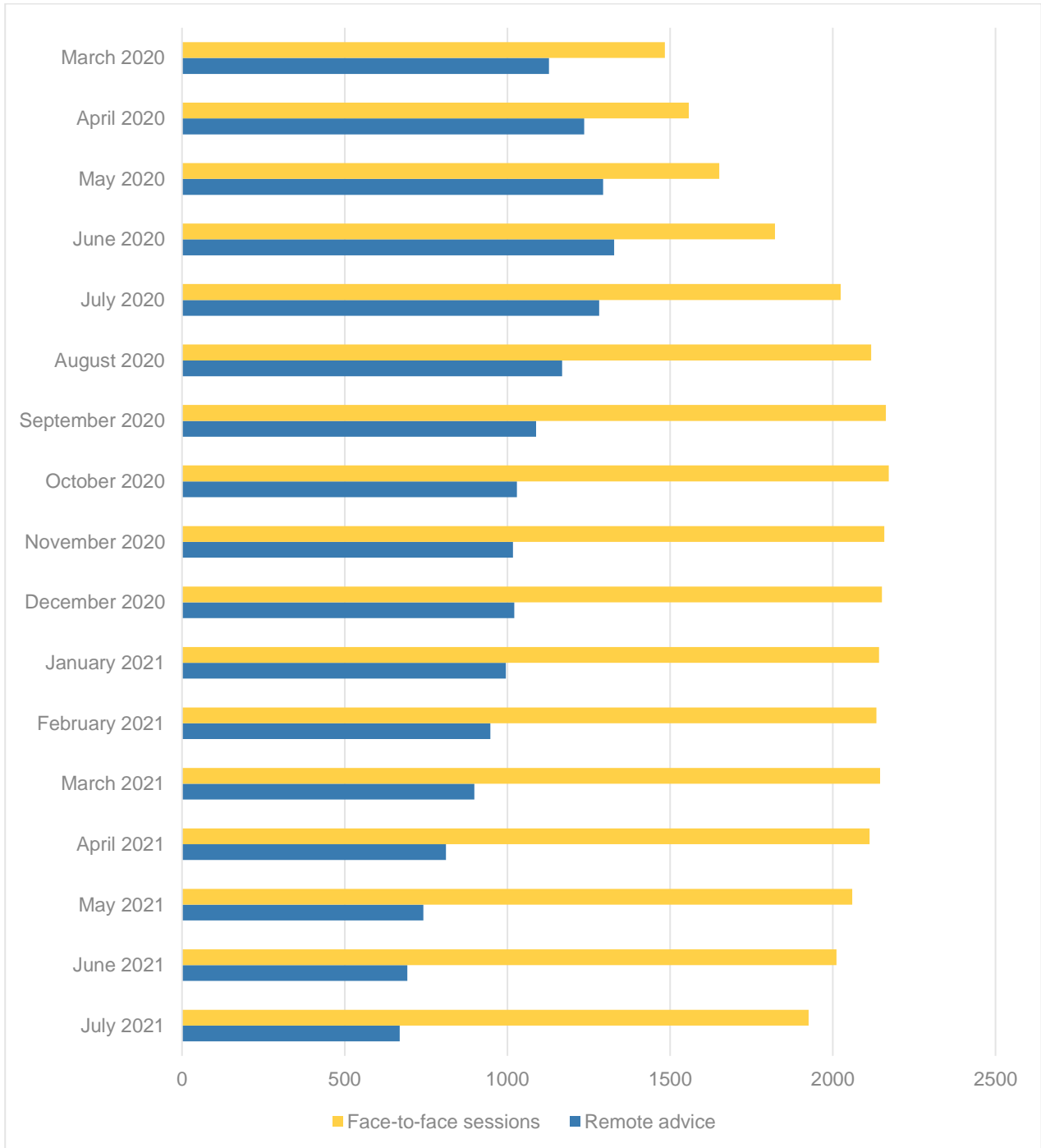
- **Compared to VSs:** It is not possible to provide direct comparisons here, because firstly VSs provided remote consultations rather than remote advice, and secondly all VSs were able to prescribe remotely. However, it is apparent that a notably higher percentage of VSs (68.2%) carried out remote consultations in comparison to VNs who provided remote advice (53.3%). In addition, a lower percentage of VSs (32.5%) provided advice relating to completely new animals.

Face-to-face advice and treatment, and home visits

The majority (81.9%) of VN respondents working within clinical veterinary practice had seen / treated animals in person, or provided advice to clients face-to-face, during the pandemic.

- When asked to select all the locations at which these in person contacts took place, the most frequent responses were 'in the car park / grounds of the practice' (41.5%) and 'inside the practice, with the owner outside the building' (26.6%).
 - In addition, 14.7 per cent said 'inside the practice, with the owner in reception / a waiting area inside', 11.9 per cent 'inside the practice, with the owner present in the consult room', 3.2 per cent 'outside on the owner's land' and 1.6 per cent 'inside the owner's premises'.
 - On average, each respondent selected two locations.
- Figure 6 presents the overall month-by-month picture of the incidence of remote advice and seeing / treating / providing advice face-to-face. This shows that the peak months for providing remote advice were April to July 2020, after which the numbers decline gradually; by contrast, face-to-face contacts increased between March and October 2020. Figure 6 also shows that in every month, even at the height of the pandemic, VNs on average had more face-to-face than remote contacts.

