HOUSE OF COMMONS

Environment, Food and Rural Affairs Committee

Oral evidence: Animal and plant health, HC 611

Tuesday 17 March 2026, Harper Adams University

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Watch the meeting

Members present: Mr Alistair Carmichael (Chair); Sarah Bool; Sarah Dyke; Terry Jermy; Jayne Kirkham; Josh Newbury; Jenny Riddell-Carpenter; Henry Tufnell.

Questions 584 - 640

Witnesses

I: Professor Caroline Argo, Dean of Veterinary Medicine, Scotland's Rural College; Dr Rob Williams, President, British Veterinary Association; Professor Tim Parkin, President, Royal College of Veterinary Surgeons; and Professor Matt Jones, Head, The Harper and Keele Veterinary School.

Written evidence from witnesses:

– British Veterinary Association (APH0268)

- British Veterinary Association (APH0228)

- British Veterinary Association (APH0101)

Examination of witnesses

Witnesses: Professor Caroline Argo, Dr Rob Williams, Professor Tim Parkin and Professor Matt Jones.

Q584 **Chair:** Good afternoon, everyone, and welcome to this meeting of the Environment, Food and Rural Affairs Committee, coming to you today from Harper Adams University. I formally place on record our gratitude to the university authorities for hosting us here today. We return to our inquiry into animal and plant health, looking in particular at the future of the veterinary profession. We have a distinguished panel before us this afternoon. For the benefit of our official record and for those who will be following our proceedings, can I invite you all, maybe starting with yourself, Tim, to introduce yourselves to the panel? Thank you.

Professor Parkin: Tim Parkin, current RCVS President. I should note that I am also Head of School at Bristol Veterinary School.

Professor Jones: Matt Jones. I am the Head of The Harper and Keele Veterinary School. I have been here since our inception in 2019 for students in 2020.

Professor Argo: Caroline Argo. I am Dean of Veterinary Medicine for Scotland's Rural College, SRUC, and their Head of School of Veterinary Medicine and Biosciences.

Dr Williams: I am Rob Williams. I am the President of the British Veterinary Association.

Q585 **Chair:** Thank you. I should place on record or remind everyone, as I have previously declared, that my wife is a practising member of the Royal College of Veterinary Surgeons and a partner and director of a veterinary practice in Orkney. My son is an employed member of the Royal College of Veterinary Surgeons. Since we will be touching later on the work of the Veterinary Medicines Directorate, my other son is a post-doctoral researcher, much of whose work is funded by the Veterinary Medicines Directorate. I am the only person in my family who does not have any real life experience of this but I am the one here asking the questions, so go figure that some other time perhaps.

We are very grateful to you for your attendance here today. You have behind you a number of the students here at Harper Adams and we are going to be examining a number of the challenges that the profession faces. This is still a great profession to be part of, so before we get to the challenges, can I invite you all, as you are all vets, to tell us why you got into it, what keeps you there, and why this is a good profession to be part of? Rob, I will start with you.

Dr Williams: What I enjoyed about being a vet was interacting with people. Sometimes where people, particularly undergraduate vets and then as they qualify, get it wrong is our patient is this beautiful hybrid—a combination of an animal and a person, or a person and a thousand

animals. I think that interaction is really important. That is what I enjoyed the most. I got to do really cool stuff. I did orthopaedic surgery pretty much all my career, so I am the more rounded and grounded Irish supervet.

Chair: Others are available, I understand.

Dr Williams: Yes, exactly, others are available. I suppose I got to do cool stuff that is really interesting and then I got bored doing it and now I do other things. The thing I would say to people is it is a brilliant profession and when you have a veterinary degree you can do anything you want. It is a gateway to so many different opportunities. It prepares you to think about the world in a way that is unique and it gives you incredible problem-solving skills. It is a brilliant starting point and I am very glad that I chose to do veterinary.

Professor Argo: It is a long story, Alistair, that got me to the place I am in just now. I come from a family that was on the edge of the eastern Highlands in Scotland, so very rural. I was keenly aware of the work that the vets were doing and wanted to be part of that game, thank you very much. I hate to say it; at age 17 I lacked the confidence to leave home and go to the central belt to pursue the career. I made it eventually to Aberdeen. I did 12 years in the science track and ended up as an animal physiology lecturer working alongside vets in a vet school. It rekindled that passion that I had to do that, so it was not the cheapest way to do it but I went back and put myself through the veterinary training programme at that point.

Rob, I am in total agreement with you. I have no regrets whatsoever. The world is your oyster. I have gone from clinical to research to management to finally working with the new school in Scotland. There are a lot of opportunities with this career.

Chair: We will come back to that question of community engagement later on. Thank you for that.

Professor Jones: I think the underlying attraction of the profession has not changed over generations really, and it is that combination of an interest in science and working with animals and the people associated with them, as Rob so rightly pointed out. For me it was spending most of my childhood on my uncle's farm and combining that with an interest in that area.

As a profession, again echoing previous comments, the sky is the limit. There is such a wide variety of roles that qualified veterinary surgeons can undertake. We all have fairly interesting and somewhat random careers. Mine took a route through research, clinical practice, pharmaceutical industry research and development, some commercial, and now into education, so very unusual but the veterinary foundation has opened all that up.

One of the challenges I would throw out to our current generation of vet students and people attracted to the profession is to keep those horizons broad. It is not all about being a practitioner. You have such a big range of skills that are developed. Don't close them down once you are qualified. I think that can happen.

Professor Parkin: For me it was basically the curiosity as a scientist that was the driver, as Rob said, and problem-solving skills, whether that be on a micro level where you are problem solving the clinical case in front of you or you are problem solving a foot and mouth disease outbreak, for example. As a vet who never went into practice and went directly to research, it was really that problem solving, thinking about the why of things and trying to answer that question repeatedly again and again, whether that be in clinical or in research, that was the primary driver for me. That is the beauty of it. You never stop asking those questions why.

Q586 **Chair:** Now we are at a moment in time where the profession as a whole faces some enormous challenges. The world in which you all operate is different. You have a profession now that is 60% big corporates. It is no longer the traditional model that you had in all the professions of vets employing vets. That has implications not just for day-to-day practice but also for the regulation, and we are going to come along later to look at the question of a new Veterinary Surgeons Act.

Let's just start at the highest level then. What are the biggest challenges that the profession faces? Then we will drill down, perhaps, a little bit into that. We do not need to get the same answer from everybody, so anybody can volunteer. Tim, from your point of view first.

Professor Parkin: We can talk about workforce and that sort of thing, and we need to make sure we have a sustainable, happy workforce that are going to continue to be lifelong learners into the future to advance the profession. I think we need to ensure that we have appropriate routes into the professions. Much of that will be driven by the reform of the Veterinary Surgeons Act to ensure that we can open up the professions to all those who want to have the opportunity to become a vet or a veterinary nurse or, indeed, an allied veterinary profession so that we better reflect the society we serve.

Chair: Does anybody want to add to that?

Professor Jones: I am happy to. I think some of the barriers that might be emerging, as Tim suggests, would be the cost of veterinary education and the cost of entry and barriers to entry. We need to be very careful that we are investing in the right way and we are removing those barriers and specifics around our profession, such as the need for additional work experience, or a lot of workplace-based experience, without the funding model to support it. It is the same for veterinary nurses. That means that our students have an opportunity cost as well as the up-front costs of the programme itself. It is narrowing down the pool of potential candidates.

Q587 **Chair:** This question, Caroline, of who wants to enter the profession through the vet schools, is one that sits right at the heart of the work that you are doing in SRUC.

Professor Argo: It does; it very much does. We have a big job ahead of us in a way. The vet schools are the gatekeepers of the profession, end of. We are the ones who are responsible for selecting the students, for training the students in a particular way, for putting them out into the workforce. Again, I think we are being challenged because what we are seeing are more and more vet schools opening, more and more graduates coming through, yet we cannot fill some of the essential skills gaps that we have within the profession in Scotland and the wider UK. We are not getting something right.

That has been one of my big challenges—to set the school up so that we are not just looking for students who want to be a vet student because that is what bright girls do. We are looking for people who have the aptitude and the capability to succeed in the profession. Being a vet student and being a good practitioner are very different things. We spoke a lot to different countries that have similar issues going on and we learned a lot about how the American medical profession has completely changed because they are no longer tariff-focused per se. The entrance exams for medical school tell you who is the student that is going to succeed in the programme; they do not tell you who is the one that is going to succeed in the career. They are very different attributes. Having a much more holistic admissions process, looking at the person in the round, is teaching us a lot. It has certainly worked for the Australians. Charles Sturt University has done such a thing and it has evidence to show that five years out from initiating that selection, 92% of the vets it has put into rural areas are still there, so it works.

Q588 **Chair:** You are in a privileged position inasmuch as you are able as a profession to regulate your own profession; you gatekeep it. Lawyers and accountants lost that long ago because lots of people get law degrees and accountancy degrees who are never going into professional practice.

Rob, on the retention figures, early leavers are pretty serious: 45% of those who are leaving leave within four years or less; 21% left within a single year. I cannot find my own notes for the actual number, but the retention issue has to be a serious one for the profession. Is retention a problem because you are recruiting perhaps from a pool that is not entirely right, as Caroline suggests?

