

Impact of the Covid-19 Pandemic on Veterinary Surgeons

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

Dilys Robinson, Beth Mason and Kate Alexander

Institute for Employment Studies

IES is an independent, apolitical, international centre of research and consultancy in public employment policy and HR management. It works closely with employers in all sectors, government departments, agencies, professional bodies and associations. IES is a focus of knowledge and practical experience in employment and training policy, the operation of labour markets, and HR planning and development. IES is a not-for-profit organisation.

Acknowledgements

The authors are indebted to the many veterinary surgeons who took time from their busy schedules to tell us about their experiences during the Covid-19 pandemic in 2020 and 2021, and give us their views about the pandemic's impact on them, their work, and their profession.

Institute for Employment Studies
City Gate
185 Dyke Road
Brighton BN3 1TL
UK

Telephone: +44 (0)1273 763400
Email: askIES@employment-studies.co.uk
Website: www.employment-studies.co.uk

Copyright © 2021 Institute for Employment Studies

IES project code: 6069

Contents

Summary of findings	1
The survey	1
Respondent profile	1
<i>Personal</i>	1
<i>Work</i>	2
Working as a VS during the pandemic	3
<i>Personal experiences of working as a VS</i>	7
<i>Additional experiences of VSs working within clinical veterinary practice</i>	19
General views and experiences of all VS respondents.....	28

Summary of findings

The survey

The 2021 online survey aimed to capture the experiences of veterinary surgeons (VSs) in the UK during the Covid-19 pandemic, with particular emphasis on the impact of the pandemic on VSs' 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 22 July 2021, via email invitations sent to 28,718 VSs in all RCVS categories apart from 'overseas practising' and 'Southern Irish', and closed on 24 August 2021, following three reminders to those who had not yet submitted their completed questionnaires. The final response rate was 22.3 per cent for completed and submitted questionnaires, rising to 27.4 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 (VNs) also took place within a similar time-frame; the response rate for the VN survey was somewhat lower, at 16.6 per cent for completed and submitted responses, and 23.5 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

- **Gender, age and ethnicity:** Two-thirds (66.7%) of respondents were female and almost one-third (32.3%) male, with the rest preferring not to say (0.8%) or preferring to self-describe (0.1%). Ages ranged from 22 to 100, with an average (mean) age of 43.3 and a median (middle value) age of 40.5. The large majority (93.5%) described their ethnicity as white, with others belonging to a black or minority ethnic (BAME) group (4.3%) or preferring not to say (2.1%). Further analysis shows:
 - Overall, women were younger than men, having an average (mean) age of 40.4 compared to 49.7 for men.
 - Those in a BAME group were younger than White respondents: 39.4 and 43.5 respectively.
- **Disabilities or medical conditions:** 4.9 per cent said they had a physical disability/condition, while 3.3 per cent said they had a mental health disability/condition.

- **Dependants:** Over one-third (35.8%) had dependent children living with them; the ages of their children were under five (36.2%), five to eleven (46.4%), 12 to 16 (29.9%) and over 16 (21.6%). A much lower 4.7 per cent said they provided care to an adult dependant.
- The **qualification year** of respondents ranged from 1940 to 2021.
- **Current membership category:** The large majority of respondents gave their current membership category as 'UK-practising', with 3.8 per cent saying 'Non-practising', 2.3 per cent (non-practising (70 years plus) and 0.1 per cent 'Temporary registration'.
 - For most respondents (95.6%), their membership category had not changed since the start of the first UK lockdown on 23 March 2020.
 - However, 4.4 per cent had changed their membership category. Of these, almost all had changed from the three categories of 'Non-practising', 'UK-practising' or 'Practising outside the UK'.

Compared to VNs: The main differences when compared to VNs are that a considerably higher 96.5 per cent of VNs were female, and VN respondents were notably younger, with an average (mean) age of 36.8. In addition, VNs were also slightly less likely to be from a BAME group, with 96.8 per cent saying they were white; and a somewhat higher percentage of VNs than VSs reported physical disabilities/medical conditions (7.2%) and mental health disabilities/medical conditions (6.2%). The earliest reported year of qualification for VNs was 1961.

Work

- The large majority (91.6%) of VS respondents reported that their main current employment category was **working within the veterinary profession**, either full time (66.4%), part time (24.9%) or in a voluntary capacity (0.3%).
 - The rest were either retired (4.4%), taking a career break (1.9%), working outside the profession (1.5%) or unemployed (0.7%).
 - Of the relatively small number currently working outside the profession, around one-third either did some work as a VS within the profession in addition to their main employment, or had worked as a VS within the profession at some point since 23 March 2020.

Compared to VNs: The only major difference is that a notably lower percentage of VNs were retired (0.4%).

Working as a VS during the pandemic

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

- **Location:** The majority (80.8%) of those who worked within the profession during the pandemic gave their work location as England, with 9.5 per cent working in Scotland, 5.3 per cent in Wales, and 2.7 per cent in Northern Ireland. The remaining 1.6 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 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 (42.7%) or a mixture of urban and rural (36.4%), with 20.9 per cent working in a rural area. Further analysis shows:
 - There is a correlation between gender and type of location, in that a higher percentage of women (43.6%) than men (40.8%) worked in an urban area, while a lower percentage of women (19.9%) than men (23.3%) worked in a rural area; the percentages working in a mixed urban and rural area were similar.
- The majority of those working as a VS during the pandemic (84.8%) worked **within clinical veterinary practice**, with the remaining 15.2 per cent working **outside clinical veterinary practice**.
 - Further analysis shows that women were more likely to be working within clinical veterinary practice than men (86.2% and 82.6% respectively).
 - Those working within clinical practice were older than those working outside, with an average age of 41.5 and 46.9 respectively.

Compared to VNs: VNs were more likely to be working in England (86.1%), and were less likely to be working in a rural location (17.3%). In addition, a higher percentage of VNs (88.8%) worked within clinical veterinary practice.

- **Working outside clinical veterinary practice:** Table 1 shows the organisations selected by those VS respondents who worked outside clinical veterinary practice.

Table 1 Organisations of VS respondents working outside clinical veterinary practice

Organisation	No.	%
Commerce and industry	168	19.0
Animal and Plant Health Agency (APHA)	120	13.6
Veterinary school	101	11.4
Food Standards Agency (FSA)	80	9.0
Meat hygiene / official controls	60	6.8
Other university / education establishment	55	6.2
Charity or trust	55	6.2
Department of Agriculture, Environment and Rural Affairs in Northern Ireland (DAERA)	44	4.9
Department for Food and Rural Affairs (DEFRA)	43	4.9
Portal (contracted or employed)	15	1.7
Veterinary nursing college	13	1.5
Conservation	11	1.2
Other listed organisations selected by fewer than ten respondents	38	4.3
Respondents selecting 'Other'	221	25.0
Total	1024	115.7

Source: RCVS Covid-19 impact survey 2021

Note: The total is greater than 100 per cent because some respondents worked for more than one organisation outside clinical veterinary practice.

Compared to VNs: VNs were less likely to work outside clinical veterinary practice (11.2% compared to 15.2% for VSs), and worked for different types of organisations (mainly a veterinary nursing college, commerce or industry, a charity or trust, or another university / education establishment).

- Table 2 shows, for those **VS respondents working within clinical veterinary practice**, their **type of practice** (or main practice if they worked for more than one). It is notable that over two-thirds (69.7%) of respondents worked in a small-animal-only practice.
 - Further analysis shows that women were more likely than men to work in a small-animal-only practice: 72.6 per cent of women compared to 62.9 per cent of men.

Table 2 VSs working within clinical veterinary practice: type of practice

Practice type	No.	%
Small-animal-only practice	3951	69.7
Mixed practice	620	10.9
Referral practice / consultancy	403	7.1
Equine-only practice	280	4.9
Farm-animal-only practice	185	3.3
Provider of out-of-hours services only	99	1.7
Telemedicine	33	0.6
Zoo / wildlife	18	0.3
Other first opinion practice	17	0.3
Other	62	1.1
Total	5668	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.
3. 'Telemedicine' comprises telemedicine vet-to-client, telemedicine vet-to-vet, and tele-triage.

- Table 3 gives respondents' **position within practice**, and shows that over half (58.0%) of respondents were employed assistants.

Table 3 VSs working within clinical veterinary practice: position in practice

Position	No.	%
Employed assistant	3300	58.0
Director (of a limited company)	634	11.2
Locum (temporarily fulfilling duties of others during their absence, or to cover vacancies temporarily)	378	6.6
Sole principal	325	5.7
Independent veterinary service provider (providing services to practices as part of the usual rota)	185	3.3
Salaried partner	171	3.0
Joint venture partner (JVP)	122	2.1
Equity partner	110	1.9
Independent consultant / peripatetic specialist	66	1.2
Veterinary surgeon working as a veterinary nurse	19	0.3
Other	376	6.6
Total	5686	100

Source: RCVS Covid-19 impact survey 2021

- Almost half (48.5%) of those working in clinical veterinary practice said they did some work in the capacity of an **Official Veterinarian**.
- **Practice ownership structure:** Table 4 shows that just over half (53.0%) worked in a practice that was part of a corporate group or a joint venture with a corporate group.
 - Further analysis shows that a higher percentage of women than men worked in a practice that was part of a corporate group or a joint venture with a corporate group: 54.7 per cent of women compared to 49.4 per cent of men.