Figure 6 Remote provision of advice, and face-to-face seeing / treating animals and advice provision: number of VN respondents working within clinical practice carrying out these activities, month by month



Source: RCVS Covid-19 impact survey 2021

- When asked about carrying out **emergency home / on-site visits** to clients during the pandemic, 24.7 per cent said they had done so. For almost all (90.3%) of these respondents, the emergency visits were for small / companion animals, although 4.6 per cent had visited equine animals, 4.1 per cent farm animals, and one per cent other animals.
- A lower percentage (12.7%) had carried out **non-emergency home / on-site visits** to clients. These visits were mostly to small / companion animals that could be moved but were nevertheless seen at home / on-site (56.8% of those who had carried out non-emergency home visits), and small / companion animals that could not be moved (36.4%). In addition, 4.2 per cent of visits were to equine animals and 1.9 per cent to farm animals.
- **Compared to VSs:** A notably higher percentage of VSs had carried out emergency home / on-site visits to clients (40.9%), or non-emergency home / on-site visits (29.1%). In addition, a much lower percentage of visits for VSs were for small / companion animals (60.9% of emergency visits and 55.7% of non-emergency visits).

Concerns about personal safety

VNs working within clinical veterinary practice were asked if, at any time during the pandemic, they had **concerns for their personal safety** with regard to client interactions, aside from concerns about catching the Covid-19 virus. The majority (55.7%) had not experienced concerns; however, 29 per cent had experienced concerns during daytime work at the practice, 9.9 per cent when dealing with an out-of-hours case at the practice, three per cent during daytime work away from the practice, and 1.8 per cent when dealing with an out-of-hours case away from the practice.

- Although 10.7 per cent of those experiencing concerns said this occurred at about the same frequency as before the pandemic, and 20.6 per cent said it was less frequent, a worrying 34.7 per cent selected 'notably more frequently' and 32 per cent 'somewhat more frequently'.
- **Compared to VSs:** A slightly higher percentage of VSs (59.9%) had not experienced concerns about their personal safety. VSs with concerns were somewhat more likely to have experienced these when dealing with out-of-hours case away from the practice (4%), but less likely (22.3%) to have concerns during daytime work at the practice. It is also apparent that VSs with concerns were more likely to have experienced these 'notably more frequently' (39.8%) and 'somewhat more frequently' (35.3%).