Dr Williams: Yes, I think it has been mentioned already that workforce sustainability is probably the thing that would actually help most and that definitely starts at the entry point. There is often an expectation mismatch when people enter the veterinary workforce, particularly with clinical work. What people think they might be doing and what they actually are required to do are often poles apart. There is a nostalgic and I think slightly naive view, when you talk to vets who are in their latter stages of their fourth year or in their final year of studies, that a lot of

them aspired to work in mixed practice, so to effectively treat all animals. The problem with that is there are very few genuinely mixed practices in the sense that they mean still in operation. Typically, what will happen is they will get a mixed job but they will be, in effect, a small animal practitioner who has to do farm or equine practice on call, which is like the worst idea in the whole history of mankind because—

Chair: It does sound like the worst of all possible worlds.

Dr Williams: It is because they are very different roles. Fundamentally, the skills are the same—managing any animal, including humans, with ill health or injury is fundamentally the same thing—but it is very different to be presented with a vomiting dog compared with a cow that cannot calve properly and needs intervention. I think there is that expectation mismatch.

The other thing is people's conception of work has changed so it is no longer viewed as a vocation. Veterinary is one of those professions that had a vocational aspect to how people identified with it and that is no longer the case.

Chair: You do not think that is the case still in your profession?

Dr Williams: Not for younger generations of vets. More typically how younger or early-career people conceptualise work is that work is a means to support their life outside of work. I think that vocational element to it is not maybe as strong as it has been historically.

Chair: Tim, were you wanting to come in here?

Professor Parkin: Yes. Just on that piece, I think it is important that we accept that as the modus operandi going forward. Work/life balance is important. We have some pretty serious things going on with mental health in the veterinary professions and we need to make sure that our vets are happy when they are in their job.

The one thing I wanted to come back to is that the RCVS ran our models on workforce and we published this at the London vet show in November last year. I think the numbers perhaps do not quite stand up to the perception of the retention issue we have. Of those under 30, only 5.8% left while under 30. There seems to be a percentage who leave under 30, up to 34 or 35, but after that retention is relatively high. Relatively few individuals, once they get through the first 10 years, tend to leave after that until they end up retiring. Our workforce modelling would suggest that actually from the veterinary profession side holistically there is not really a great cliff edge coming. I think there are particular sectors, which you might want to touch on—official veterinarians, veterinary public health, perhaps in the farm sector—where we might be facing greater challenges. However, across the piece I think that there should be plenty of veterinary surgeons coming on.

Q589 **Chair:** What are you doing in the individual vet schools to manage the expectations of what people are going to find when they get into the workplace? Matt, I was talking to your colleague earlier. He was talking to me about what you do here at Harper Adams in resilience building before they go out into the workplace. Is that working and is it enough?

Professor Jones: As a new school, we don't yet have enough outcomes data to know if there is anything specific we are doing that might improve those outcomes. In general terms, it is about changing that perception. Any outreach from whatever age of young people we are engaging with, right through to selection interviews, open days and so on, must be really clear about what the role of a contemporary veterinary surgeon is likely to be.

There are other things about the personal and psychological aspects of it. We do have a high proportion of people with individualised mental health issues and poor wellbeing and we have incorporated psychological skills into the curriculum, as we would with communication skills, clinical reasoning and so on. I think it is about normalising the inherently stressful nature of the veterinary professions and industries. We have gone through a phase where we have tried to present them as psychologically safe—the current buzzphrase around it—but it is not; it is inherently stressful and the earlier we can be clear about that, the better we will equip students and graduates with those skills, as we have done with clinical skills and knowledge for years. We can set them up for more successful, sustainable careers with those psychological skills and by looking at the environments within which we educate, so taking the focus off the individual and thinking about the organisational culture.

Chair: Some of the work is inherently emotionally very taxing.

Professor Jones: Absolutely.

Q590 **Chair:** Managing your relationship with your clients, with your patients, the rest of it, requires a certain resilience that you have to acquire over the years. Tim, you wanted to come in.

Professor Parkin: Very specifically on your question about how we prepare our students for the place of work, all our students at Bristol have a 48-week final year and lots of time in clinic on rotations. We deliberately match the expectation of the student to whatever the work match is for the rotation they are going to. So if it is a four-day week, 10-hour days, the student does the same. If it is a six-day week, the student does the same. We deliberately match the student ready for what they are going to be experiencing in practice.

Q591 **Chair:** Zoetis, a global animal health and pharmaceutical company, published a paper in June of last year, "Transforming Veterinary Practice for the 21st Century". It is quite blunt about it. It says there is a clear and urgent need for systemic change within the veterinary profession. Is that something that you recognise, because it has changed a lot already?

Dr Williams: Yes, it was an interesting piece of work that Zoetis did and it had to be evolved quite a bit because it had a much different view to start with that was bleaker than what it finally published. The problem with the veterinary workplace is it is both complex and complicated and the identity that people form about being a vet flips. They identify as vet first and person second and that sometimes creates a problem. There is often a feeling that every case can be a perfect case. If you know anything about medicine, medicine is the messiest thing there is because there are no perfect cases. If your conception of each case is, "It is a perfect case and I will have a perfect outcome", that creates a problem. So that is an issue.

The work/life balance that was mentioned earlier can become a real drain for people. We have a legal obligation to provide care 24/7. That is not individually; people working in a practice collectively have to do it. It can be quite taxing because you can have 10 or 12-hour shifts in some cases with minimal opportunity for breaks because if—

Chair: That is where you get to burnout.

Dr Williams: Yes, you can get to burnout. Burnout is a complicated thing and there are lots of factors that play into that. The thing that I find irritating when people start talking about this is the focus is always on the negative aspects of it. I am not just saying this because Matt is beside me, but I welcome the approach that Harper and Keele has taken, including this element of understanding psychology and giving people the psychological tools to adapt and to thrive within the clinical setting, recognising that it is stressful—that it is normal for a clinical setting to be stressful because everything is high stakes; there is very little low stakes activity. I think Harper and Keele should be congratulated publicly for that because it is really at the vanguard of trying to do something positive to change that conception of what it means to be a vet and how to exist in a positive way in the work environment rather than, "I'm imperfect because every case I touch something goes wrong," or, "They're not following the textbook; therefore, I'm a failure."

Q592 **Chair:** This comes back to the point of recruitment, doesn't it? You are recruiting people who have to be of very high academic standards. You are taking them from a point in their life where they have had to succeed in everything before they get there, so then to tell them, "You're going to come up with failures from time to time," is not easy for anyone.

Dr Williams: No. The thing about being a vet is you really only need two things. You need the ability to communicate with a wide variety of people and you need to have a ton of common sense. You don't need to be academically at the very pinnacle.

Chair: Still you recruit people with five A* at 14—I paraphrase slightly.

Professor Jones: Just on that point, there is debate about the role of interviews or not interviews and predictors of future success in a career

that is very difficult to predict and track. There are things we can do to try to at least prepare and normalise what new vet students will come up against. In one of our five interview stations we will have scenarios that focus on failure and the first time you face a situation that could be described as failure. We discuss with the applicants how they would respond to that and how that would make them feel. That is quite revealing and interesting and it opens up that wider discussion. If nothing else, it raises the awareness that that is something that they will have to face as they come on to the programme, whether it is a useful selection tool or not. I think it is just changing the narrative of a gold standard perfect practitioner, or a perfect profession that is lifesaving and heroic. It needs to be normalised that it is a crazy, stressful environment where things will go wrong but we will give you the skills to work it through. It is normalisation.

Q593 **Sarah Dyke:** First, I would just like to say how lovely it is to be back at Harper Adams.

Chair: I am sure it is lovely for Harper Adams, too.

Sarah Dyke: Well, of course. It is very nice; it is a real joy to be back. You are talking a lot about preparing those students for the work environment. Is there any support once they are in the workplace? Veterinary practice does have a high suicide rate and rate of burnout in comparison with the general population. I was just wondering what ongoing support there might be for people when they enter into their careers and beyond.

Professor Parkin: Something that RCVS started four, five or six years ago now is VetGDP—the graduate development programme. It superseded the procedure for that and it is much more structured now. Now first year graduates have to go into practice where there is a VetGDP adviser and they have to complete a portfolio of work. They identify what they want to achieve and how they want to be measured against their achievements over the first 18 months of their career. They have regular meetings with that VetGDP adviser within their own practice and then at the end of that period they submit their portfolio to demonstrate clear growth and increased understanding of the profession. In terms of learning on the job and learning to become a vet, there is definitely much more support in that area.

The other thing that RCVS is very proud of is the Mind Matters initiative that we started 10 years ago. We had an anniversary just last year—10 years. We recognise that suicide is a real concern in the veterinary professions, and in the work that we have been able to do through being a royal college as well as being a regulator, we have been able to set up the Mind Matters initiative, which provides an enormous amount of support to those who are facing crises. I will give an honourable mention to Vetlife here as well, which provides an enormous amount of support to those vets in crisis. The number of calls to Vetlife goes up and up every year.

Chair: Now you know why we wanted you to say good, positive things right at the start. Sarah Bool, you are going to talk us through some issues around international recruitment.

Q594 **Sarah Bool:** Yes. Thank you very much for your time here today. It is a pleasure to be here with you.

We have just been talking particularly about the domestic market of vets. I wanted to explore a bit more about the international recruitment of vets. Perhaps, Rob, I might start with you on this first question—but don't panic. You are the superstar, as you said; I liked your description at the beginning. How important is international recruitment to maintaining the UK's veterinary workforce?