Table 4 VSs working within clinical veterinary practice: practice ownership structure

Ownership structure	No.	%
Part of a corporate group	2718	47.6
Independent, stand-alone practice (e.g. a partnership)	1861	32.6
Independent, stand-alone practice that is part of a larger group (with some shared centralised support functions)	352	6.2
Part of a joint venture with a corporate group	310	5.4
Veterinary school	170	3.0
Charity	146	2.6
Out-of-hours-only provider	66	1.2
Don't know / Other	82	1.4
Total	5705	100

Source: RCVS Covid-19 impact survey 2021

- **Providing 24/7 emergency cover:** A small minority (2.8%) of respondents worked for an out-of-hours provider. The other respondents fell broadly into two groups when asked how the practice provided emergency cover: 43.5 per cent used a dedicated out-of-hours provider, while 52.5 per cent covered its own emergency work, either using the practice's VSs or with locum help, or co-operated with other local practices. A small percentage used other methods (3.2%) or did not know (0.8%).
- **Size of practice:** When asked how many full time equivalent (FTE) VSs worked at the practice, responses ranged from zero to 500, with a median (middle value) of 4.2 and a mean of 7.5. The same question about VNs also yielded a very varied response, from zero to 700, with a median of 3.6 and a mean of 7.4.
 - Further analysis shows that 35.4 per cent of respondents worked in small practices (fewer than four FTE VSs), 48.1 per cent worked in medium-sized practices (between four and ten FTE VSs) and 16.5 per cent worked in large practices (greater than ten FTE VSs).
 - There was a relationship between age and size of practice, in that the average age of those in small practices was 43.6, compared to 40.6 for those in medium practices and 39.8 for those in large practices.

Compared to VNs: A higher percentage (75.7%) of VNs work for small-animal-only practices. In addition, VNs are more likely than VSs to work in a practice that was part of

a corporate group or a joint venture with a corporate group (59.1%); and a higher percentage (50.4%) of VNs said their practice used a dedicated out-of-hours provider for emergency cover.

Personal experiences of working as a VS

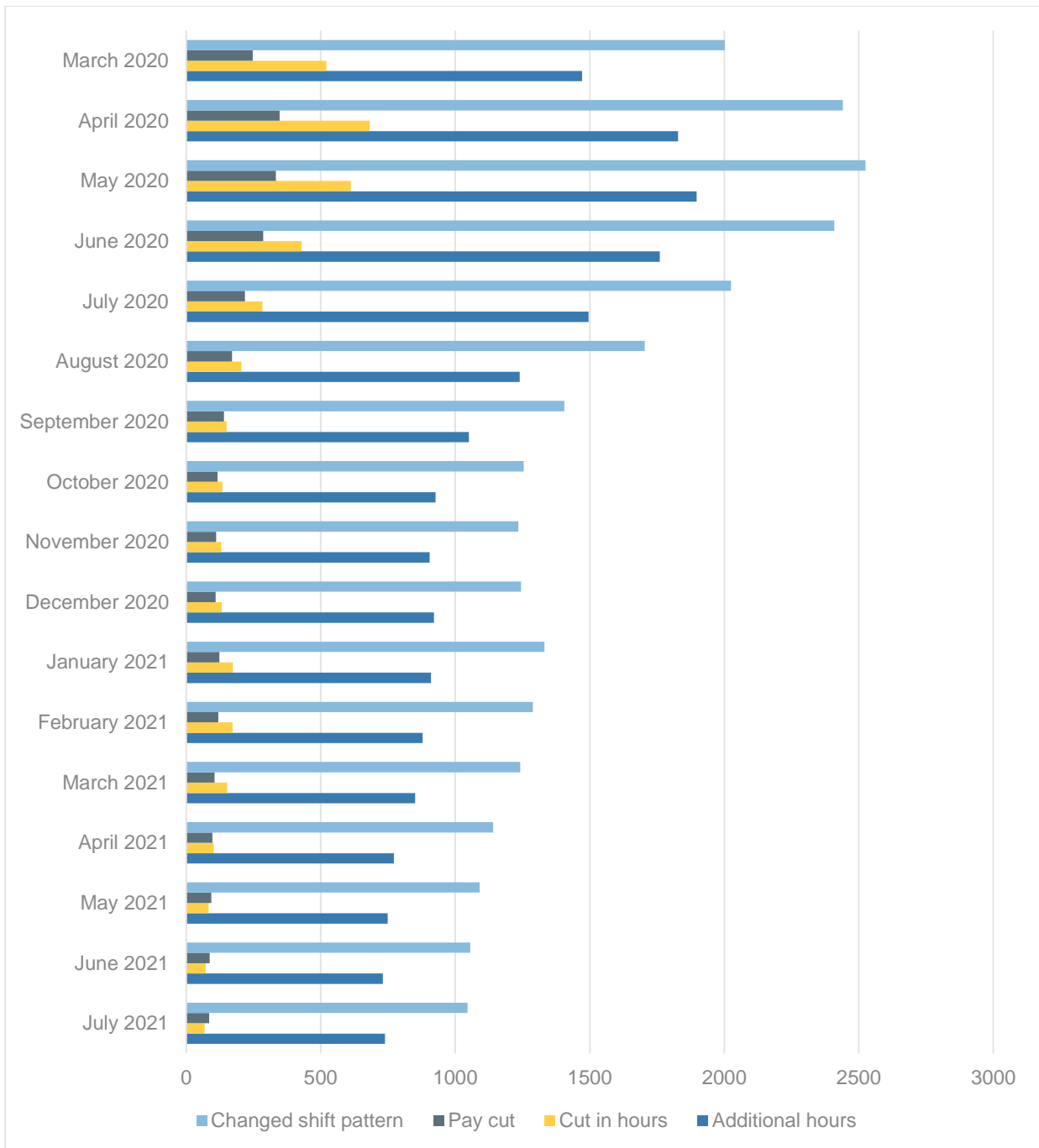
Changes in working hours, working patterns and pay

- During the pandemic, a fairly high 40.1 per cent said they had, at some point during the pandemic, had to work **additional hours** due to others being furloughed.
 - Of these, just over half (53%) were unpaid, or mostly unpaid, for these additional hours, while 36.4 per cent were paid / mostly paid and 10.6 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, April, June, July, March, August and September.
 - Those having to work additional hours were slightly younger, on average, than those who did not have to, having a mean age of 41.3 and 43.3 respectively.
- By contrast, a notably lower 14.1 per cent experienced a **cut in working hours**, not including a furlough arrangement.
 - Of these, 50.6 per cent said this happened just once, with the other 49.4 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 40.9 per cent and a mode (most commonly-occurring value) of 100, followed by 50.
 - Since the cut(s) in hours, 62.5 per cent experienced their hours returning to normal, and 20.1 per cent had an increase in hours compared to the pre-cut level; however, 9.4 per cent said their hours had increased, but not to the pre-cut level, while the hours of eight per cent had remained at the lower level.
 - Those working within clinical veterinary practice were more likely to have experienced an hours cut compared to those working as a VS outside clinical practice: 15.0 per cent and 8.9 per cent respectively.
 - A cut in hours was also more likely for those working in small practices (19.6%) compared to medium practices (12.9%) and large practices (9.6%).
- A small percentage of respondents (7.2%) reported that they had experienced a **pay cut** that was not related to a cut in hours.
 - Of these, 46.3 per cent said this happened just once, while 53.5 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, May, June, March and July.

- The percentage by which pay cut was from one to 100, with a median of 23.8 per cent and a mode of 20 per cent.
- Since the cut(s) in pay, 55.5 per cent experienced their pay returning to normal, and 13.9 per cent had an increase in pay compared to the pre-cut level; however, 11.2 per cent said their pay had increased, but not to the pre-cut level, while the pay of 19.4 per cent had remained at the lower level.
- Further analysis shows:
 - Those experiencing a pay cut were slightly older, on average, than those not experiencing a cut, having a mean age of 45.8 and 42.3 respectively.
 - Men (8.9%) were somewhat more likely than women (6.5%) to have experienced a pay cut.
 - Those working within clinical veterinary practice were more likely to have experienced a pay cut than those working as a VS outside clinical practice: 7.6 per cent and 5.0 per cent respectively.
 - Within clinical veterinary practice, pay cuts were experienced by a greater than average percentage for those working in small practices (9.8%) and independent, standalone practices (11.5%).
- Over half (57.1%) 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, 29.9 per cent did more weekend work, 27.0 had to work on weekdays more often, and 26.0 per cent did more evening work; 17.1 per cent reported other results (around half of those experiencing changes reported more than one result).
 - The majority (61.2%) of those experiencing changes did not welcome these, although 7.9 per cent did welcome them, and 30.9 per cent welcomed them to some extent.
 - The months during which respondents experienced changes in shift pattern were more evenly spread over the pandemic period March 2020 to July 2021 than seen for changes in hours and pay, although the peak months were again all in 2020. In order, these were May, April, June, July and March.
 - Further analysis shows:
 - Those experiencing a shift pattern change were slightly younger, on average, than those not experiencing a change, having a mean age of 41.3 and 43.9 respectively.
 - Women were more likely to have experienced a change in shift pattern than men: 59.6 per cent and 51.7 per cent respectively.
 - Those working within clinical veterinary practice were much more likely to have experienced a shift pattern change than those working as a VS outside: 61.6 per cent and 31 per cent respectively.