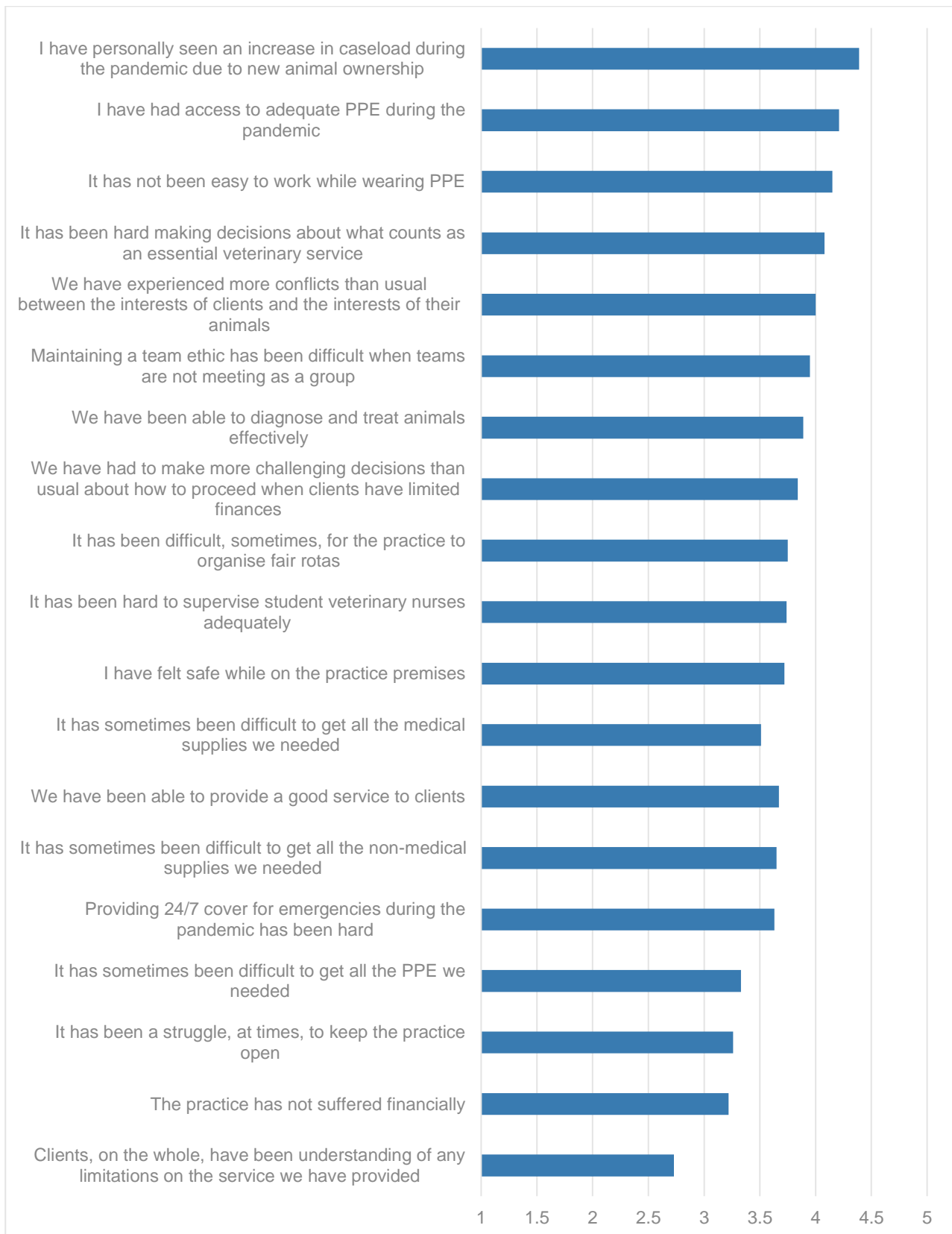
Attitudes

Respondents were asked to give their views about 19 statements relating to their work as a VN within clinical veterinary practice during the pandemic, using a five-point response scale ranging from one (strongly disagree) to five (strongly agree), with three (neither agree nor disagree) as the midpoint. An additional 'not applicable' column was included for respondents who did not find the statement relevant to them.

Figure 7 gives the average (mean) scores for each statement overall, and shows strong agreement that VN respondents have personally seen an increase in caseload due to new animal ownership. Respondents were also notably positive about having access to adequate PPE, but agreed strongly that it was not easy to work while wearing PPE. The other two top-scoring statements for VNs related to the difficulty in making decisions about what counted as an essential veterinary service, and the practice experiencing more conflicts than usual between the interests of clients and the interests of their animals. Notably, respondents overall gave a negative score (the only score below the midpoint of 3 for these 19 statements) to the statement, 'Clients, on the whole, have been understanding of any limitations on the service we have provided'.

- **Compared to VSs:** The top-scoring statement for both VSs and VNs related to the increase in caseload due to new animal ownership. However, there were some big differences in views between VSs and VNs about some aspects of working within clinical veterinary practice during the pandemic. Notably, VSs were more likely to agree that the practice had been able to provide a good service to clients and that the practice had been able to diagnose and treat animals effectively; and less likely to agree that they have had to make more challenging decisions than usual about how to proceed when clients had limited finances. In addition, VSs did not score any statement negatively, overall, and were positive (though not strongly) about clients being understanding of any limitations in the service provided.

Figure 7 VN respondents working within clinical veterinary practice during the pandemic – average (mean) scores for attitude statements



The changed role of the VN during the pandemic

The RCVS asked for additional questions to be included in the VN survey, which were not included in the VS survey, to find out about the ways in which VNs' roles had changed as a result of the pandemic. These additional questions were asked of all VN respondents working in clinical veterinary practice who had qualified before the start of the pandemic (N = 2893) and who were therefore able to give a 'before' and 'during' view of their experiences; the 399 respondents who had qualified during the pandemic bypassed these questions.

Changes in activities undertaken

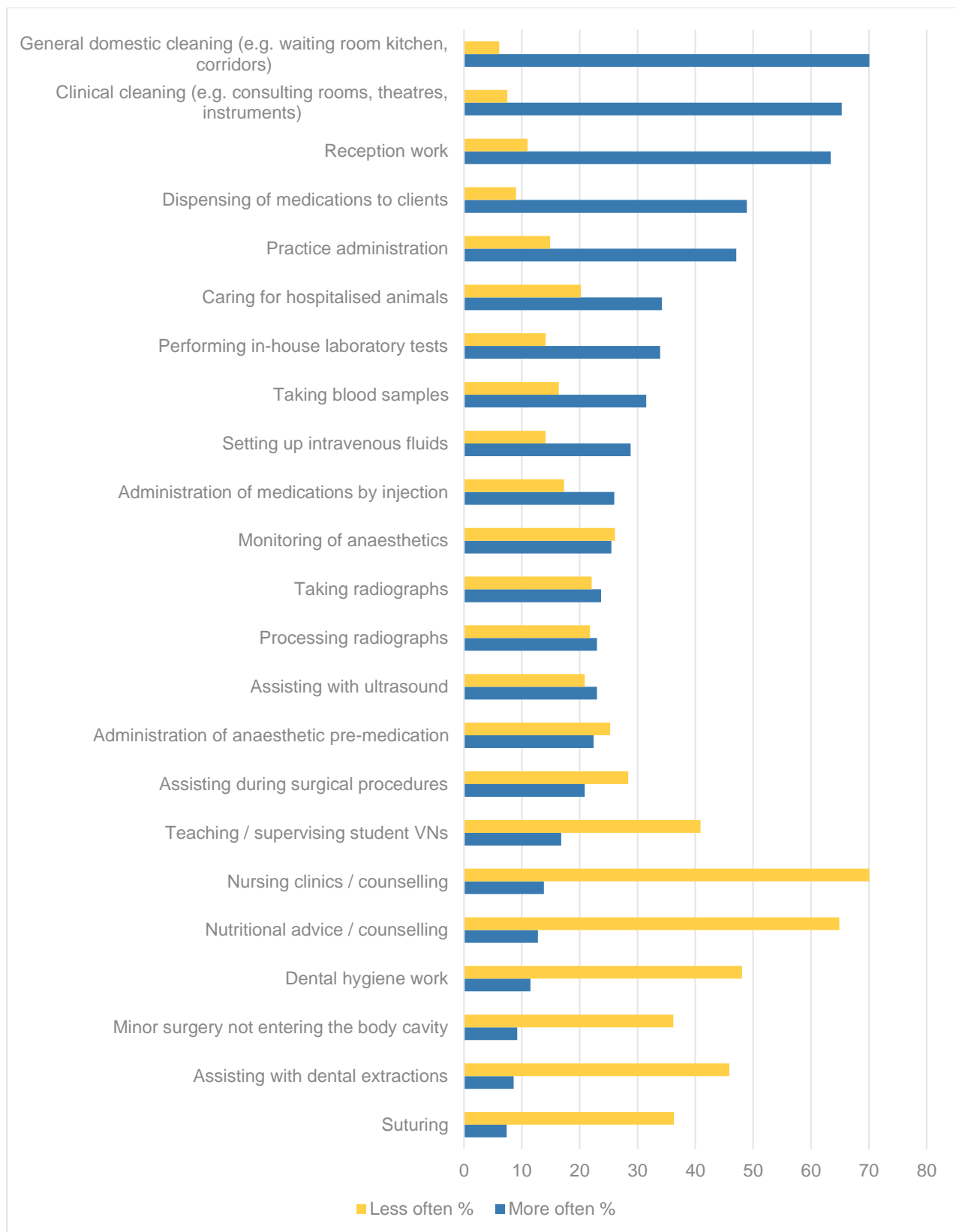
Respondents were presented with a list of 23 activities and were asked, for each one that was relevant to them, to indicate whether they had carried out this activity during the pandemic more often, less often, or at about the same frequency, compared to before the pandemic. Table 7 gives the results, and shows that the five activities with the highest percentage of respondents saying they did the task 'more often' were mostly not activities requiring a VN qualification. In order, these were: general domestic cleaning, clinical cleaning, reception work, dispensing of medications to clients, and practice administration. By contrast, the five activities with the highest percentage of respondents saying they did the task 'less often' were activities requiring VN expertise / experience, and/or skills in handling animals, and/or interpersonal skills. In order, these were: nursing clinics / counselling, nutritional advice / counselling, dental hygiene work, assisting with dental extractions, and teaching / supervising student VNs. Figure 8 presents the 'more than' and 'less than' percentages graphically.