Dr Williams: That is a very interesting question. I think it depends on which part of the profession you are thinking about. There are some parts of the workplaces where vets find themselves where there is definitely a deficit, such as Government Veterinary Services in its entirety and veterinary public health. In those areas in particular, there are some issues with there being fewer vets than is ideal. In some of your previous work as a Committee you might have touched on that with some of the—

Chair: The work of the previous Committee, actually.

Dr Williams: Oh, sorry.

Chair: We are still the EFRA Committee but we are a completely different cast list from the last time we were here.

Dr Williams: Okay. So I think that is one issue. It is quite specific where there are issues. If we think about small animal practices, so just dealing with pets, if you are a practice based in an urban setting and you have a practice that we would describe as a hospital—so it is a big operation with lots of people working in it—then all things being equal you have no problem recruiting. If you are in farm-only practice or equine-only practice, you probably have fewer issues recruiting. If we take a different view of clinical practice and we think about geographically isolated practices, particularly coastal and remote rural ones, you are probably encountering difficulties. If you work in mixed practice, which is ironic considering that a lot of final year students want to do this, they often struggle as well. It is not a blanket thing across the board. There are definitely areas where it is easier to fill vacancies and much more difficult to fill vacancies.

Q595 **Sarah Bool:** So you can see it across the board. What more do you think the Government or the RCVS could do differently to make it more attractive for international vets to come into the UK?

Professor Parkin: We have discussed this recently at council. As you will be aware, the original driver for welcoming vets from schools accredited by EAEVE—European Association of Establishments for Veterinary Education—was related to workforce. We recognise there are

still workforce issues in particular areas, but we do not believe that that is across the piece. As I have said, with new veterinary schools coming on track within the UK and with some of those more established schools growing, the projections are that across the piece the number of veterinary surgeons coming out of those particular areas and servicing the workforce should be adequate.

The key is that there has always been this lack of uptake from UK graduates into official veterinarian positions and veterinary public health positions, which prior to Brexit—the EU exit—were often filled by EU vets where veterinary public health is a much higher part of the curriculum that they go through so they are much more focused on that particular part of the work. One of the issues or one of the things that we need to address is to understand how we make that particular route more attractive to the current UK veterinary student, rather than necessarily relying on international students or graduates coming to fill those positions.

Professor Argo: We have ended up in a situation of learned dependency. For areas that British students were unwilling to go into, we were backfilling with people who were very good, and my goodness we owe them a lot. They have supported us for so long, but now they are not, we are beginning to see the flaws in some of our own educational systems, I think. It was one of the things that hit us, setting out with it, so when we set out to address the skills gaps for Scotland, the Government sector and public health were very much up there. We have made an effort to bring in public health training from ground zero. They are doing their cat and dog husbandry or whatever, but they are also beginning to look into these areas.

We take students to the abattoirs. We take them to the cattle markets. We take them to the aquaculture, to the sea pens. They are being exposed to this from the beginning, because if you don't do that, if you leave it as something you deliver minimally later in a programme, they are never going to engage with it. You have to be able to capture people at the beginning. Even if they do not go straight into those areas, they are aware that they exist, because we all change as we pass through our lives in terms of the areas we explore. That is one of the things we are trying to do. We are trying to embed official veterinary surgeon training in the undergraduate curriculum so immediately when your young graduate goes to a practice they have something to take, something they can sell. I think it is just so important that we train students differently to see all the opportunities that are in front of them.

Dr Williams: I agree with everything that my colleagues have just said, but I suppose if you were asking specifically about international vets coming into the UK to work, there is an issue around the threshold salary for the skilled worker visa. I will just briefly explain what the issue is. The salary threshold is £49,500, which is at a level that is higher than those vets who wish to come in would typically be paid. Typically, the vets that

would come into the UK from particularly the European Union would be maybe one-year qualified, with one year or maybe 18 months of experience, something like that. Their counterparts who are UK trained, UK based, UK citizens, would not be paid at £49,500; they would be paid at maybe £36,000 or £37,000. There is this disparity that is almost impossible to justify, as well as the cost of the skilled worker visa.

Until very recently, that had not been as much of a problem because the starting salary was much closer to the UK salary and the costs were lower so it was easier to bring people in. However, there has been a massive fall-off in numbers and it has probably dropped by 40% or 50%. It will actually drop off over time: as the visas of current overseas national vets expire, a lot of them will choose to return to where they are from and they will not be replaced by somebody coming in.

Q596 **Sarah Bool:** One of the questions we were going to ask was about the impact of that skilled worker visa on domestic pay structures. Are you seeing a downward pressure on that at all or not in reality?

Dr Williams: No, certainly in the last five years there has been quite an upward trajectory for all roles in UK vet practice.

Q597 **Sarah Bool:** Focusing particularly on the international vets, we know that in January 2024 the RCVS voted to end the mutual recognition of European veterinary degrees within five years. Do you think that is going to have a big impact on attracting and retaining any of the European vets here?

Professor Parkin: That decision was made through careful thought going back through why the original decision was made to permit it. It was originally driven by a workforce concern. That workforce concern has largely gone away so it made it quite difficult to suggest that that temporary fix should stay in place. We will always review it, but what we would really welcome is with SPS, for example, and an opportunity to think about mutual recognition of qualifications again and how we get back to a position where—at the moment we are talking about the direct accreditation of individual schools, but if we were able to get to the point where mutual recognition of qualifications was more feasible and could come back into place, I think many of these concerns would start to disappear.

Q598 **Sarah Bool:** I was in Brussels yesterday actually and I was asking the Minister about SPS and things, so it is something that as a Committee we are doing a lot of work on. That was with my other hat on, as part of the EU-UK PPA, but it is something that we need to keep the pressure on about, so I note that point.

You have had the reforms to the statutory exam. What are your thoughts and feedback on that so far—on those changes and the impact they are having?

Professor Parkin: It is early days, but what we have certainly seen is that it has been beneficial for those who may have failed the first written part of the exam to then not have to necessarily retake all parts of it. The pass rate has gone up in the last round from something like 15% to 30%. The numbers seeking to sit the statutory membership exam continue to grow. It is definitely a way of facilitating those who may, for example, be a small animal practitioner who failed the equine component or the farm component to have another go and ensure that they can do that. Even though they are clearly going to necessarily be in small animal practice we need to make sure they are omnicompetent. I am hopeful that the changes made will bed in and over the next few years we will see a significant increase in the numbers, not only the pass rate, who continue to come through that particular route.

Q599 **Chair:** Before we move on, SRUC has a particular constitutional set-up around supporting Scotland's rural communities. Is it making a difference, in terms of being able to grow your own, so to speak, instead of or as well as looking at international entrants to the profession in this country?

Professor Argo: We have to do it. We have great deficits in the different areas. The retention in some of our deficit areas is appalling; it is about two years. Charles Milne, when he reviewed the veterinary field delivery for Scotland, referred to it as a "constant churn". That does two things. Whether it is APHA or an independent practice in the Highlands, you constantly have this aggravation of a new member of staff coming in, needing training and draining time. Ultimately, expertise takes a long time to generate. I think one of the real fears that Charles saw, and he is quite right, is what this is imposing on us is a drain on expertise. It is going out the window. That is the situation we were trying to plug.

Now, it does not take anything dramatic. We are putting everything we can at it—holistic this and training that—to try to bolster them, keep them in and promote their retention in the business, but we do not have to do something dramatic. We just have to tip the playing field a little bit. It is not that many jobs that we are actually short of; it is just that we cannot keep people in those jobs. It was very much the remit to look and address directly the problems that Scotland was facing.

Q600 **Chair:** This is the second time you have been around this course because you set up the course at the University of Surrey. You have now come to do the same thing with SRUC. When Surrey set up its course, it was very much saying, "We're here to produce clinicians and that's our primary purpose. We're not having the same research focus as the long-standing universities." How easy is it to maintain that focus on clinical skills and producing practitioners as opposed to the other important work that the research facilities and the rest of it need to do?

Professor Argo: My goodness, Surrey did incredibly well. I am standing on the shoulders of giants with the school in SRUC because Surrey was the first time that a fully distributed model of veterinary clinical training

had been trialled. It was hard work, and I am looking at Matt to my right because he was part of that journey also. It was incredibly hard work to get that up, to make it run and to knock the glitches out of it. It takes time for us to prove that these things work. As opposed to the traditional model of training students in the ivory tower of a referral hospital with all the expertise and the modern equipment at their fingertips, our students will train in real world practices. We will rotate them with staff who will monitor them and educate as we go through actual workplaces, because this is part of the retention issue. We have had this dramatic schism between finishing your clinical training in a vet school and the reality of day one in practice. It is a massive gulf. But if those students have come through rotations in every form of practice that possibly exists, they see how the team operates, they see where their place in that team is and that understanding is there, so the segue into that first day of their professional lives is so much easier.

Chair: You have led me on perfectly to the next section, which is around veterinary school access and sustainability.

Q601 **Terry Jermy:** I want to ask a few questions about sustainability, which has been covered a bit so far. My constituency is South West Norfolk so much of my boundary is Cambridgeshire. We have been following Cambridge vet school, which has been in the local news and is a concern. It is very well regarded in my part of the world. Matt, how can schools maintain that financial sustainability while still providing the quality that we have all come to expect?