- Within clinical veterinary practice, those working in small-animal-only practices were significantly more likely than average to have experienced shift pattern changes (67.3%).
 - Those who had experienced shift pattern changes were notably less optimistic, overall, about the future of the profession; 24 per cent were optimistic and 48.8 per cent pessimistic, compared to those who had not experienced such changes: a higher 34.4 per cent of these respondents were optimistic and a lower 34.2 per cent pessimistic.
- Figure 1 presents the overall month-by-month picture of these changes in working hours, working pattern and pay.
- **Compared to VNs:** VNs were a little more likely to say they had to work additional hours, but were also notably more likely to have been paid for any additional work. VNs were also half as likely as VSs to have received a pay cut (3.6% of VN respondents). However, a higher percentage of VNs (66.6%) 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.

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



Source: RCVS Covid-19 impact survey 2021

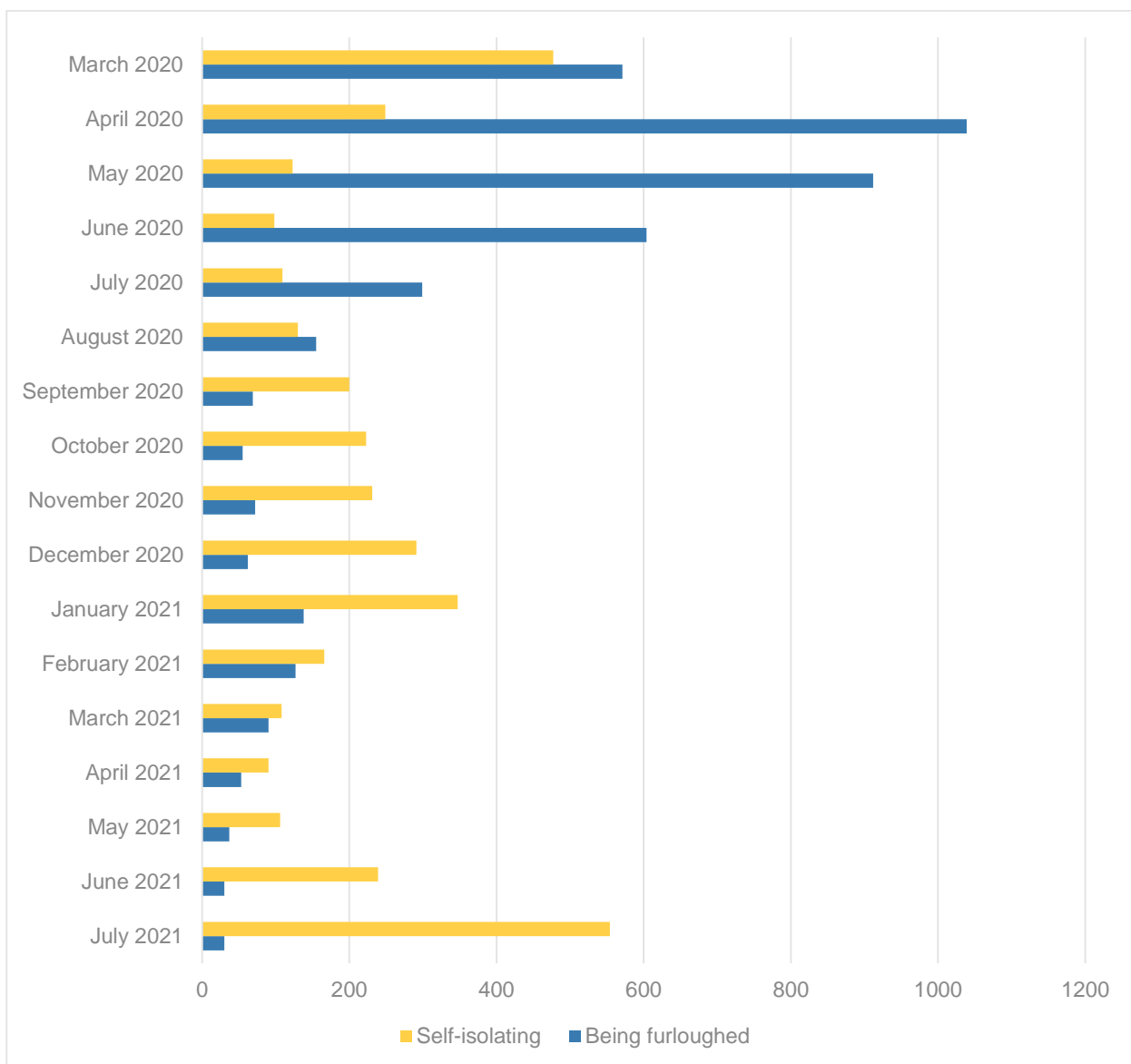
Redundancy, furlough, self-isolation and shielding

- During the pandemic, a low 2.0 per cent said they had, at some point during the pandemic, been **made redundant**.
 - The large majority (86.2%) of these reported just one redundancy, although 13.8 per cent had experienced more than one.

- 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 median of 7.5 and a mode of ten. Overall, this suggests that the majority of the relatively small number of VSSs who experienced redundancy found it fairly easy to find a new position.
- Almost one quarter (22.6%) of respondents had been **furloughed** at some point during the pandemic.
 - Of these, the large majority (83.1%) were furloughed just once, with 10.4 per cent experiencing two periods of furlough and 6.5 per cent more than two.
 - For most (76.6%) of those who were furloughed, their employer did not top up their salary; however, 13 per cent had their salary topped up to 100 per cent while 10.4 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.
 - Further analysis shows:
 - Women were notably more likely than men to have experienced being furloughed: 26.2 per cent of female respondents and 14.7 per cent of male respondents had been furloughed.
 - An above-average percentage of those with responsibilities for children (26.2%), or with both responsibilities for children and additional adult caring responsibilities (24.4%), were more likely than average to have experienced being furloughed.
 - Being furloughed was a notably more common experience for those who worked within clinical practice (24.3%) compared to VSSs working outside clinical practice (12.7%).
- Over one-third (38.1%) of respondents had needed to **self-isolate** at some point during the pandemic.
 - Around two-thirds (65.8%) of these had only experienced one period of self-isolation; however, 24 per cent had to self-isolate twice, 6.2 per cent three times, and 3.9 per cent four or more times.
 - The reasons for self-isolating varied considerably, with the most frequently-selected reasons being: symptoms but no confirmatory test (20.2%), a household member with symptoms but no confirmatory test (13.9%), and a positive test (13%).
 - Some respondents had self-isolated following contacts from Test and Trace (11.6% due to contact at work and 11.1% due to contact elsewhere or unknown contact). However, during the period when Government rules allowed it, 6.8 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, December 2020, April 2020, June 2021, November 2020 and October 2020.

- Those having to self-isolate were slightly younger, on average, than those who did not have to self-isolate, having a mean age of 40.3 and 43.8 respectively.
- A relatively low 6.5 per cent of respondents had needed to **shield** for health reasons at some point during the pandemic.
 - Of these, 44.9 per cent had been able to work remotely while shielding, but the remaining 55.1 per cent had not been able to do so.
- Figure 2 presents the overall month-by-month picture of furloughing and self-isolating experienced by respondents.

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



Source: RCVS Covid-19 impact survey 2021

Compared to VNs: A notably higher percentage of VNs (37.4%) experienced being furloughed at some point during the pandemic, and a slightly higher eight per cent of VNs had needed to shield. However, when shielding, a notably lower percentage of VNs (26.9%) 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, 28.2 per cent of respondents working as a VS had responsibility for school-age children.
 - Those with responsibility for school-age children were older, on average, than those without such responsibilities, having a mean age of 45.6 and 41.2 respectively.
 - Of those with responsibility for school-age children, over one quarter (27.5%) were able to use key worker status at some point to enable their children to attend school in person.
 - Only a small percentage of those able to use key worker status (8.4%) were single parents.
 - Of those who were not single parents, the majority (71.3%) 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: January 2021, February 2021, March 2021, June 2020 and July 2020.
- All those working as a VS 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 (82.1%) 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 and February 2021.
 - Those who had to provide home-schooling and / or supervise remote-learning were younger, on average, than those who did not, having a mean age of 45.0 and 48.4 respectively.
 - Women were more likely to have responsibility for home-schooling and / or supervising home-learning than men: 86.2 per cent and 73.9 per cent respectively.
 - 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 12.7 per cent rating their employer's support at zero but 15.7 per cent opting for the highest score of ten. Overall, the mean value was 6.5, the median value just under five and the modal value five.

-
- A relatively small number (6.3%) had to take on additional adult caring responsibilities at some point during the pandemic.
 - Those with additional adult care responsibilities were older, on average, than those who did not have such responsibilities, having a mean age of 48.5 and 42.1 respectively.
 - 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 16.7 per cent rating their employer's support at zero but 19.1 per cent opting for the highest score of ten. Again, the overall mean was 6.5, the median value was just under five and the mode was five.
 - 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 VNs:** A slightly lower percentage (25.7%) of VNs had responsibility for school age children; however, a higher percentage of these VNs (87.8%) had to provide home-schooling / supervise remote-learning. VNs were also more likely to have had additional adult caring responsibilities (8.7%). Otherwise, responses were fairly similar.

Working remotely

- Over one-third (37.8%) of VS 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' (30%) followed by 'not required to attend workplace in person' (21.3%) and 'self-isolating' (10%).
 - The peak months for working remotely were during the first few months of the pandemic in 2020. In order, these were: April, May, March, June and July. However, of those working remotely / from home, every month from March 2020 to July 2021 inclusive showed at least 40 per cent doing so (see figure 4).
 - Further analysis shows:
 - Those who had worked remotely were older, on average, than those who had not, having a mean age of 43.7 and 41.7 respectively.
 - Those with child dependants, adult dependants, or both types of dependant, were more likely to have worked remotely than those without any dependants: 40.8 per cent, 44.1 per cent, 41.9 per cent, and 35.6 per cent respectively.