Table 6 Changed role of VNs: Activities undertaken during the pandemic

Activity	No.	More often %	Less often %	About same %
Caring for hospitalised animals	2929	34.2	20.2	45.6
Nursing clinics / counselling	2624	13.8	70.1	16.1
Nutritional advice / counselling	2613	12.8	64.9	22.3
Administration of medications by injection	2733	26.0	17.3	56.7
Setting up intravenous fluids	2722	28.8	14.1	57.1
Dispensing of medications to clients	2712	48.9	9.0	42.1
Administration of anaesthetic pre-medication	2680	22.4	25.3	52.4
Monitoring of anaesthetics	2689	25.5	26.1	48.4
Assisting during surgical procedures	2671	20.9	28.4	50.8
Dental hygiene work	2559	11.5	48.1	40.4
Assisting with dental extractions	2490	8.6	45.9	45.5
Clinical cleaning (eg consulting rooms, theatres, instruments)	2705	65.3	7.5	27.2
Taking radiographs	2660	23.7	22.1	54.2
Processing radiographs	2634	23.0	21.8	55.2
Assisting with ultrasound	2638	23.0	20.9	56.1
Performing in-house laboratory tests	2688	33.9	14.1	52.0
Taking blood samples	2716	31.5	16.4	52.1
Minor surgery not entering the body cavity	2424	9.2	36.2	54.6
Suturing	2353	7.4	36.3	56.3
Teaching / supervising student VNs	2449	16.8	40.9	42.3
Reception work	2636	63.4	11.0	25.6
Practice administration	2565	47.1	14.9	38.0
General domestic cleaning (eg waiting room, kitchen, corridors)	2691	70.1	6.1	23.8

Source: RCVS Covid-19 impact survey 2021

Figure 8 VN activities during the pandemic: percentage of respondents reporting they did each activity more often / less often than before the start of lockdown on 23 March 2020