Professor Jones: Yes, it is a great question. I think what you have heard about already is the need to diversify and broaden that student experience into different workplaces. It is ever expanding. We have students in year 2 going into abattoirs, and year 4, year 5 and so on. There is mission creep right across the piece and that brings costs as we distribute clinical models of education. University owned teaching hospitals were the model for the Cambridge school and every other school before the launch of Nottingham vet school, and those have been consistently difficult to stack up economically. That was a challenge at Cambridge as it is everywhere.

Distributed models are an alternative, but not necessarily a more cost-effective one. They rely on the network of clinical providers who are educating with us. The resource we have to invest into that relationship and those educational experiences is relatively low. For human GP trainees, for example, some practices would get something like two to three times the per student, per week resource to be able to invest in those workplace-based learnings. Our unit of resource to invest in veterinary education has remained pretty fixed for many years, but our costs have relentlessly increased through that diversification and the need to work more with business and broaden, but also through the inexorable rise in the costs of just doing any business.

Veterinary education is not economically sustainable in its current form and each vet school and the parent university—or universities, in our case—will have their own way of trying to make it sustainable. Research is critical. It is important to retain a rich research base where possible. As a new vet school that is quite challenging. We are doing it in a way through our parent universities and through some targeted use of strategic focus areas in research and innovation, but the investment is not there to really build that in.

Universities will be able to account for the cost of running a vet school in different ways. Some of that is very historically embedded and some of it is above the line like ours. We have to look for alternative income streams. Having international undergraduate students has been a model for a long time to underpin that, but there are pros and cons of that model. Each vet school will have to try to navigate it differently, but it is not sustainable in its current model.

Professor Argo: The money, the income that comes with each of the students, is barely enough to see them through on their own. I suppose I am in a slightly different area in that I am not solely dependent on the income from that cohort of students. I can use the same facilities, the same staff to teach into surrounding sister programmes, but it does not get you away from the fact that it is incredibly expensive. I am certainly not in a position to take in international students, nor is that our ambition; that is not where we want to go. I think if you spoke to all the other vet schools, it is probably not their driving ambition either, but it is the circumstance in which we find ourselves financially. Yes, everybody is having to make very clear decisions as to how we do that, but it is a knife edge.

Chair: Tim, do you have the Bristol perspective on this?

Professor Parkin: Yes. There are other vet schools around. As a longer established vet school—we celebrated 75 years a couple of years ago—I think it is important to recognise that there are different models out there, even if you do have a hospital within your veterinary school. At Bristol, for example, we have Langford Vets, which is a wholly owned subsidiary of the university. It is a separate entity. It makes money; it is profitable. Its two goals are to make money and be sustainable and to provide an excellent student clinical experience.

We became AVMA accredited to enable us to take international students back in 2019. We are pursuing that model to ensure that we can cover the costs associated with training home students by recruiting international students. The cost of training a home student is approximately £25,000 per year. We receive £19,500 per year per home student. If there is one plea I would say—and I recognise the difficulty of tuition fees and that sort of thing and it is a political hot topic—the band A funding related to high-cost subjects has remained at £10,000 for many years. If there was any way of suggesting that might be increased,

that would actually cover purely the high-cost subjects in terms of trying to close that gap.

Dr Williams: I think sometimes people take too simplistic or too narrow a view of things like this. I would plead to politicians to think about the societal benefit of having a veterinary profession. One of the concerning things about the prospect of Cambridge closing was there was not enough thought into what vets actually do. People think we are James Herriot and we are not. You all had lunch earlier. How many of you drank the milk or put the milk in your tea? That exists because of my profession, our profession. If you ate any of the meat products or egg products, that is certified as being fit for human consumption by our colleagues. The contribution of the veterinary profession to society is much bigger than people would ever give it credit for. There is food safety; I have just mentioned public health; we facilitate international trade; and we provide a huge benefit to the mental wellbeing of the country through supporting animal companionship. I think we make an enormous contribution to society. Yes, it is expensive to produce each of our colleagues through university, but that is met back in spades by the contribution that we make.

Professor Jones: I have a very brief point on stretching the budgets. I know we are going to come on to widening participation and access, but we are having to support students who are struggling financially through the programme and to meet certain criteria. We are able to provide bursaries, but that comes from the overall current single unit of resource we have. Again, it is another pressure on that budget.

Q602 **Terry Jermy:** The benefit of being a Select Committee is that we are not the Government so we are not the decision maker, but we can make recommendations. I hear the point about funding, which is an obvious one. What else would you be asking the Government? We are hearing "knife edge", which is no position for any industry to be in. We have to get on to a more sustainable footing. Funding is recognised, but what else should the Government be doing to improve sustainability?

Professor Parkin: We will come on to reform of the Veterinary Surgeons Act hopefully at some point, but I think there is an opportunity within that to ensure that we are able to take students, as Caroline said, who are more likely to thrive within the professions once they come out of the veterinary schools, whether that means some form of differential training such that they end up tracking in different species in terms of their specialty at some point rather than necessarily being omnicompetent. One of the clear aspects of the reform of the Veterinary Surgeons Act is what we might term conditional licensure that is there primarily to open up the professions to those who might have previously been unable to think of the profession as something they might undertake through disability and that sort of thing. There is lots in the reform of the Veterinary Surgeons Act that I would say will enable us to identify individuals who are probably more suited to the profession.

Q603 **Terry Jermy:** The final point I wanted to ask about quickly is to do with retention. We have heard about the importance of retention in widening access. Are there any other benefits that you have experienced thus far that are coming from widening that access? Obviously, people are staying longer, which is beneficial all round. What are the other benefits of widening access, either Matt or Caroline in particular?

Professor Argo: On widening access, I will go back to working a lot with Charles Sturt in Australia, which has similar remote rural issues that we do in the north. They have been going out looking for youngsters from the remote communities to bring them in. The conjecture was that they will go back and look for fulfilling careers in those areas. They were right; that is exactly what is happening. Again, if you look at the medics in the States, that is exactly what is happening. It is much more resilient on that front.

We have tried that. The shock we got in Scotland was if you go looking for students and young adults in the rural areas of Scotland to apply to vet school, they cannot do it because their school does not teach chemistry or it does not teach Advanced Highers, so getting the direct entrance qualifications is an impossibility for them. So I'm not having that: we wanted to make another route to make that possible. We are beginning to develop a range—the first one has been running for four years now—of access programmes that will take those students out of year 5 with a good range of Highers but no Advanced Highers and bring them in so that they can upskill during a year or two years with us, depending on how far adrift they are. That has worked incredibly well. This year I think we had 17 students. Of the 30 that came through that programme, 17 applied to vet school. We offered them an interview. We do not guarantee them a place. Fifteen of them succeeded in that interview.

Now when we look at the demographic of our intake for the first two years, of the 50 students who were Scottish, 65% of those are now from our urban rural classification in Scotland. We are doing what we said on the tin by bringing them in. I just need those students to stay with me and do what I need them to do in terms of having those resilient careers.

Professor Jones: Just building on that, I think we all have our various access routes and foundation pathways, which is great. We earmark 30 places a year for students from two foundation programmes and for students transferring from early studies in other cognate areas of science disciplines. What that does, as Caroline said, is broaden the pool of different learners who come into the veterinary programme, which brings those experiences but also that cognitive diversity that the profession needs to get those different viewpoints bearing down on the challenges we have.

One of the problems we have is the current metrics around access barriers, so using POLAR quintiles, is not very specific for areas of veterinary. For example, we are not able to specifically target areas of

rural deprivation in a meaningful way. We are piloting a study looking at a more granular way of understanding students and markers of potential success or barriers to success that POLAR does not really cover for a vocational programme and professional training programme such as ours. POLAR is broadbrush and often you can have students who would appear to be coming from relatively non-deprived areas, but actually their barriers to success and their backgrounds are causing problems of access and then once they get on to the course.

Targeted interventions and support for specific learners on the programme are good to understand how you support people who have come through different access routes, and support them in an ongoing way throughout the programme to keep that success going. It is all very well getting a more diverse pool of applicants and a more diverse pool of enrolments, but we need to make sure there is success and ongoing support there as well.

There is some funding around that but the funding tends to be focused once they are on a programme, so there needs to be some more targeted funding for pre-vet students to be able to reach them. We have a Future Vet programme that tries to do that using some funds. That incorporates work experience opportunities that we prepare and manage for those students because access to work experience is one of the key barriers.

Chair: Thank you. We are going to move on now to questions around the Competition and Markets Authority and its proposals for veterinary practice reforms. Henry, you are going to lead the questioning here.

Henry Tufnell: Can I ask one quick question on what we have just been discussing?

Chair: Ask away.

Q604 **Henry Tufnell:** It seems that there is a shortfall between the funding you are getting from Government and the funding that it costs you to put an individual through vet school. For much of the time, you have been using international students to plug that shortfall. In the context of what the Home Office has been doing—we have touched on the international aspect—this is presumably pushing you further and further to the edge. In the context of us leaving the European Union and tightening up around the Home Office, with the change to the student visa model on top of raising that salary cap, you guys are getting really stretched.

Professor Parkin: Without a doubt. We are being squeezed and stretched, whichever way you want to push it, from all sides. I would agree. In terms of international student recruitment, there is still a very healthy market out there of international students, primarily from the North American geography when you become AVMA accredited, who want to come to UK veterinary schools. Whether that market will disappear or not—there are new veterinary schools that are establishing in the US—there is still enough of a drive for those students to want to come over to

this part of the world, to study veterinary medicine over here, at the moment. At the Bristol Vet School we also take students from lots of other parts of the world on foundation programmes and that sort of thing. They come to us directly on to our five-year programme from south east Asia and so on.