- Respondents working outside clinical veterinary practice were notably more likely to have worked remotely than those within clinical veterinary practice: 66 per cent compared to 32.9 per cent.
 - Within clinical practice, those in small-animal-only practices were significantly less likely than average (27.5%) to have worked remotely.
 - There is a relationship with practice size, in that only 22.6 per cent of those working in small practices had worked remotely at some point, compared to 35.4 per cent of those in medium practices and 41.9 per cent of those in large practices.
- **Compared to VNs:** A notably lower percentage of VNs (23.5%) 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 VS respondents experiencing these, month by month

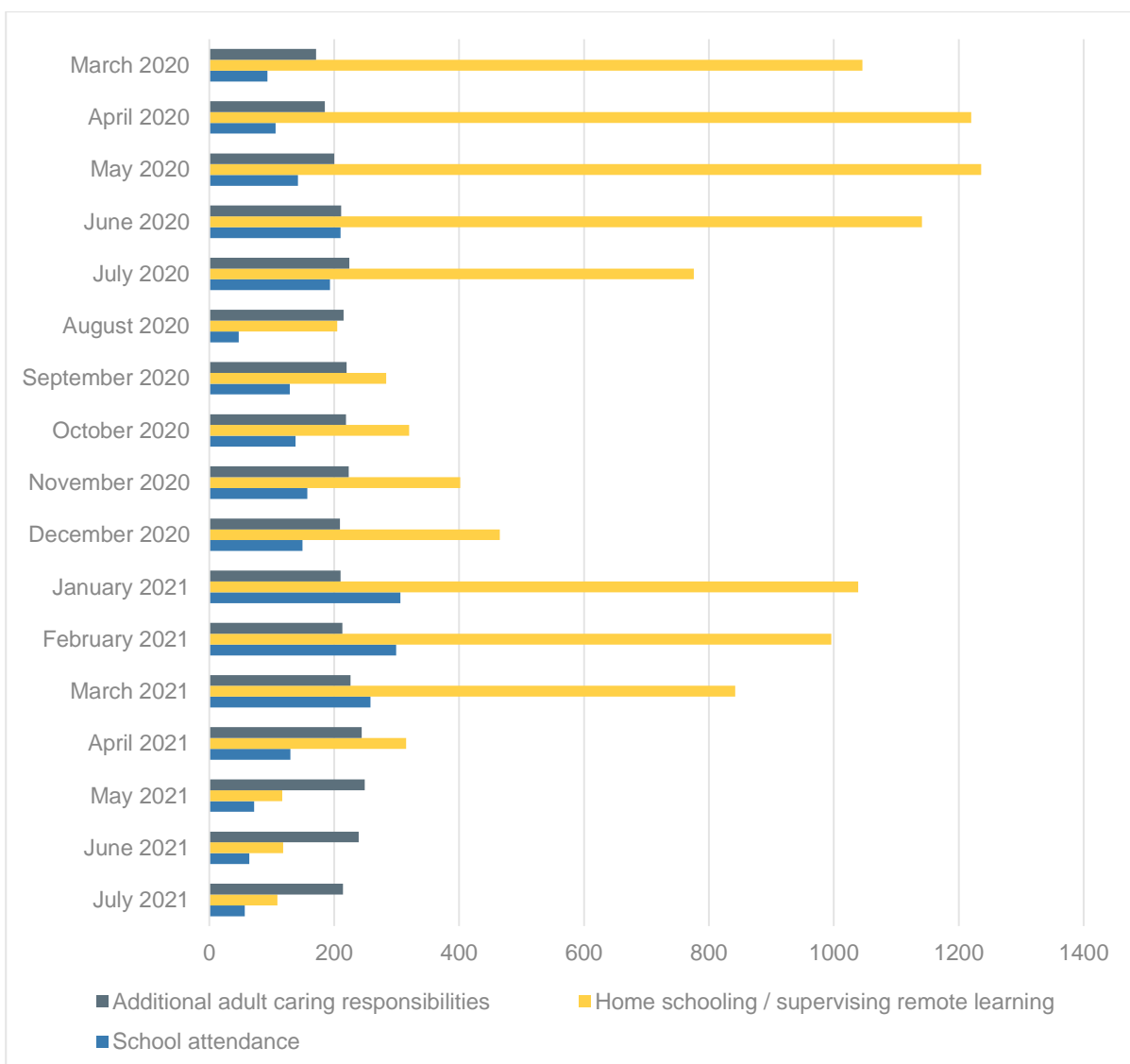
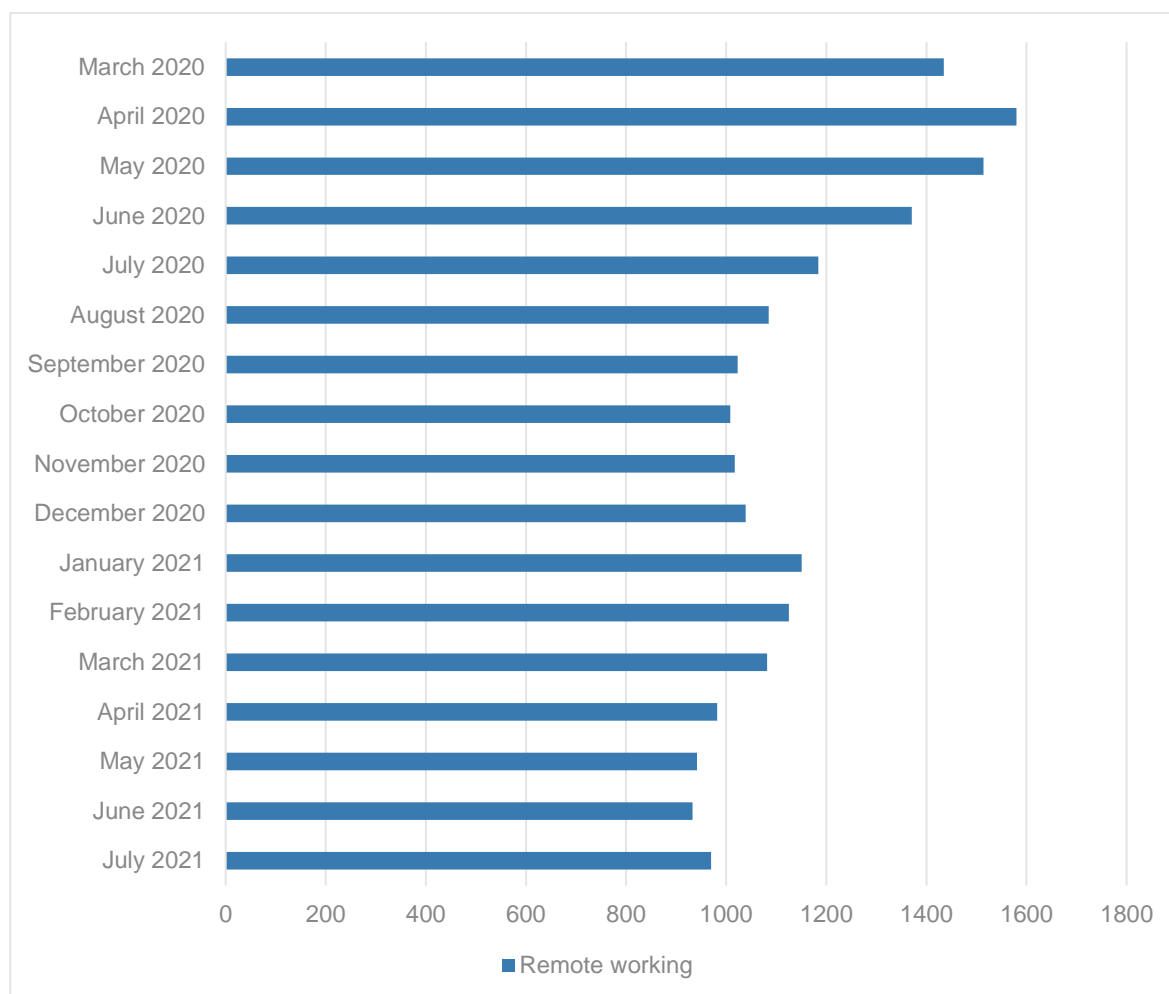


Figure 4 Remote working: number of VS respondents experiencing this, month by month

Source: RCVS Covid-19 impact survey 2021

Vaccination status

- At the time of the survey, most respondents working as a VS during the pandemic had received their first and second vaccination doses (81.2%) or had received their first dose and intended to have their second (14.5%).
 - Of the very small number (0.3%) who had received their first dose but were unlikely to have their second, the main reasons were a bad reaction or side effects, and anxieties about further side-effects.
 - Of those who had not received their first dose but did intend to get vaccinated, the main reason for not getting vaccinated yet, selected from the choices offered, was 'lack of time'. However, almost half (44.7%) of respondents in this position gave 'other' reasons.
 - Of the low 2.4 per cent of respondents who did not intend to get vaccinated, the main reasons were not believing it to be necessary (25.6%), anxiety about side-effects (24%), and not trusting the vaccine (23.1%).

- **Compared to VNs:** A notably lower percentage of VNs (69.1%) had received both their first and second vaccination doses, and a higher 3.6% did not intend to get vaccinated; of those not intending to get vaccinated, the most frequently-given reason was anxiety about side-effects.