Changes in clinics

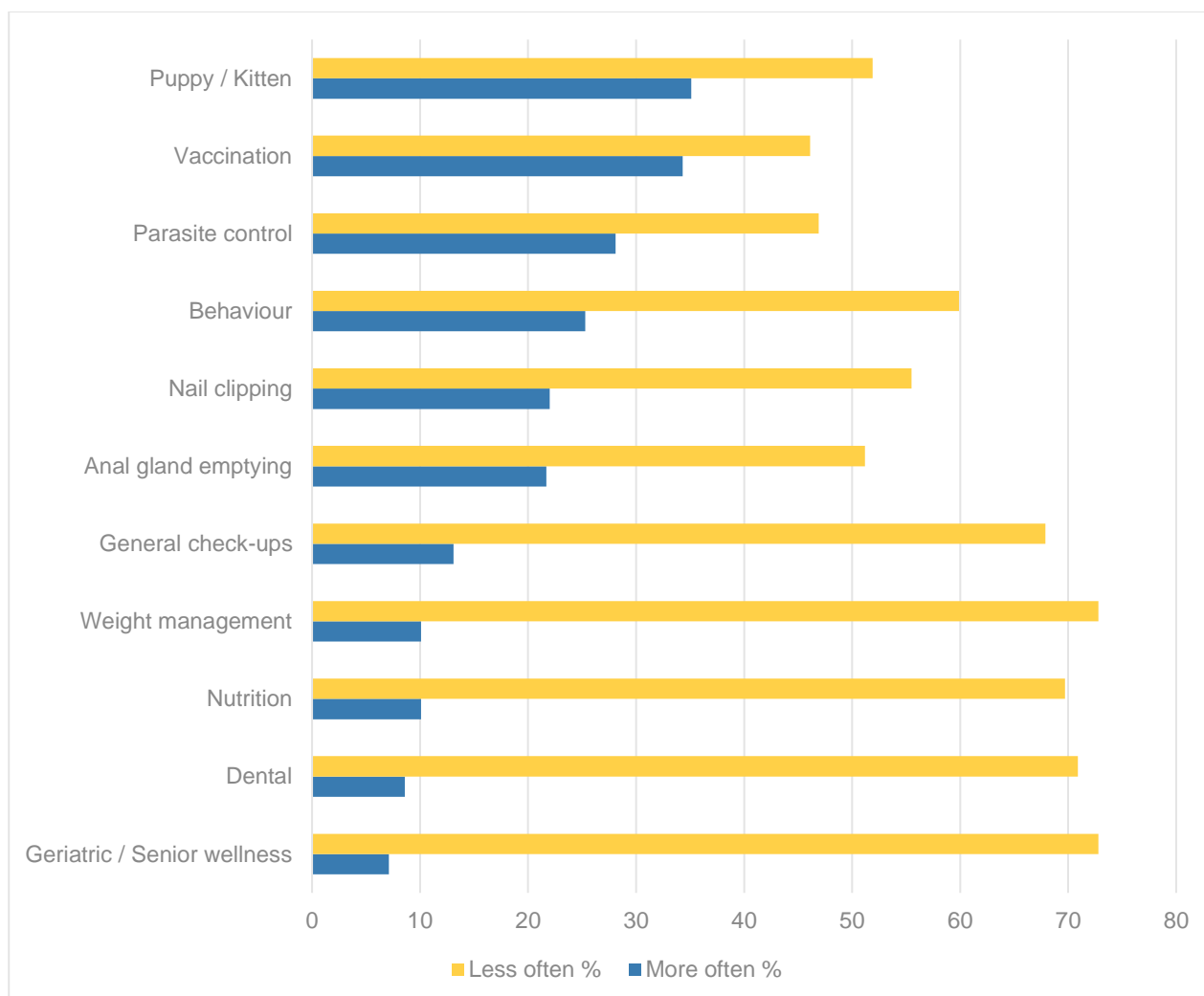
Respondents were presented with a list of 11 clinics and were asked, for each one that was relevant to them, to indicate whether they had participated in the clinic during the pandemic more often, less often, or at about the same frequency, compared to before the pandemic. Table 8 gives the results, which show that every type of clinic had a higher percentage of respondents saying the clinic had happened 'less often' than 'more often' and, for all but two types of clinic, over 50 per cent gave the 'less often' response. The clinics with the highest percentage of respondents selecting 'less often' were, in order: geriatric / senior wellness, weight management and dental. By contrast, the clinics with the highest percentage selecting either 'more often' or 'about the same' were: vaccination, parasite control, anal gland emptying and puppy / kitten. Figure 9 presents the 'more than' and 'less than' percentages graphically.

Table 7 Changed role of VNs: Clinics undertaken during the pandemic

Clinic	No.	More often %	Less often %	About same %
Nutrition	2157	10.1	69.7	20.2
Dental	2108	8.6	70.9	20.4
Puppy / Kitten	2141	35.1	51.9	13.0
Vaccination	2166	34.3	46.1	19.6
Geriatric / Senior wellness	2063	7.1	72.8	20.1
General check-ups	2122	13.1	67.9	19.0
Weight management	2152	10.1	72.8	17.1
Behaviour	2096	25.3	59.9	14.7
Parasite control	2196	28.1	46.9	25.0
Nail clipping	2231	22.0	55.5	22.5
Anal gland emptying	2179	21.7	51.2	27.1

Source: RCVS Covid-19 impact survey 2021

Figure 9 VN clinics during the pandemic: percentage of respondents reporting they did each clinic more often / less often than before the start of lockdown on 23 March 2020



Source: RCVS Covid-19 impact survey 2021

Changes in the provision of expertise

Respondents were presented with a list of 16 expertise areas and asked, for each one that was relevant to them, to indicate whether they had provided this expertise during the pandemic more often, less often, or at about the same frequency, compared to before the pandemic. Table 9 presents the results, and shows a somewhat mixed picture, in that a small number of expertise areas seem, on average, to have been provided more often than before the pandemic. This is most notable for expertise in emergency / critical care, which was provided 'more often' by over half (52.9%) of respondents; in addition, management and parasite control have a greater percentage saying 'more often' than 'less often', while anaesthesia is fairly equally balanced. However, some areas of expertise were provided much less often, notably weight management, physiotherapy / hydrotherapy, general / referral nurse clinics, nutrition / diabetes, dentistry and dermatology; for all these areas, over 50 per cent of respondents selected 'less often'. Figure 10 presents the 'more than' and 'less than' percentages graphically.