The veterinary education in this country is held in very significant high regard, so there is still a particular draw. I think some of the concerns you talk about are probably more related to postgraduate taught or postgraduate research qualifications for international students coming in on that route. I think those who are undergrad still want to do it and they will still battle through whatever visa constraints are put in their way.

Q605 **Henry Tufnell:** Does anyone want to add anything before I go on? Okay. That is really helpful. Thank you, Tim; I appreciate that.

I just wanted to start off with a broad question about how you feel about what the CMA has been doing, essentially. We could start with Rob.

Dr Williams: Sit back, this will take some time. I suppose the starting point is we are enormously privileged as a profession that society gives us the ability to do this work and nobody else is allowed to do it. So it is reasonable for society to look at what we do from time to time and work out whether it is appropriate or inappropriate. As a starting point, it is entirely legitimate what the CMA has done.

Broadly speaking, on the things that the CMA has identified where it has concern, we recognise we could do better. When it comes to transparency around who owns and operates a practice or transparency around cost or where medicines might be supplied from, if those are things we need to change, we will hold our hand up and say we will change them.

Q606 **Henry Tufnell:** The numbers are quite startling. In 2013, independent practices were 89% of the UK veterinary industry, but by 2021, this was at 45%. If we talk about pet care, it is worth £2 billion—you basically have a load of private equity or listed companies suddenly dominating this market. I appreciate that you identified all the things that the CMA is concerned about, but the fundamental principle about where those companies are involved in the first place, is that something that concerns you?

Dr Williams: Not especially. It is the way of the world, and it has already happened. If anybody thought that the CMA investigating the veterinary market for services or veterinary services to household pets would somehow undo the fact that these six large organisations exist, that is ridiculous.

Q607 **Henry Tufnell:** I guess the point is about inflation. If you look at the cost, vet prices for domestic pets have gone up by 63% since 2016, which is considerably higher than CPI inflation. In terms of undermining the credibility or that relationship with your customers as an industry, is that not concerning to you?

Dr Williams: No, because I don't believe that that is a fair narrative.

Henry Tufnell: Okay.

Dr Williams: The reason that veterinary costs have gone up is much more complex than saying these six organisations exist.

Q608 **Henry Tufnell:** But in terms of the dramatic rise?

Dr Williams: Other things have gone up. When people start to look at this, for example, car insurance has gone up, NHS spending has gone up—lots of things have gone up beyond whatever measure of inflation you would choose to apply. The drivers for increasing prices are much more complex than who owns and operates veterinary practices. Our ability to recognise and manage animal disease has gone up significantly in the last 20 years.

I will just give you one example to highlight that. I started in practice in 2001. The only diagnostic imaging we had in the practice were X-rays. Those were old film X-rays that you had to develop in a chemical bath and hold up to a bright light. In the space of 16 years, the same practice had direct digital X-ray. What that means is you take the picture, and you look on a computer screen three seconds later and you can see the X-ray image. In the veterinary practice we had ultrasound and a CT on site—a CT machine that you would find in the local hospital—and we had the ability to do keyhole surgery as a diagnostic procedure, all in the space of 16 years.

The adoption of technology at the same level as you would find in human healthcare has grown exponentially, as have the expectations of the public. The pet-owning public have a far higher expectation of my colleagues in practice than they had 20 years ago. Their expectation is that we will be able to deliver human-quality healthcare for their pets. Those are the reasons that the prices have gone up.

Q609 **Henry Tufnell:** Therefore, do you think that what the CMA has proposed will have any impact on the pricing point?

Dr Williams: It may do because it will do a whole lot of things. It will improve some of the transparency around who owns and operates practices, what the cost is, and what the cost is up front. It will arm the pet-owning public with the ability to ask questions, which they may not have asked up to now, about, "What is an appropriate treatment option for my animal?" That opening up of transparency will help.

The other things that are happening in the background is there are an awful lot of start-ups in veterinary that are younger veterinary professionals recognising we could do this differently. A lot of what those start-ups are doing—just individual practices, not massive chains—is that they have worked out that the key thing in delivering small animal veterinary care is to nail customer service in a way that the public expect it to be. I think that dynamic of lots of new start-ups, which are adopting

client-facing technology and really working very hard to consistently deliver a very high quality of customer service, will disrupt over time. I think the CMA is like a trigger to disrupt the whole thing.

Q610 **Henry Tufnell:** Do you think it will have a disproportionate impact on those smaller practices because of the amount of stuff that the CMA will be demanding?

Dr Williams: It could do, but vets are very adaptable and very entrepreneurial. They will work out ways of meeting the challenge that the CMA is going to set the profession in a way that is helpful to the public, but also makes things more efficient. We still do an awful lot of paper-based stuff. Writing prescriptions is often paper-based, and it does not need to be. It will be a real driver of innovation and change, actually. I don't think there will be as much of a disparity as people would imagine between smaller, independently owned practices and those six large groups.

Chair: Tim, I see your finger hovering.

Professor Parkin: If I could just come in about the CMA, from a royal college perspective, I don't think we can be convinced that prices are necessarily going to drop, but I think the primary potential result is that the pet-owning public will have a greater and more knowledgeable choice about where they seek their veterinary care.

We have to recognise that healthcare is expensive, whether it is human or animal. There is no NHS for pets. I cannot see a massive reversal in terms of prices. As Rob said, there are very many reasons for the increase in price. The pet-owning public should be better able to make an informed choice about where they seek their veterinary care.

However, I think primary for us is that actually, on top of all of that, in terms of the RCVS as a regulator for the veterinary profession, we have to remember that cost is not the only thing that is important when you are looking after pets. Animal health and welfare and public health come above cost across the board; it is really important that we retain that as the primary goal of regulation.

Q611 **Henry Tufnell:** Could you give us a couple of words about the role that you would be expected to play? I caveat that question with the fact that we are not expecting to see this, I think, until May. Then there will obviously be a period of adaptation.

Professor Parkin: Exactly. The royal college obviously talks to the CMA, and we have had discussions with the CMA. Again, as you say, we have not seen the final remedies coming out, but there is likely to be a role for the royal college in terms of monitoring remedies that come from the CMA.

Q612 **Henry Tufnell:** What about the levy? Is there a proposal about you having a levy so that you can—

Professor Parkin: To fund the monitoring of those remedies?

Henry Tufnell: Yes.

Professor Parkin: Until we see exactly what those remedies are and exactly what we are required to do, it is very difficult to know what the scope of that levy would be, but we do stand ready to do that on behalf of the CMA.

Dr Williams: Just to expand on that, one of the deficits that exist currently—and it is one of the real reasons to reform the Veterinary Surgeons Act—is that all four of us are regulated as individuals, but the veterinary businesses that we might work in are not regulated, and that is really weird. If we looked at direct comparators, so our colleagues who are dentists or working in human general practice, as individuals, they are regulated and the GP surgery where they work from is also regulated.

Chair: We are going to come on to that.

Dr Williams: Yes, I appreciate that.

Chair: If we can keep it to the CMA at the moment, there are other aspects.

Dr Williams: Yes.

Q613 **Henry Tufnell:** Do you want to add anything, Matt, to the discussion we have just had?

Professor Jones: Just looping back to your starting point around consolidation and corporatisation, I think a balance is good. I have worked with independent and corporate practice groups, and they offer different things for graduates and as an educational partner as well. Career structures and progression that were not necessarily always there in smaller independent practices have opened up. New graduate support programmes have been transformative in some ways for some graduates, and when I think back to earlier comments—I think they were Rob's comments—around a different type of veterinary graduate now, that is a big deal. That is really important. There is that shift from an individual vocational viewpoint that, "I give my life to this profession," so some of those bigger structures can support that. As with everything, there are good and not so good versions of different practice ownership and structures. I think a blend is healthy for our profession.

Professor Argo: Peripherally to that, you have to work out that the costs are high for various reasons. For us in the north and in Ireland and other parts of the UK, remote costs a lot as well—actually maintaining practices. Those practices are small, but the areas that they cover are vast. If you actually want good animal welfare, you have to subsidise it. That is something Scotland does very well, to an extent, with the Highlands and Islands veterinary services scheme. It very clearly states that they will support the cost of getting vets out to animals—otherwise,

we have no crofting community; it just completely goes at that point. So, yes, the CMA is one side of it, but there is other stuff that we need to look at as well.

Professor Parkin: Just a couple of quick comments on the CMA—I think we really need to keep an eye on and make sure we work with the CMA to make sure that any of the remedies that are placed on practices are proportionate.

The other aspect that we have not really touched on is that this is about household pets and there are mixed practices out there. The same remedies will come to those veterinary practices, so we have to ensure that there is a way of dealing with those remedies within the mixed practice, where you will have a farm animal group of individuals working, you will have a farm animal part of the practice, and you will have a small animal part of the practice. The small animal part of the practice may be the more profitable bit, and if you start hitting that with overly burdensome regulation, what does that mean for the farm animal part of the practice?

Chair: To Caroline's point about the remoter communities, you have to look at it as a whole and not as a set of constituent parts.

Q614 **Jayne Kirkham:** I want to quickly return to corporate ownership, because that is quite striking. I used to be a lawyer, and in law and other professions that has not happened to the same extent. I want to ask you a bit more about that, because obviously that would introduce another layer—a kind of profit motive—that was not there before on top of the practice. Do you not feel that? Am I getting that wrong? Do you feel that has made a difference? It is striking how big the corporate ownership is now.