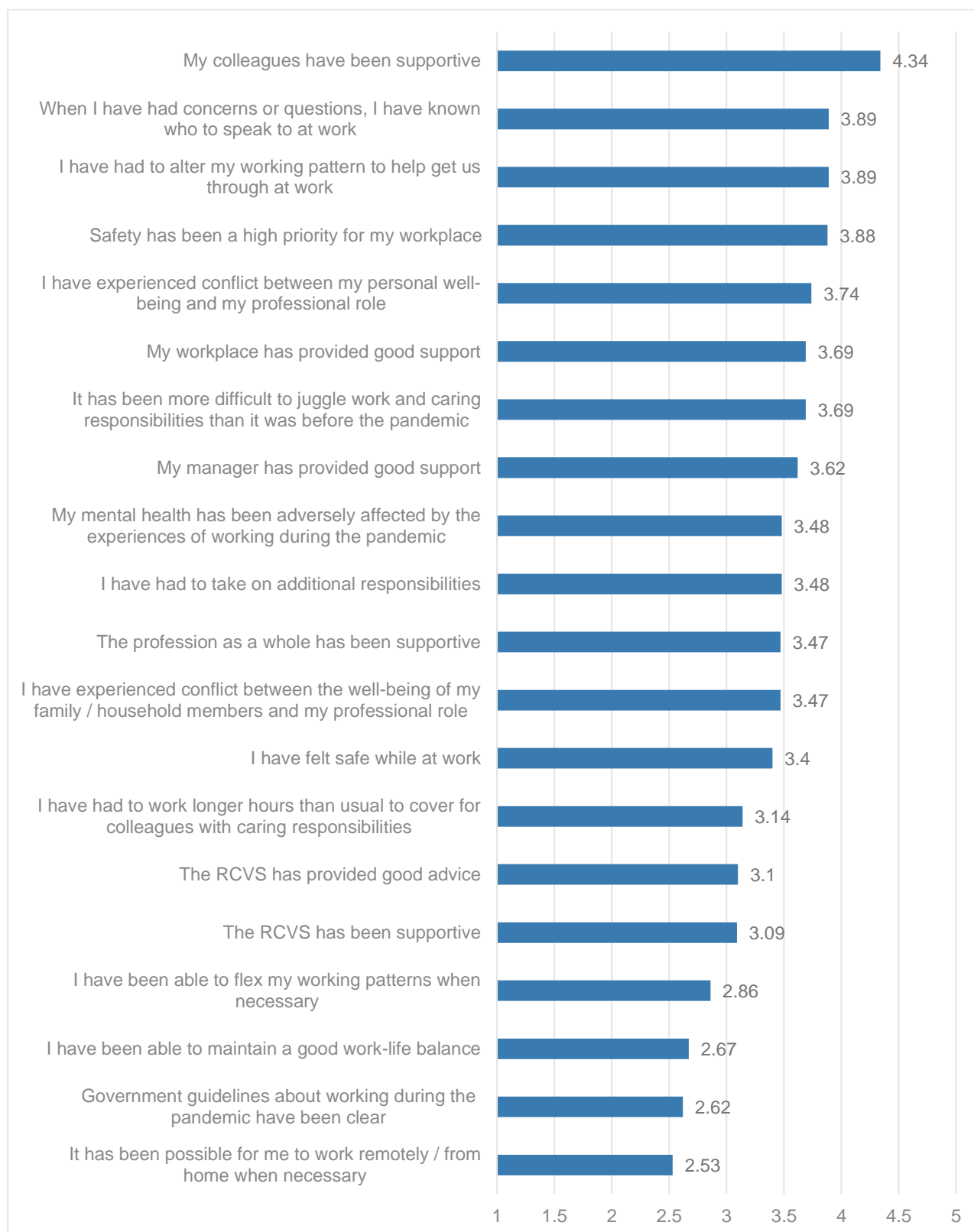
Attitudes

Respondents were asked to give their views about 20 statements relating to their work as a VS 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 (excluding the 'not applicable' responses), 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, on average respondents have clearly found things difficult at times, in that they have had to alter their working pattern and take on new responsibilities, have found it difficult to juggle work and caring responsibilities, and have found it hard to flex their working patterns, work remotely, or maintain a good work-life balance. It appears 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), and believe their mental health has been adversely affected by the experience of working during the pandemic.

Compared to VNs: 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, VNs were more positive about the advice and support provided by the RCVS, but less positive about the support given by the profession as a whole. In addition, VNs were more 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, VNs were notably more likely to disagree that they were able to work remotely when necessary.

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



Additional experiences of VSs working within clinical veterinary practice

At the start of this section of the questionnaire, VS 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 (82.2%) of those working as a VS during the pandemic had worked wholly within veterinary clinical practice throughout; however, an additional 8.4 per cent had done some veterinary clinical practice work during this period. The 9.3 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 90.7 per cent who had worked within veterinary clinical practice wholly or partially during the pandemic were asked further questions.

Table 5 Status of respondents working as a VS during the pandemic

Status	No.	%
Worked wholly within clinical veterinary practice throughout pandemic	5061	82.2
Did some work within clinical veterinary practice during pandemic, but main role outside clinical practice	281	4.6
Worked within veterinary clinical practice for part of pandemic but no longer doing so because now in a different role	107	1.7
Worked within veterinary clinical practice for part of pandemic but now retired	131	2.1
Total doing only some clinical veterinary practice during pandemic	519	8.4
Did no work within clinical veterinary practice during pandemic	575	9.3
Total	6155	100

Source: RCVS Covid-19 impact survey 2021

- **Compared to VNs:** A somewhat higher percentage of VNs worked within clinical veterinary practice throughout the pandemic (84.9%) or had done so at some point during the pandemic (10.6%).

Working as a locum

Of those who worked within clinical veterinary practice, 10.4 per cent (568 respondents) said that, before the pandemic, some of all of their income was 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 7.6, a median of 7.3 and a mode of ten. Overall, the response indicates that, although the majority of locums found it relatively easy to find work during the pandemic, a minority found it difficult; 18.4 per cent gave a score of zero, one or two.

Around two-thirds (65.9%) of those who had worked as a locum before the pandemic said they were still doing so. Of these, 23.2 per cent had experienced cuts in their daily or hourly rate compared to before the pandemic, although the majority (76.8%) did not. Overall, 39 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 31.4 per cent increased income.

- **Compared to VNs:** A lower percentage (6.3%) of VNs had worked as a locum before the pandemic, and of those, a lower percentage (55.3%) carried on doing so during the pandemic. Those VNs who continued with locum work found it somewhat more difficult to find work, in that the mean score of ease / difficulty was lower, at 6.9, and 25 per cent scored it as zero, one or two. However, a slightly lower percentage (20%) of VNs experienced cuts in their daily or hourly rate.

Remote consulting and remote prescribing

All VS respondents who worked wholly or partly within clinical practice during the pandemic were asked about remote consultations and remote prescribing. Around two-thirds (68.2%) had personally carried out remote consultations, while slightly more (71.5%) had personally carried out remote prescribing. Table 6 gives a breakdown of the categories of animals seen and / or prescribed for remotely, and shows that mostly, remote consultations and remote prescriptions were for animals known to the VS and/or to the practice, or referred for specialist advice. It also shows that, for completely new animals, remote consulting was more frequent than remote prescribing. On average, each VS respondent selected three of the categories of animals for remote consulting, and slightly under three for remote prescribing.

Table 6 Remote consulting and prescribing during the pandemic

Types of animals	Remote consultations: no. respondents	Remote consultations: % respondents	Remote prescriptions: no. respondents	Remote prescriptions: % respondents
Animals known to you personally: existing condition	2955	80	3352	87
Animals known to you personally: new condition	2761	74.8	2786	72.3
Animals known to the practice, but not to you	3004	81.4	3034	78.7
Animals known to another veterinary practice, referred to you for specialist advice	400	10.8	222	5.8
Animals from another veterinary practice known to your practice, that was temporarily or permanently closed due to the pandemic	732	19.8	517	13.4
Animals not previously known to you, your practice or another practice known to you (i.e. completely new animals)	1200	32.5	691	17.9
Totals	11052	299.3	10602	275.1

Source: RCVS Covid-19 impact survey 2021

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

- The peak months for carrying out remote consultations were during the first six months of the pandemic in 2020. In order, these were: April, May, June, March, July and August; from February 2021 onwards, the numbers start to decline fairly quickly.
- Similarly, the first six months of the pandemic in 2020 saw the highest number of VSs carrying out remote prescribing. In order, these were: May, April, June, July, March and August; From February 2021 onwards, the numbers started to decline, particularly from April 2021.
- Further analysis shows:

- A somewhat higher percentage of women (69.5%) than men (65.5%) had carried out remote consulting.
 - Similarly, a higher percentage of women (72.4%) than men (65.3%) had carried out remote prescribing.
 - Size of practice makes a difference, in that 71.6 per cent of those working for a small practice, and 74.6 per cent of those working for a medium practice, had carried out remote consultations, compared to a lower 62.9 per cent of those working for a large practice.
 - A similar picture applies for remote prescribing, with 75.4 per cent of those in small practices and 80.3 per cent of those in medium practices carrying out remote prescribing at some point, compared to a lower 65.3 per cent in large practices.
 - Those working in a small-animal-only practice were notably more likely than average to have carried out remote consultations (75.6%) and remote prescribing (80.6%).
- **Compared to VNs:** It is not possible to provide direct comparisons here, because firstly VNs gave advice remotely rather than providing consultations, and secondly only VNs with Suitably Qualified Person (SQP) status were able to prescribe remotely. However, it is apparent that a notably lower percentage of VNs (53.3%) provided advice remotely in comparison to VSs who carried out remote consultations (68.2%). In addition, a higher percentage of VNs (47.2%) provided advice relating to completely new animals.