Table 8 Changed role of VNs: Expertise provision during the pandemic

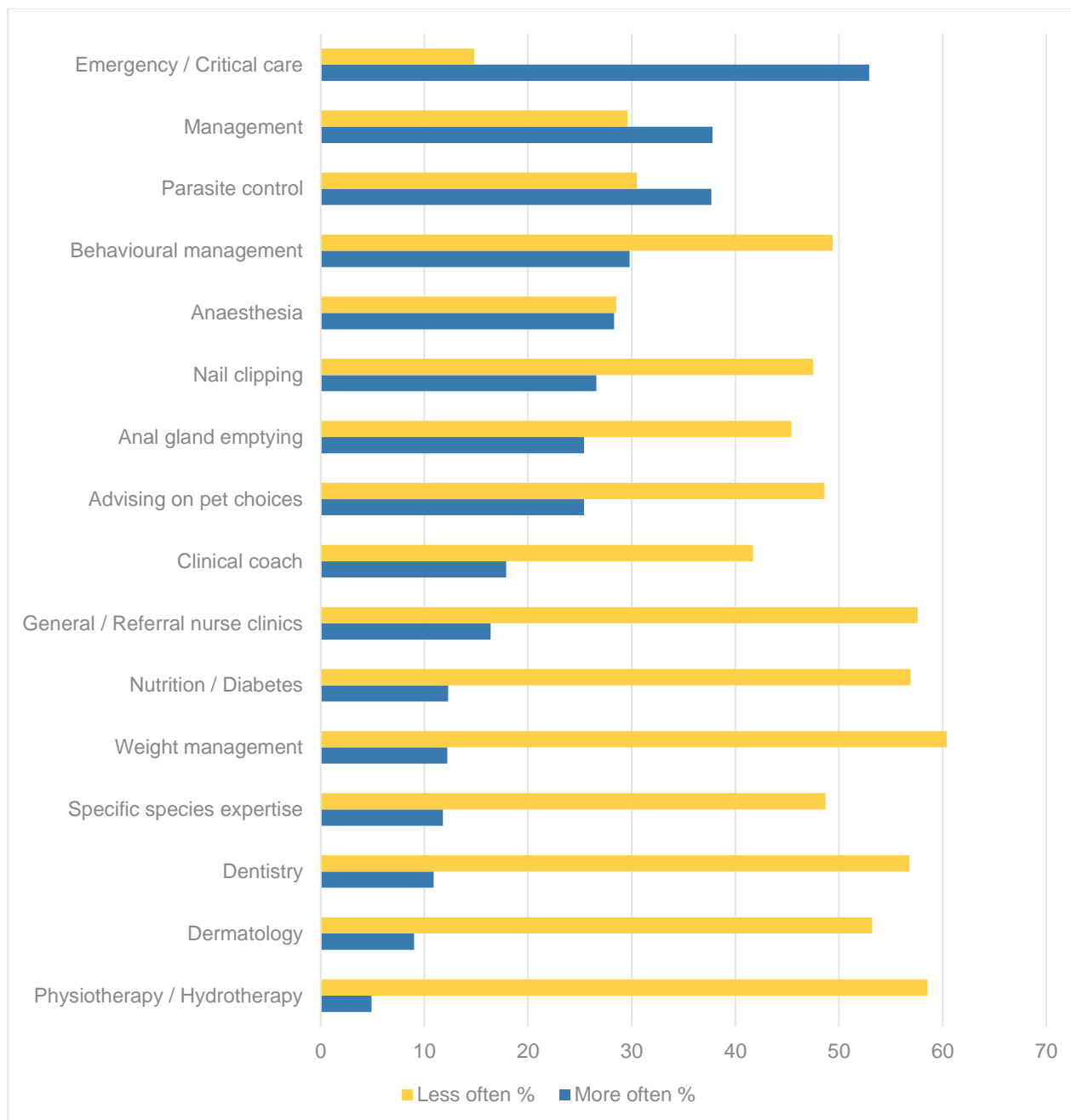
Expertise	No.	More often %	Less often %	About same %
Clinical coach	1730	17.9	41.7	40.4
Nutrition / Diabetes	1913	12.3	56.9	30.8
Behavioural management	1878	29.8	49.4	20.8
Dentistry	1884	10.9	56.8	32.3
Emergency / Critical care	2184	52.9	14.8	32.3
General / Referral nurse clinics	1880	16.4	57.6	26.0
Management	1793	37.8	29.6	32.7
Specific species expertise	1565	11.8	48.7	39.6
Dermatology	1506	9.0	53.2	37.8
Physiotherapy / Hydrotherapy	1449	4.9	58.5	36.6
Anaesthesia	2109	28.3	28.5	43.1
Weight management	1906	12.2	60.4	27.4
Advising on pet choices	1725	25.4	48.6	26.0
Parasite control	2055	37.7	30.5	31.8
Nail clipping	2088	26.6	47.5	25.9
Anal gland emptying	2008	25.4	45.4	29.2

Source: RCVS Covid-19 impact survey 2021

All VNs working within clinical veterinary practice, regardless of when they had qualified, were asked if, during the pandemic, on the whole their role had got better, stayed about the same, or got worse. Over half (56.6%) said their role had got worse, with one-third (33%) saying it had stayed about the same, and a relatively low 10.4 per cent thinking it had got better.

A final role-related question asked if, taking all things into consideration, respondents thought they would still be in the veterinary nurse profession in 12 months' time. Despite the relatively high percentage feeling their role had got worse in response to the previous question, almost two-thirds said they would definitely (34.4%) or probably (29.9%) still be in the profession. However, 23.2 per cent were unsure, while 8.3 per cent said 'probably not' and 4.2 per cent 'definitely not'.