Dr Williams: I always think that is a really weird argument. I will explain why I think is a weird argument, and I should declare a couple of things. I have worked for nine veterinary employers—three of them were the big groups—and one vet school and five independently owned practices. When I am not doing this role, I am employed by one of the large groups.

If we take a large group as a kind of archetype, let us say it is operating 200 veterinary practices. If we go back in time 25 years ago, those 200 veterinary practices were all independently owned and they were each making £500,000 a year net profit. When you aggregate them, they are suddenly making £100 million net profit, so what has changed? Nothing has changed. There is this idea that independently owned vet practices are not there to make a profit—they are there to make a profit.

Q615 **Jayne Kirkham:** It is not that. If they are owned by a bigger company who have shareholders, they will want dividends on top of the people who work in the practices. I suppose it is that extra layer that I am thinking about.

Dr Williams: Yes.

Q616 **Chair:** Okay. I am acutely aware that I am straying into the territory of special pleading here, so I am going to do my best not to.

Rob, you spoke about being a driver for innovation. Caroline said that for mixed practices, it brings some real challenges because what will work in our exclusively small animal practices then has very different implications. For a mixed practice and the further you get away from the big centres of population, the more acute these challenges become and the more difficult it becomes to sustain that.

If you look at some of the interim proposals, there is the idea that practices will have a prescription charge cap—I think £16—but we hear that veterinary surgeons cannot actually provide one profitably for that amount. If they are then having to direct clients towards online pharmacies, what sort of innovation do you think that is going to drive? Give us a BVA answer first.

Dr Williams: Okay. The BVA answer is really simple: that is something we are concerned about. The reason we are concerned about it is that currently there are 18 online veterinary pharmacies operating in the UK.

Q617 **Chair:** Who owns them?

Dr Williams: Two of them are owned by two of the large groups.

Q618 **Chair:** Is that the transparency that you are talking about?

Dr Williams: That needs to be at that level as well.

Chair: It is not at the moment?

Dr Williams: No, it isn't. Those two online pharmacies, operated by two of the large groups, account for somewhere between 70% and 80% of the online veterinary medicines market, so it does seem very ironic that the Competition and Markets Authority would offer that up as a remedy to a deficit it has identified in the supply of veterinary medicines. Its view is that there isn't an open market in the supply of veterinary medicines, and the market does not operate in the way that it would expect if it was looking at that kind of transactional market typically. Its view is, "Well, we need to open this up, and the way we can open it up is we can force veterinary practitioners to indicate to people that, 'You can obtain sales from elsewhere.'"

The problem is that if the default is to go online, and 80% of the market is cornered by two operators, the other four large groups will inevitably buy four of the currently independently owned online operators. The other 12 will slowly wither away to nothing, and the six will not be able to make it all work. It will end up with there being three, probably, online veterinary retailers that are owned, operated and controlled by three of these large groups. That does not seem to be something that is compatible.

Q619 **Chair:** I begin to understand why the share price of the corporates went up after the CMA's interim recommendations came out. As I understand it—and look, I am partial in my understanding of this; I fully declare that—you start with a situation where you have a price differential where the price difference is coming from the corporates—these are the people who are charging the higher rate—and you are then going to create problems for the independent practices. You are going to drive the clients of the independent practices towards online pharmacies that are owned—some of them, as you just very fairly described—by the larger corporate groups. We do this all in the name of increasing choice and driving down cost for the consumers. Is it possible that there might be a little bit of room for refinement in the thinking here?

Dr Williams: I would have thought there was.

Chair: We will see what we get.

Dr Williams: Yes, exactly. We are speculating because we do not know what the final outcome is, but we did make this representation quite robustly when we had a formal hearing with them and pointed it out.

Chair: The CMA has been very generous. It has given us a private briefing already and I think, when we see the final outcome, we may well want to return to it—but we keep saying that about everything that we look at. I think we have probably taken enough on this issue, and the reforming of the Veterinary Surgeons Act is a very important part of the regulatory framework. Josh, you are going to lead some questioning on that.

Q620 **Josh Newbury:** Yes, thank you. The original Act, as we know, will be 60 years old this November. Unsurprisingly, the chief vet, the Food Standards Agency and the British Veterinary Association are all calling for a new Act. The Government clearly agree because, as you know, DEFRA launched a consultation back in January setting out the changes that it believes are needed. But clearly we have a lot of expertise on the panel, so I would like to ask all of you what you believe are the priorities that a new Act needs to address. Perhaps I can start with you, Tim, because you did reference the need for a new Act at the top of the session.

Professor Parkin: Sure. So, backing up, the royal college has been calling for this for a long time. We had a legislative working group that started in 2016 and reported in 2021, which was the basis for many of the initial discussions or sprints that we had with DEFRA to frame the consultation as we have it at the moment. The consultation closes at the end of March, so I would encourage anyone to respond to that consultation.

Some of the clear benefits of the reform that we want to see are that, first, we talked about practice regulation. There is also recognising the veterinary nurse title and protecting that, and increasing the scope of the work that they can do. We also recognise that there are plenty of acts of

veterinary surgery, which are likely to be renamed veterinary acts, that are undertaken by our allied veterinary professions at the moment in an unregulated manner. We think that it is really important, if we are going to be holistic about animal health and welfare, that they become part of the regulatory umbrella as well, so that they actually undertake those acts of veterinary surgery or those veterinary acts in that regulatory framework and we clearly delineate who does what in terms of the different professions.

The disciplinary process we have at the moment is very backward looking. It is really harsh. Actually, we want something that is much more prospective in terms of helping vets and veterinary nurses as they go through those disciplinary processes. Finally, the other thing I talked about near the beginning was about conditional licensure, ensuring that we can genuinely open up the profession to those who may have previously thought it was unattainable for them.

There is a raft of benefits that we can take from this. The royal college has done an enormous amount of work, through the fact that it is the royal college, to try to plug the gap as we are going along. We have had the voluntary practice standards scheme that, under this reform of the Veterinary Services Act, would become a mandatory scheme. It would look very different from what it looks like now. We have been able to do lots of things like that.

I have referred to VetGDP. I have referred to the RCVS Academy, and the additional learning that we have put in place. That is all about professional leadership, ensuring that the profession moves forward and becomes a better and better profession as we go along. The royal college as a regulator has led on that. We are in a unique position to be able to do that with our charter. Many other regulators do lots of the things that we have been doing for a number of years, following on our coattails.

It is a really critical time. We need to make sure that the reform suits what we need for the future but remains flexible for the future as well, so we do not end up in this position again in 60 years' time where we are really handcuffed by the legislation we have at the moment.

Q621 **Josh Newbury:** Any other thoughts on priorities for the new Act?

Professor Jones: Building on Tim's point about licensure, we think there should be as much flexibility around licensure as possible. We sit on the registration committee of the RCVS, and we review cases of, for example, someone who is a 30-year qualified, incredibly highly specialist pathologist but has not graduated from an RCVS accredited programme. Our default position, after some temporary measures, is that they need to sit the statutory membership exam for omnicompetence. It is that flexibility, and that needs to be captured within secondary legislation rather than pinning too much down in primary legislation. We have shown we can work as a college and a profession to come up with good solutions around that.

Again, to echo Tim's comments around it being the college that regulates, I think that because of our scale we have had to. It continues to be a positive for us that we can work in a very integrated manner to not only set and maintain standards but to help vets be the best vets they can be, through the educational piece and the advancement of the professions piece. As vet schools and other interested parties, we can and currently are genuinely contributing to that. Separating out those functions in a way that would not allow for any funding or meaningful work in that joined-up way is a real risk to how we currently operate.

Dr Williams: Yes, as I think I touched on briefly, I am going to agree fully with Tim and Matt. The current deficit and the lack of business regulation is definitely something that is just not acceptable. A way of thinking of the 1966 Act is that it is actually reflective of possibly a slightly earlier time in history, maybe even the 19th century conception of what a profession is. It definitely is no longer reflective of what the profession is today and what it will be in 50, 60 or 100 years' time, so it is enormously important.

Q622 **Josh Newbury:** You have touched there, Tim, on the benefits for the wider veterinary workforce. There has been lots of talk, for example, around protections for the role of veterinary nurse, but what other benefits do you think that the Act needs to have for that wider workforce, which has clearly evolved an awful lot since 1966?

Professor Parkin: There are several "veterinary professions" out there that would clearly benefit from the privilege and the regulatory framework that protects them in terms of what they can do and that actually makes it clear what their role is and how they interact as a wider veterinary team. There is also the benefit that they would receive from the advancement as a profession and the additional training and enhancement that they would experience as part of being a regulated profession. It is really important that as many as possible of those allied veterinary professions seek to become a regulated profession.

Dr Williams: Just to expand a bit on that, if we are thinking about the resilience of the veterinary workforce over time, because we are in an agricultural setting, there is a group of veterinary professionals called veterinary technicians. They largely work in farm animal practice, and they do an awful lot of really welfare-focused interventions to support farmers, under the direction of veterinary surgeons, to deliver activities that probably would not happen if it was just left to the farmer.

Bringing a group like that into this regulatory framework then expands out the people who are available to deal with animal disease outbreaks. If we have foot and mouth disease or African swine fever, those types of things, we would not just be relying on MRCVS; we will have this additional recognised profession that have the right skills to help with that intervention. There is a lot at play here that would really be beneficial.