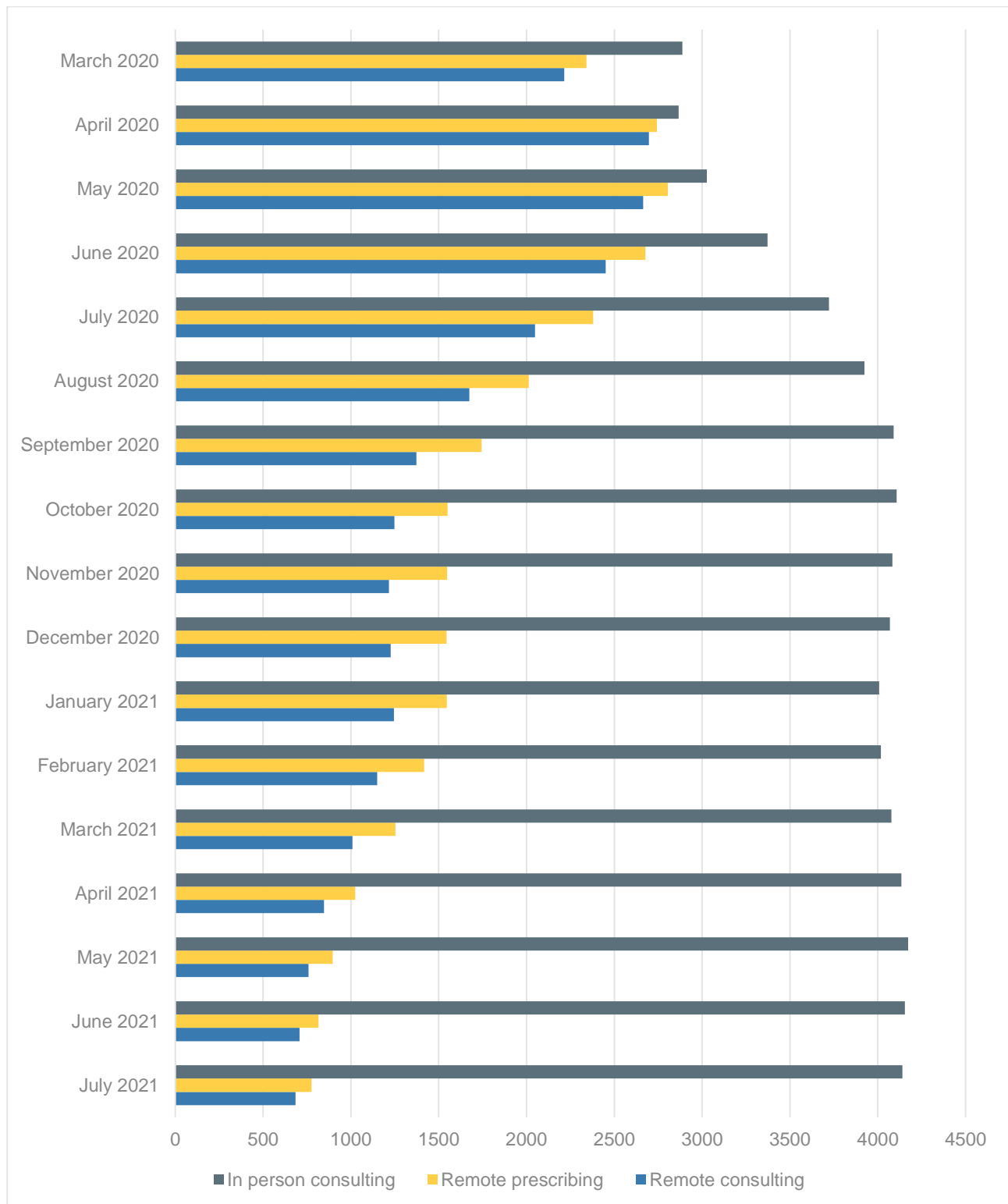
In person consulting and home visits

The large majority (89.9%) of VS respondents working within clinical practice had carried out 'in person' consultations during the pandemic.

- When asked to select all the locations at which these consultations took place, the most frequent responses were 'inside the practice, with the owner outside the building' (72.6%) and 'in the car park / grounds of the practice' (71.7%).
 - In addition, 38.8 per cent said they consulted 'inside the practice, with the owner present in the consult room', 36.9 per cent 'inside the practice, with the owner in reception / a waiting area inside', 24.7 per cent 'outside on the owner's land' and 11 per cent 'inside the owner's premises'.
 - On average, each respondent selected two or three consulting locations.
- Figure 6 presents the overall month-by-month picture of the incidence of remote consulting, remote prescribing, and in-person consulting. This shows a clear pattern of remote consulting and remote prescribing declining from April / May 2020 onwards, while in-person consulting increased.
- Further analysis shows:
 - A slightly higher percentage of women (90.9%) than men (87.8%) had carried out in-person consultations.

- Those working in small and medium practices were slightly more likely to have carried out in-person consultations; 92.6 per cent, 93.4 per cent and 88.5 per cent respectively.
- An above average percentage of respondents working in the following types of practice had carried out in-person consultations: equine 96.3 per cent, mixed 94.1 per cent and small-animal-only 92.8 per cent.

Figure 6 Remote consulting, remote prescribing, and in-person consulting: number of VS 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, 40.9 per cent said they had done so. For most of these respondents (60.9%), these emergency visits were for small / companion animals, although 19.3 per cent had visited equine animals, 18.5 per cent farm animals, and 1.3 per cent other animals. Further analysis shows:
 - A higher percentage of men (47.2%) than women (38%) carried out emergency home / on-site visits.
 - Respondents working in Northern Ireland (54.5%) and Wales (50%) were more likely to have carried out emergency home / on-site visits than those in England (39.9%) or Scotland (41%).
 - The type of practice also made a big difference, in that the large majority of respondents in equine (86.4%), farm-animal-only (81.5%) and mixed (76.2%) practices reported carrying out emergency home / on-site visits.
 - Practice ownership structure also made a difference, with respondents working in independent practices (55.3%) being more likely to report having done emergency home / on-site visits than those working in corporate practices (37.2%).
- A lower percentage (29.1%) had carried out non-emergency home / on-site visits to clients. Those carrying out non-emergency visits said they were to: small / companion animals that could be moved but were nevertheless seen at home / on-site (32.1%), small / companion animals that could not be moved (23.6%), equine animals (22%), farm animals (20.8%), and other animals (1.5%). Further analysis shows:
 - A higher percentage of men (36.2%) than women (25.9%) carried out non-emergency visits.
 - Respondents working in Northern Ireland (42.9%) were more likely to have carried out non-emergency visits than those in other UK countries.
 - There is also a correlation with type of location, in that respondents in rural areas were more likely to have carried out non-emergency visits (56.3%) than those in a mixed rural / urban area (32.1%) or an urban area (14%).
 - The type of practice also made a big difference, in that the large majority of respondents in equine (91.8%), farm-animal-only (88.1%) and mixed (64.8%) practices reported carrying out non-emergency visits.
 - Practice ownership structure also made a difference, with respondents working in independent practices (41.7%) being more likely to report having done non-emergency visits than those working in corporate practices (25.4%).
- **Compared to VNs:** A notably lower percentage of VNs had carried out emergency home / on-site visits to clients (24.7%), or non-emergency home / on-site visits (12.7%). In addition, for VNs carrying out such visits, almost all were for small / companion animals (90.3% of emergency visits and 93.2% of non-emergency visits).

Concerns about personal safety

VSs 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 (59.9%) had not experienced concerns; however, 22.3 per cent had experienced concerns during daytime work at the practice, 9.5 per cent when dealing with an out-of-hours case at the practice, 4.4 per cent during daytime work away from the practice, and four per cent when dealing with an out-of-hours case away from the practice.

- Although 15.9 per cent of those experiencing concerns said this occurred at about the same frequency as before the pandemic, and 9.6 per cent said it was less frequent, a worrying 39.8 per cent selected 'notably more frequently' and 35.3 per cent 'somewhat more frequently'.
- Further analysis shows:
 - The average age of those experiencing concerns was lower than those who had not, with mean ages of 38.2 and 43.9 respectively.
 - The age groups expressing the highest levels of concern were those aged under 30 (47.1% had concerns) and 30 to 39 (40.5%).
 - Related to the above bullet point, those who qualified in 2010 to 2019 had a higher percentage of those expressing concern (45.4%) than those who qualified before or after.
 - A higher percentage of women (35%) than men (26.6%) had concerns.
 - Respondents with no disabilities or medical conditions had notably lower concerns (32%) than those with a mental health disability / condition (45.1%) and those with both a mental health condition and a physical disability / condition (56.8%).
 - Those working in an urban location had higher levels of concern (37.2%) compared to those in a rural location (23.6%).
 - When analysed by practice ownership structure, those working for an out-of-hours provider had notably high levels of concern (56.8%).
- **Compared to VNs:** A slightly lower percentage of VNs (55.7%) had not experienced concerns about their personal safety. Although VNs with concerns were somewhat less likely to have experienced these when dealing with out-of-hours cases away from the practice (1.8%), they were somewhat more likely (29%) to have had concerns during daytime work at the practice. It was also apparent that VNs were more likely to feel these concerns 'notably more frequently' (34.7%) and 'somewhat more frequently' (32%).