Figure 10 VN expertise provision during the pandemic: percentage of respondents reporting they provided each type of expertise more often / less often than before the start of lockdown on 23 March 2020



Source: RCVS Covid-19 impact survey 2021

General views and experiences of all VN respondents

The final section of the questionnaire asked about general views about, and experiences of, the pandemic; all respondents, regardless of their employment status and (if working) their area of work within or outside the profession.

Volunteering

- A relatively small number of respondents (2.3%, or 76 individuals) had worked with the NHS or NHS Scotland during the pandemic, either paid or unpaid.
 - Of these, 18.4 per cent had worked as a vaccinator, 14.5 per cent as a volunteer for the vaccine programme but not doing vaccinations, and 67.1 per cent in an 'other' capacity.
- A slightly larger number of respondents (3.7%, or 123 individuals) had carried out other voluntary work as part of the pandemic effort.
 - These respondents were asked for more details about their voluntary work. The majority described volunteering to help their local community, in particular shopping and delivering medication to people who were elderly and / or vulnerable, and assisting with food banks.
- **Compared to VSs:** The percentages of VS respondents carrying out voluntary work during the pandemic was slightly higher: 3.3 per cent had done voluntary work for the NHS and 5.3 per cent had done other voluntary work.

Influence on staying / leaving intentions

- For those respondents who were currently in the VN profession, almost two-thirds (65.3%) said the pandemic had not in any way influenced their decision to stay in, or leave, the profession.
- **Compared to VSs:** The percentage of VS respondents saying the pandemic had not in any way influenced their decision to stay in, or leave, the profession was higher, at 75.1 per cent.

Attitudes

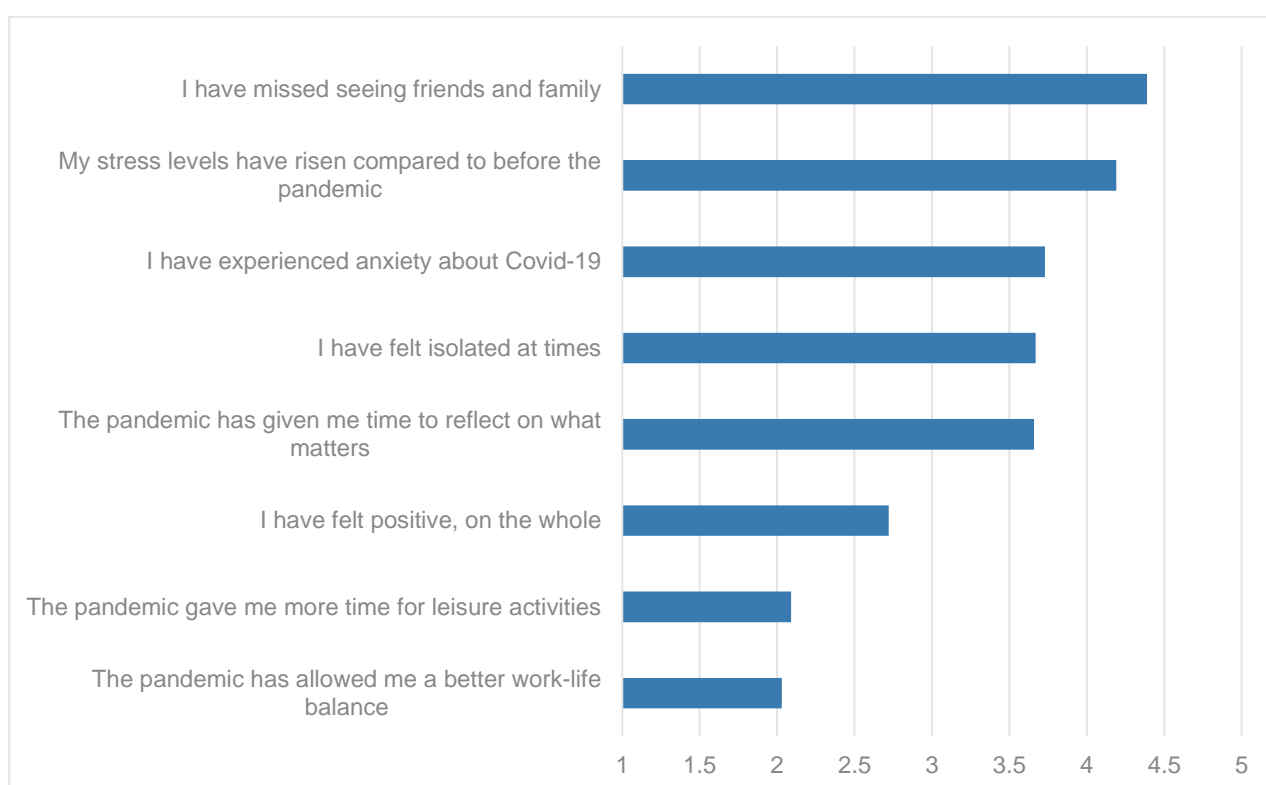
Respondents were asked to give their views about eight statements relating to their personal experiences of the pandemic, using a five-point response scale ranging from one (strongly disagree) to five (strongly agree), with three (neither agree nor disagree) as the midpoint. An additional 'not applicable' column was included for respondents who did not find the statement relevant to them.

Figure 11 gives the average (mean) scores for each statement overall, and shows that, overall, the pandemic was not a positive experience for respondents. The strongest agreement related to missing seeing friends and family; in addition, there was overall clear disagreement about the pandemic giving more time for leisure activities or allowing a better work-life balance. Respondents also agreed overall that their stress levels had risen, they had experienced anxiety about Covid-19, and they had felt isolated at times; and the mean score for feeling positive, on the whole, was below the midpoint, indicating that VN, on average, did not feel positive during the pandemic.