Q623 **Josh Newbury:** Would that include vaccination as well?

Dr Williams: Potentially—I suppose the scope is open. It would be for the regulator to define ultimately what the scope of safe practice was for each allied profession, but, yes, presumably it could be something that they could do.

Q624 **Josh Newbury:** Clearly, there are a lot of opportunities for a new Act, but the Chair always reminds us that the law of unintended consequences is never far away. So what might be the unintended consequences of reforming the Act? What are the pitfalls that we need to avoid before this comes in front of the House of Commons?

Chair: Let me give you a prompt, because I have been thinking of exactly this. It is already difficult to get vets out on to farms for animal welfare, disease surveillance and that sort of thing. If you start sending out people who are not vets—albeit very capable, professionally qualified vet techs and the rest of it—might there be an unintended consequence? I cannot lead you any further than that.

Professor Parkin: Well, unintended consequences are almost by definition very difficult to identify, aren't they? One of the big pieces of work with the reform of the Veterinary Surgeons Act is to clearly define what an act of veterinary surgery is and to clearly define which professions hold which veterinary acts. Not doing that adequately could end up with there being some concern, so it is really critical that that is one of the first things to do.

I think this is several years down the line, and actually bringing allied veterinary professions in isn't going to happen all on day one. There needs to be plenty of time to talk about this and to discuss with those allied veterinary professions exactly how they come on. There has to be risk-based approaches to bringing different allied veterinary professions in. This isn't something that is going to be rushed. We are not going to be looking at something that is totally different in two to three years' time. This is a 10-year project.

Professor Jones: Building on that, a new Act that sought to be over-prescriptive and tried to solve every specific scenario and act would just tie us up in knots. Again, it is this primary and secondary legislation split, keeping enough flexibility while defining the critical role of multiple professionals working together for the public benefit—for client benefit.

Professor Parkin: The risk of not doing this is far greater than any potential unintended consequence. If I talk to my North American colleagues, they talk about in rural states, miles and miles apart, farmers are now doing a C-section on a cow because they cannot afford to call a vet out. The animal welfare implications of that are enormous. I am not saying we will get anywhere near that, but the risk of not doing this is far greater than potential unintended consequences.

Dr Williams: Yes, and there is a risk of not reforming the disciplinary system that exists now, which is very backward looking and punitive, and flipping it to fitness to practice, which is much more person-centric and supportive in its approach. It is premised on recognising that a whole variety of things happen to people in the course of their lives that may impact their ability to perform the role of veterinary surgeon or other regulated professional safely.

Flipping that has to be in the public interest because I am sure, if we were not on record, we could all come up with stories about vets who probably should have been encountering that. Because the system is overly rigid and overly prescribed in legislation, and has this one-dimensional aspect to it as it currently exists, I think not being able to reform that and bring it into the 21st century would be a huge risk as well.

Q625 **Josh Newbury:** Yes, absolutely. That point around the current Act being too restrictive and the need to change that with the new Act was one unintended consequence that I thought of, because clearly we need this legislation to be able to flex a little, as you said, over the next 60 years, so that we do not find ourselves in exactly the same position. It is good that we are on the same page with that one.

I am getting the impression that this is well overdue and needed as soon as possible but the Minister, Baroness Hayman, has been clear in correspondence with the Committee that DEFRA is going to be bidding for a slot in the third session of this Parliament. Given that we are only just coming to the end of our first session, new primary legislation might not be out till towards the end of next year, possibly even 2028. Do you think that the Government are really recognising the urgency of the need for this reform?

Professor Parkin: I would hope so. We have been banging on the door about this for a long time. We fully recognise the need to go through the process, and it will take time. We welcome that because we want to make sure that it is right and that the right bits get into primary legislation to maintain the flexibility.

The one area perhaps of concern is, if orders come from the CMA to the regulator, we need to make sure that those orders are aligned to whatever comes from a future reform in the Veterinary Surgeons Act. We need to make sure there is a bit of joined-up thinking there. That is what I would say.

Dr Williams: Our understanding from Baroness Hayman is that she is fully behind it and, by definition, the Government are fully behind it. We should pay tribute to the work the civil servants at DEFRA have done to get us to this point. They have done a huge amount of work. We would be better to take slightly longer to get it right than to rush it and not get it right. The fact we might have to wait 61 and a half years, or 62 years, is probably worth it, rather than saying, "Well, on the anniversary in

November, we are going to just magically do it." I think that would be a bad idea.

Q626 **Josh Newbury:** In the meantime, then, are there practical steps that the Government can take to address some of the most urgent issues in the profession? What are those things that we can just get on with, without the need for a new Act?

Dr Williams: I am going to speak out of turn, but I am not sure there are. The four areas that the DEFRA consultation speaks to are things that do require fundamental reform at a primary legislation level rather than tinkering. I think there has been enough tinkering.

Professor Parkin: Yes. I think I have referred to it before, but the fact that the royal college is a royal college that has a charter, which enables it to do more than a normal regulator, has been essential. We have flexed and stretched as much as we possibly can. We have put a lot in place that we would like to see as part of a new reform of the Veterinary Surgeons Act. It is a matter of keeping on going and pushing as hard as we can to make sure that this does come to pass.

Chair: I have been a Member of Parliament for 25 years come June and in that time the BVA and the royal college have been telling me how urgent this is. If we now end up with unintended consequences because we rushed it, that breaks the definition of irony. I feel that tells you more about the deficiencies in our world rather than in your profession.

We are going to move on to questions around the animal welfare strategy.

Q627 **Sarah Dyke:** The animal welfare strategy for England was published towards the end of last year, outlining major reforms to raise standards for pets, livestock and wildlife. It focuses on the moral duty to protect animals, and the strategy emphasises that animal welfare is intrinsically linked to the economy, environment and human health, and it aims to implement these changes while considering the cost of living and the impact on UK businesses. How will the veterinary sector help deliver the ambitions of the animal welfare strategy for England? I think my questions are probably aimed mostly at Tim and Rob, but please do come in if others feel that they need to.

Professor Parkin: Please do come in if you wish. To be fair, the focus of the royal college to date—certainly over the last 18 months—has been on the Veterinary Surgeons Act and the CMA. We recognise the consultation is out at the moment on this, and we will be looking to respond to that.

I think, as you highlight, our response will primarily be—we are very supportive—about considering the impact on the workforce and understanding the vets' provision and the additional requirements associated with the new proposals that are going to come in. We need to look at that and understand exactly what that might mean. Rob, I don't know whether you have got more.

Dr Williams: Yes. We are broadly supportive of almost everything that is in the animal welfare strategy, a lot of which we have been advocating for on behalf of the profession.

What can the profession do? Well, at our level, we can help guide the policy. From our expertise and our experience, we can help shape it. I suppose the thing with animal welfare legislation or animal welfare regulations is that they are all to do with enforcement, and maybe that is the thing that is always missing. The Animal Welfare Act 2006 is an amazing piece of legislation, but I am not aware that there have been very many convictions brought directly under specific provisions of that Act. You can have all the animal welfare legislation you want, but if it is never enforced or it is not monitored whether people are conforming to the regulations, that is troublesome.

Q628 **Sarah Dyke:** That leads on to my next question. The strategy proposals rely on voluntary action from farmers, breeders and the industry. What kind of pressure is that going to lead to within the veterinary sector?

Dr Williams: I think in production animals, so in farm animals, there is always a tension because the farmer is trying to produce animals in a way that generates an economic return, so their farm is sustainable and they have an income, and sometimes that will lead them to do things that are suboptimal from an animal welfare point of view—just deeply ingrained husbandry practices. It is quite difficult sometimes for vets to call that out.

Vets are often in a really difficult position because their job is to help support, guide, give service to and give support to—like human support. I think sometimes there is an uncomfortable tension there. Where there needs to be step change, it does require meaningful input from all of those stakeholders so that it does not go too fast such that the farmers say, "There's literally no way we could do this because it's unreasonable to expect us to change this quickly."

There is also making sure that other legislation does not come into conflict with the intent of the animal welfare legislation. I know there are issues around poultry housing and planning law versus poultry housing and animal welfare law. We need to have a more holistic view across different aspects of Government and different aspects of how the law works, such that those tensions disappear. There is a recognition that to have more animal friendly and appropriate housing for poultry requires a larger footprint for the housing of those birds, so I think that kind of thing is really important.

Sarah Dyke: Matt, you wanted to come in.

Professor Jones: Yes. A specific example where it is working really well and sets out a template is the animal health and welfare pathway around farm animals. That has been entirely vet and industry engaged with the Government setting out that first phase, which is voluntary at the

moment, but it has so much upside to it. It is farm vets doing the kind of work they want to be doing in terms of on-farm advisory work and herd health work, and taking a proactive perspective to improve welfare outcomes as well as productivity.

Those are opportunities for new graduates in particular and senior undergraduate vet students. We have a particular link through Jonathan Statham, who chairs the Animal Health and Welfare Board. That work is fed into our undergraduate curriculum starting in year 1. It is a really nice feedback loop of driving positive, proactive engagement with industry for good outcomes. It is part of the day job for farm vets, so it is not an additional burden on them.

As I understand it, the challenge will be when we move to phase two—where it is mandatory—as to whether we can keep that level of engagement. When the uptake of these approaches is mandatory, does the profession stay adequately engaged to make sure that it stays positive rather than punitive?