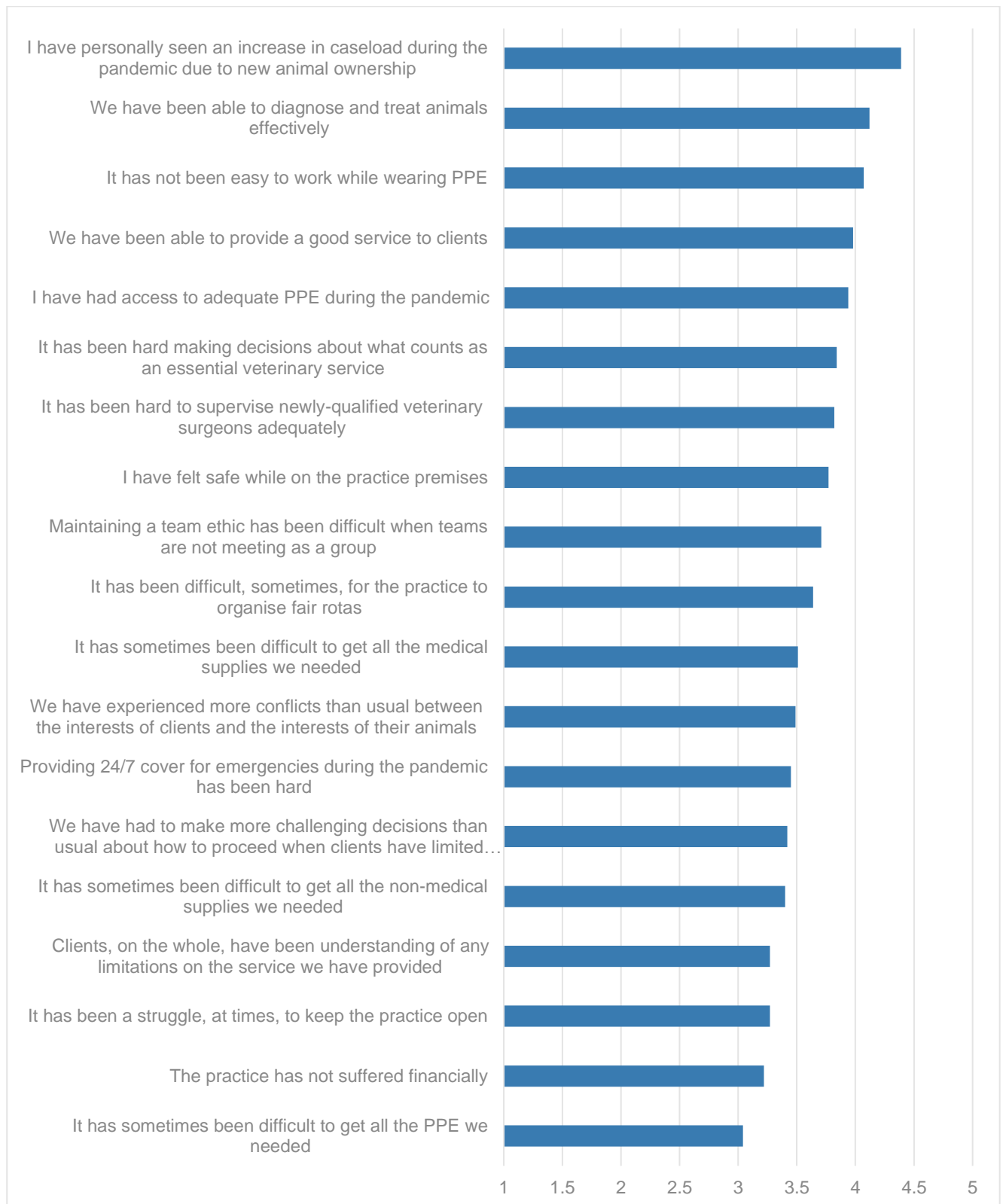
Attitudes

Respondents were asked to give their views about 20 statements relating to their work as a VS 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 that working within clinical practice during the pandemic was not easy for many respondents. On average, they found it was not easy to work while wearing PPE, and experienced difficulties supervising newly-qualified VSs adequately, maintaining a team ethic, organising a fair rota, and always getting the necessary medical supplies. They also experienced challenges, such as making decisions about what constitutes an essential veterinary service, having conflicts between the interests of clients and their animals, and providing 24/7 cover for emergencies. It is also very apparent that most respondents had personally seen an increase in caseload due to new animal ownership. Despite these issues, most respondents agreed that they had been able to diagnose and treat animals effectively, and provide a good service to clients; overall, they also felt safe while on practice premises and had access to adequate PPE.
- **Compared to VNs:** 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, VNs were less 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 more 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, VNs scored one statement negatively, overall (about clients being understanding of any limitations in the service provided by the practice), while VSs scored every statement above the midpoint of three.

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



General views and experiences of all VS 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 (3.3%, or 210 individuals) had worked with the NHS or NHS Scotland during the pandemic, either paid or unpaid.
 - Of these, 28.8 per cent had worked as a vaccinator, 19.2 per cent as a volunteer for the vaccine programme but not doing vaccinations, and 51.9 per cent in an 'other' capacity.
 - 'Other' voluntary work included, most commonly, working for Test and Trace, or being a 'contact tracer', working as a voluntary / community / NHS responder, being a healthcare assistant, or being a volunteer driver.
- A slightly larger number of respondents (5.3%, or 345 individuals) had carried out other voluntary work as part of the pandemic effort.
 - These respondents were asked for more details, and gave very varied responses. Much of the additional voluntary work related to helping people in the community, particularly those who were elderly and / or isolated or in need of support such as food banks; in addition, several respondents had helped by sewing scrubs or making other types of PPE for the NHS.
- **Compared to VNs:** The percentage of VN respondents carrying out voluntary work during the pandemic was slightly lower: 2.3 per cent had done voluntary work for the NHS and 3.7 per cent had done other voluntary work.

Influence on staying / leaving intentions

- Three-quarters (75.1%) said the pandemic had not in any way influenced their decision to stay in, or leave, the profession, with the remaining 24.9 per cent saying it had been influential. Further analysis shows:
 - A higher percentage of women than men said it had influenced their decision (27.2% of women compared to 19.1% of men said 'yes').
 - The younger age groups were more likely to say it had influenced their decision: 30 per cent of those aged under 30, and 29.6 per cent of those in their 30s, said 'yes'.
 - Those who qualified between 2010 and 2019 were most likely to say it had influenced their decision compared to others who qualified earlier or later: 32.3 per cent in this qualification group said 'yes'.
 - 44.2 per cent of respondents with a mental health disability / condition said it had influenced their decision, compared to 24.1 per cent of those with a physical disability / condition and 24.5 per cent of those with no disability / condition.

- Practice size correlates with whether the pandemic has influenced the decision to stay or leave, in that 31.2 per cent in small practices and 29.6 per cent in medium practices said 'yes', compared with a notably lower 21.1 per cent in large practices.
 - There is a clear correlation with working as a VS within or outside clinical veterinary practice, in that 28.2 per cent working within clinical veterinary practice said 'yes' compared to a much lower 15.9 per cent of those working outside.
 - Within clinical veterinary practice, 33.2 per cent of those in small-animal-only practices said 'yes', compared to 11.9 per cent in equine practices, 9.0 per cent in farm practices, 16.6 per cent in mixed practices, 18.8 per cent in other first opinion practices, and 14.6 per cent in referral / consultancy practices.
 - Those saying 'yes' were younger than those saying 'no': aged 41.1 and 45.2 respectively.
 - Respondents experiencing concerns for personal safety were notably more likely to say the pandemic had influenced their decision to stay or leave (48.1%) compared to those with no concerns (21.9%).
- **Compared to VNs:** The percentage of VN respondents saying the pandemic had not in any way influenced their decision to stay in, or leave, the profession was lower, at 65.3 per cent.