Compared to VSs: There is strong agreement between VSs and VNs, in that both groups rated each statement in a similar way; the only difference in order is that VNs

had 'I have experienced anxiety about Covid-19' as the statement in overall third-scoring place and 'I have felt isolated at times' in fourth place, while for VSs these two statements were in fourth and third places respectively. However, it is also noteworthy that VSs, on average, were somewhat more positive, taking the set of statements together, than VNs; in particular they expressed slightly lower levels of agreement to the statements about stress levels and Covid-19 anxiety, and were neutral about feeling positive while VNs were negative.

Figure 11 All VN respondents: Personal experiences of the pandemic – average (mean) scores for attitude statements



Source: RCVS Covid-19 impact survey 2021

Final thoughts

- When asked how they felt about the future of the veterinary nursing profession now that the UK was emerging from the pandemic, respondents were overall fairly equally balanced around optimism and pessimism, although with a slight lean towards pessimism.
 - Optimism was expressed by 31.6 per cent (with 4.2% selecting 'very optimistic' and 27.4% 'optimistic').
 - A further 34 per cent were 'neither optimistic nor pessimistic'.
 - Finally, 34.3 per cent expressed pessimism (with 25.2% selecting 'pessimistic' and 9.1% 'very pessimistic').

- A somewhat gloomy picture also emerged when respondents were asked to reflect on the past 17 months and give a view on whether there had been some positive outcomes for the veterinary nursing profession.
 - A relatively low 17.3 per cent said 'yes', but a notably larger 41.4 per cent opted for 'no'; the remaining 41.3 per cent said they were uncertain.
 - When asked for more details, a minority of respondents mentioned positive things such as increased team spirit, working together, adaptability, taking on new tasks, and being able to provide a good service to clients despite all the difficulties. However, the majority of comments pointed out negative things, such as difficult clients, feeling under immense pressure, seeing colleagues being stressed and burnt out, having an unsympathetic employer that did not care about their safety and wellbeing, and feeling under-appreciated and under-valued. Some respondents merely comments that they 'couldn't think of any positives', while others said they were thinking of leaving (and in some cases, had already left).
- **Compared to VSs:** VSs were more pessimistic overall about their profession, with 29.4 per cent feeling optimistic but 40.7 pessimistic. However, they were slightly more likely to think there had been some positive outcomes for their profession, with 25.4 per cent saying 'yes' and 39.2 per cent opting for 'no'.
- When asked to describe the downsides of the pandemic for the veterinary nurse profession:
 - Many comments related to staff being pushed to breaking point and being exhausted, to the extent that VNs had left or were planning to leave; this was exacerbating the existing staff shortages and was causing concerns about supervising student VNs.
 - The adverse impact on mental health was mentioned frequently.
 - Some comments indicated that things were made worse because of the way that VNs were side-lined, undervalued and unrecognised, and thought that the pandemic had made their second-class status even more obvious.
 - Many respondents spoke of clients being excessively demanding and abusive, and were frustrated at the way that people had acquired pets easily but did not know how, and could not afford, to look after them.
- Respondents were asked what should be done differently in the future if another pandemic occurred, to enable to profession to respond better.
 - A frequently-expressed view was that VNs should have been classed at key workers straight away; others added that their children should have been allowed to attend school, and that employees who were forced to take time off to look after / home-school their children should have been paid while doing this instead of having to take unpaid leave.
 - A better-educated public was also considered important, to prevent excessive and unreasonable demands, and to increase understanding of the contribution the VN profession makes; however, some comments suggested that no amount of education and information would succeed in getting the public to recognise the

contribution of VNs. Some respondents suggested that there should be restrictions on dog ownership.

- A common theme was that practices were under-staffed, and that increased numbers of VNs were needed; there was a view that better pay, better training, and a career structure, would help attract more people into veterinary nursing.
 - Some respondents thought that better guidance from the Government and the RCVS might improve the situation if a pandemic happened again, although some also pointed out that they were reliant on their employers to follow the guidance.
 - Other respondents felt the veterinary profession would be better prepared if another pandemic occurred, having had the experience of this one, and having learnt a lot about being adaptable and resilient.
- Finally, respondents were asked to share any further observations or experiences about the impact of the pandemic on them personally or on the veterinary profession.
- Those who shared personal impacts spoke of: having to put their families first, despite (in some cases) this having a detrimental impact on their careers; anxieties about mental health; feeling isolated, if, for example, on maternity leave; and above all feeling disillusioned, unrecognised, and unvalued as a profession. As one respondent put it, 'We've been on the frontline 24 hours a day throughout the pandemic – where is our recognition and our 3% pay rise?'. A frequent theme was losing enjoyment of the role, and questioning whether they should continue as a VN. A much smaller number have had some positive personal experiences, speaking of aspects such as gaining greater confidence and feeling proud of themselves and the way they had coped.
 - Respondents who shared impacts on the VN profession tended to focus on the more negative things that have already been mentioned, around VNs being overworked, very stressed, working extremely hard for low pay, and feeling undervalued and unrecognised by the public, by animal owners, by their employer and sometimes by VSs. Some referred to staff shortages and noted the difficulty in recruitment. A very small number of comments, however, were more positive in tone, emphasising how well the team had adapted, despite all the problems and hard work, and feeling proud of their profession.