Attitudes

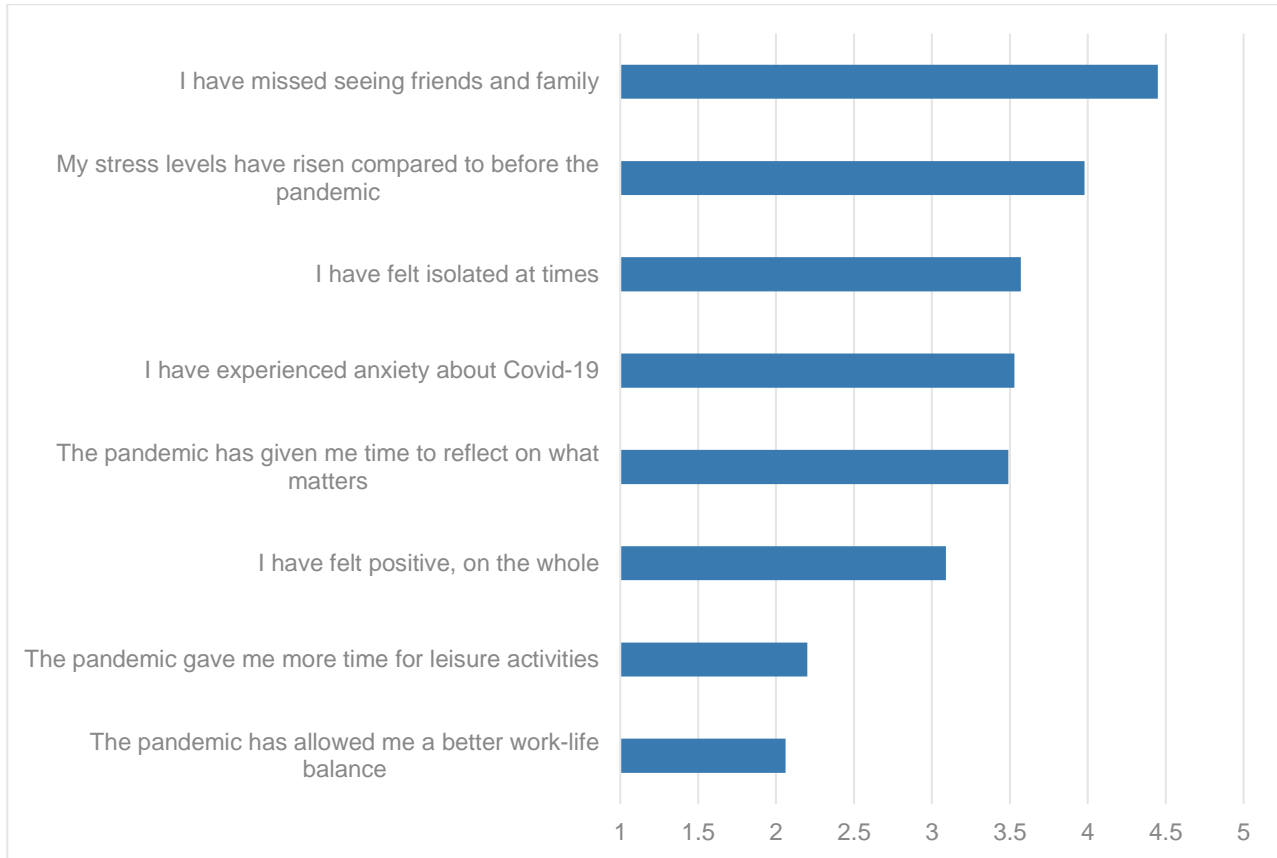
Respondents were asked to give their views about eight statements relating to their personal experiences of the pandemic, using a five-point response scale ranging from one (strongly disagree) to five (strongly agree), with three (neither agree nor disagree) as the midpoint. An additional 'not applicable'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

Figure 8 gives the average (mean) scores for each statement overall (excluding the 'not applicable' responses), and shows that, on average, 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 finally, the mean score for 'feeling positive, on the whole', was only just above the midpoint. However, there was overall agreement (albeit not strong) that the pandemic gave time to reflect on what matters.

Compared to VNs: There was 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 VNs, on average, were somewhat less positive, taking the set of statements together, than VSs; in particular, they expressed slightly higher levels of agreement to the statements about

stress levels and Covid-19 anxiety, and were negative about feeling (on the whole) positive during the pandemic while VSs were neutral.

Figure 8 All 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 profession now that the UK was emerging from the pandemic, respondents were overall pessimistic rather than optimistic.
 - Optimism was expressed by 29.4 per cent overall (with 4.9% selecting ‘very optimistic’ and 24.6% ‘optimistic’).
 - A further 29.9 per cent were ‘neither optimistic nor pessimistic’.
 - However, 40.7 per cent expressed pessimism (with 30.5% selecting ‘pessimistic’ and 10.2% ‘very pessimistic’).
 - Further analysis shows:
 - Those located in an urban area were less likely to be optimistic compared to those in a rural area (24.7% and 36.8% respectively) and more likely to be pessimistic (43.3% and 33.4% respectively).

-
- There was a clear difference between those working as a VS within clinical veterinary practice and those working as a VS outside clinical practice, in that 27.4 per cent within clinical veterinary practice were optimistic and 44.6 per cent pessimistic, while 33.5 per cent outside clinical veterinary practice were optimistic and 30.6 per cent pessimistic.
 - Within clinical practice, the type of practice made a big difference: a relatively low 23.1 per cent in a small-animal-only practice were optimistic and 49.4 per cent pessimistic, compared to notably higher optimism in other types of practice: 45.9 per cent optimistic and 26.2 per cent pessimistic for equine, 56.4 per cent optimistic and 20.6 per cent pessimistic for farm, 36.0 per cent optimistic and 35.2 per cent pessimistic for mixed, and 33.0 per cent optimistic and 32.4 per cent pessimistic for referral / consultancy.
 - Practice ownership also made a difference: of those working in independent, standalone practices, 32.7 per cent were optimistic and 37.8 per cent pessimistic, while of those working in corporate practices, 24.8 per cent were optimistic and 50.1 per cent pessimistic.
 - A direct relationship with average (mean) age is apparent, in that those who were very optimistic had an average age of 50.1, those who were optimistic 45.8, those neither optimistic nor pessimistic 45.3, those who were pessimistic 42.1, and those who were very pessimistic 40.4.
 - Those who had experienced concerns about personal safety displayed low levels of optimism (19.6%) and high levels of pessimism (54.6%) compared to those with no concerns (31% and 39.8% respectively).
 - Carrying out non-emergency home / on-site visits also seems to be associated with greater optimism, in that 34 per cent of respondents who had carried out non-emergency visits were optimistic and 39.3 per cent pessimistic, whereas those who had not carried out such visits were 24.8 per cent optimistic, 46.9 per cent 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 profession.
 - 25.4 per cent said 'yes', but a notably larger 39.2 per cent opted for 'no'; the remaining 35.4 per cent said they were uncertain.
 - When asked to say why they responded in this way, there were some positive comments, but far more respondents focused on the negative outcomes.
 - Positive outcomes included: increased business because of new pets, especially the 'puppy boom'; the benefits of remote consulting and prescribing for both clients and animals; the way the profession had demonstrated resilience and flexibility; increased team spirit; and the adaptability of veterinary clinical practices to difficult circumstances. As one respondent put it, 'Our team can get through everything together now after this experience'.
 - Negative outcomes included: increased stress and pressure, leading to burnt out, exhausted staff; shortages of VSs leading to understaffed practices and

great difficulty in recruitment; the ‘unbearable pressure’ caused by so many people acquiring new pets, some of which were now causing problems because of poor socialisation; client goodwill running out; and some over-demanding clients who exhibited very poor behaviour. One respondent summed it up by saying, simply, ‘It’s been awful!’

- Further analysis shows:
 - Men were more likely than women to think there had been positive outcomes, in that 28.9 per cent of men said ‘yes’ and 36.7 per cent ‘no’, whereas a lower 23.8 per cent of women said ‘yes’ and a higher 40.2 per cent said ‘no’.
 - Those located in an urban area were more likely to say ‘no’ (44.6%) than those in rural areas (34.6%) or mixed urban / rural areas (39.5%).
 - Those who had worked remotely at some point during the pandemic were more likely to think there had been some positive outcomes (31.9%) than those who had not been able to do any remote working (22.4%).
- When asked to describe the downsides of the pandemic for the veterinary profession:
 - Many comments related to the relentless work, long hours, and increased workload. Some added that staff were leaving because they could no longer cope with the pressures.
 - Some comments said that the stressful situation was made worse because VSs were undervalued and their contribution was not recognised.
 - Other respondents spoke of clients having a lack of understanding and being excessively demanding, even abusive.
 - Overall, the pandemic experience was considered to have led to increased mental health issues, even a crisis, within the profession.
- 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 VSs should be classed as key workers / frontline workers straight away, with increased recognition, representation in Government, and priority for receiving support such as being able to send children to school and getting vaccinated early.
 - A better-educated public was also considered important, to prevent excessive and unreasonable demands, to increase understanding of the contribution the profession makes, and to enhance the status of VSs and the veterinary profession. Some respondents went further, advocating a restriction on puppy and kitten breeding and sales.
 - Views about the RCVS varied, with some (the larger number) wanting stronger leadership and better / faster guidance, but others (the minority view) asking for less interference. Some suggested that ending the requirement to provide a 24/7 emergency service should happen early during a pandemic or similar situation, while others thought that practices should be allowed to provide ‘emergency care only’ if short-staffed and overworked.

- It should be noted, however, that some respondents felt the profession would be relatively well-prepared if another pandemic occurred, having got to grips with remote-working and wearing PPE, and having a better understanding about the need for workforce planning and ensuring there were adequate supplies.
- 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: the negative impact on their families (especially when they worried about possibly passing on the virus to them due to so much client contact); anxieties about their own, or their colleagues', mental health; feeling isolated, especially if unable to attend work in person; and feeling jaded, disillusioned and no longer 'in love' with their work. Some said they were seriously considering leaving the profession, or retiring early. However, a small number have had positive personal experiences, speaking of aspects such as gaining a better perspective on what is important in life (such a family), becoming fitter, and feeling stronger ties with colleagues.
 - Respondents who shared impacts on the profession tended to focus on the more negative things that have already been mentioned above, around VSs being overworked, very stressed, having to work excessive hours with very few breaks and feeling undervalued and unrecognised. Some referred to the extra stress of being an employer and having to worry about staff safety and wellbeing. A frequent comment was that the profession was 'in crisis' or 'in a mess' or 'on its knees', with some respondents saying the situation was bad before the pandemic, and now was much worse; in fact, they thought the pandemic had brought to the surface the problems that already existed. A small number of comments, however, were more positive in tone, emphasising how well the profession had coped, despite all the problems and hard work.
- **Compared to VNs:** VNs were slightly less pessimistic about the future of their profession, with 31.6 per cent being optimistic overall and 34.3 per cent pessimistic. However, they were more gloomy about positive outcomes for their profession, with a lower 17.3 per cent saying 'yes' and a slightly higher 41.4 per cent 'no'. The free text comments by VNs covered very similar ground, perhaps with greater emphasis on poor behaviour from clients and feeling undervalued (especially as VNs were not granted key worker status); poor pay was also mentioned frequently as an issue, and some VNs were unhappy with the level of support provided by their employer.