Q629 **Sarah Dyke:** Yes. The other side of that would be: does the sector have the resources for the checks and advisory work that is going to follow? What are your feelings on that?

Professor Jones: My understanding is that it is part of the day job to be there as that proactive farm adviser on site. If it is another set of checks and balances rather than the partnership advisory role, I don't know quite how will play out in terms of those mandatory inspections and checks, and that is the key. As I understand in other jurisdictions—in Ireland and Australia—at that mandatory phase, it has worked quite well. The feedback I get through Jonathan is that this is a really good standout example of working together.

Professor Parkin: When anything like this is brought in, clearly the key is that we do not end up with an unintended consequence, going back to the previous conversation, where the cost of introducing this means that farmers do not do something else that could actually provide greater welfare benefit. This should not just become a tick-box exercise that actually costs the farm something; it should actually have zero impact.

Dr Williams: I was just going to echo what Matt said. The best thing that could be done is to look at what is successful now and try to get the essence of that and replicate that in the other parts of the pathway. So things like the voluntary animal health and welfare pathway, which works—there is something about it that makes it work. I would be most curious to understand, "Well, what is it specifically and how could we take that learning and apply it elsewhere?"

There are other little things. In Wales, enormous progress has been made on antibiotic stewardship. Again, that is through partnership and understanding what drives farmers to act in a certain way and what drives vets to act in a certain way. How can we unpick that so that they

behave in slightly different ways? Then we see massive improvements in the use of antibiotics. I would not look to reinvent the wheel. I would want to understand why something works and then how could we replicate that everywhere.

Q630 **Sarah Dyke:** Unpacking that a bit more, what does that good engagement look like? Because there is that risk, isn't there, of possible conflict between farmers and the veterinary industry. What would that model look like? What would good practice look like?

Dr Williams: It is truly understanding the farmer's perspective and the vet's perspective, and then actually working in partnership with them to figure out what is the best way forward. In Wales they have been very successful at that. I know with Johne's disease control, they have similarly been very effective at understanding the perspectives of the stakeholders, and then allowing the stakeholders to develop the solution, rather than, "We have had a genius idea in an office in London"—no disrespect to anybody—"and now we're going to just impose it on you." This stuff is too serious for that sort of approach.

Professor Jones: That is exactly the feedback. The co-design in the non-mandatory stage needs to be preserved to the extent it can be. When it becomes Government owned, it can still be stakeholder-led.

Professor Parkin: Can I just say one more thing? The other thing is that all of our veterinary students who want to go into farm medical practice clearly understand the need that they are part of the farm business. They are not a veterinary practice that is looking to make profit out of a farm. They are actually part of the whole infrastructure of the farm to make that farm more profitable, whereby they benefit themselves. Getting that very different ethos and very different mindset for a farm animal practitioner is critical.

Q631 **Sarah Dyke:** Finally, the Government intend to work with vets to end certain farm practices, like pig tail docking, beak trimming of laying hens, and tail docking of lambs, for example, and improve that companion animal welfare. Again, going back to that engagement, what are the stepping stones to get us there, and what will it look like? How can we develop and empower farmers?

Professor Parkin: Interesting. My first publication as a veterinary student was in 1996. It was all about tail docking in sheep.

Sarah Dyke: I think I read that.

Professor Parkin: Did you? I can send it to you.

Sarah Dyke: It was after I graduated.

Professor Parkin: For me, the key around all of this is actually being evidence-based. I would point the fact that, on tail docking in lambs, there is a good reason for tail docking lambs. There is clearly an evidence

base behind that. Having been involved in developing the tail docking work in Scotland in dogs, I think it is really important that any changes that are made like that—there is a reason we do lots of things and we need to examine the evidence and ensure that everything that is brought in is evidence-based.

Sarah Dyke: Yes. Thank you.

Chair: Sarah, thank you very much. We are going to come on now to the work of the Veterinary Medicines Directorate.

Q632 **Jayne Kirkham:** The first question is: how effective is the Veterinary Medicines Directorate at delivering its statutory obligations, whether that be on regulation, authorisation or monitoring of medicines? Do you think it is doing a good job? How do you get on with the directorate?

Professor Parkin: I know the royal college speaks to the Veterinary Medicines Directorate all the time. Clearly, as part of the voluntary practice standards scheme, we do part of its role in terms of monitoring. When you ask the question of how well someone is doing their job, actually I don't have the metrics to really be able to state whether, yes or no, the directorate is doing an effective job. I think I would find that very difficult.

Q633 **Jayne Kirkham:** In its communication with you, the way that it deals with vets and the cultural way that it does things, would you say that it is working well?

Professor Parkin: I can speak from a royal college perspective. We often have communication with the Veterinary Medicines Directorate. I have no suspicion that there is anything averse with respect to those comms. I cannot speak from an individual vet's perspective or from a practice perspective.

Q634 **Jayne Kirkham:** So you all feel the same?

Dr Williams: It was alluded to very briefly, I think, at the start that we have had a lot of interaction with the directorate with regard to veterinary medicine supply in Northern Ireland. It is very open in discussion and we find it quite easy to work with.

Jayne Kirkham: That is good. I will move on then.

Chair: If veterinary medicine ever pales, you could have a great future in the diplomatic service.

Q635 **Jayne Kirkham:** I have had a lot of contact from constituents—and I think other MPs have as well—about watercourses and waterways and the impact of flea and tick treatments on them, particularly those that we regularly use on pets. The VMD has come up with a road map, which has short term, medium term and long term aims, but it is quite general. There are no timescales on it or anything. I want to ask you a bit about what you thought about this issue. Do you think it is something that vets

could be raising with pet owners, and should these treatments be given on prescription? Do you think they should be risk based when they are assessed? Should you give them out, or should we carry on being able to buy them pretty much over the counter?

Dr Williams: This is a great example of where people were trying to do something with good intent and then the information that is available to us has changed very rapidly. We were not aware of this potential environmental impact, or very real environmental impact, five years ago—or even three years ago—and now we are. All of the things that you suggested are reasonable things that, increasingly, my colleagues are very mindful of and are trying to re-educate both themselves and pet owners about what is appropriate. Previously we thought that activity x was appropriate and now we are coming to understand that it may not be appropriate in quite the way we thought. Moving to a risk-based use of those products is definitely something that we would advocate.

Environmental awareness and sustainability, in a climate change context, is something that has really gained traction in veterinary in the last eight to 10 years. That is in all aspects of it—farming and running practices and every aspect of it—and this is just another facet of that. There is increasing awareness and recognition that we need to change the advice that we give to people because we have new information.

We do this all the time. The neutering of animals is something that we had advice about that was really rigid pretty much the whole way through my career. But again, in the last five or six years—as the evidence base and our understanding at a breed level about what is appropriate have expanded—our advice has become much more nuanced and much more individualised to a breed type and their age and different things. As we understand more, we are very adept at changing what our default advice is.

Q636 **Jayne Kirkham:** It is just because the VMD road map is quite slow. What you seem to be saying is that you could look now, because the evidence is there, to move to some of the different ways and even prescribing.

Dr Williams: Emerging evidence is there now, yes. There is a subtle difference between the evidence emerging and it being robustly documented. It is at the fledgling stage but, to your point, our colleagues in practice are already changing what they are doing.

Professor Parkin: From a veterinary school's perspective, I started in Bristol just over five years ago. This was not on the curriculum five years ago and it now is, so it is clear—

Jayne Kirkham: It is changing fast.

Professor Parkin: Yes, absolutely. We make sure that our veterinary students are fully aware of all the implications. The National Office of Animal Health advice that came across my desk just recently on this area

is really useful—really critical. I think we can only push vets so far and only persuade the public so far. That is the difficult thing.

Q637 **Jayne Kirkham:** Do you think people are receptive to that? It has become something that is quite ingrained that you go and get your flea treatment and treat your animal. Would it affect your business?

Professor Parkin: We are battling against advertising, and against social media. It is very, very difficult.

Jayne Kirkham: Yes. That kind of thing, and the labelling and everything else, would need to change too. Thank you very much.

Chair: Ultimately, that is why we have a regulator. We are going to come to the final section, which is veterinary medicines access in Northern Ireland.

Q638 **Jenny Riddell-Carpenter:** We are going to talk about Northern Ireland and particularly the relationship with the EU. You will be glad to hear that we are coming to the end, so thank you for all this session. It has been really useful.

I will ask this to all of you if I may: how effectively are the new systems for accessing veterinary medicines in Northern Ireland working? Don't hold back because it is aimed at all of you rather than any individual.

Dr Williams: We don't know is the honest answer. There is a very simple reason for that. Because it was very well telegraphed that this change was coming, the wholesalers in Northern Ireland have stockpiled significant amounts of veterinary medicines prior to the rules changing. Nobody will know what happens until those stockpiles run down, so we do not know.

Q639 **Jenny Riddell-Carpenter:** Do you have an estimate of when that might be?

Dr Williams: Our gut feel—and this is only a gut feel—is that it will probably be sometime in the summer, maybe June or July.

Q640 **Jenny Riddell-Carpenter:** If the Government were to secure a dedicated veterinary medicines agreement with the EU, what practical difference do you think that would make for the sector in both Northern Ireland and the UK as a whole? With that stunned silence, I can confirm it is the last question.

Dr Williams: Sorry, I am just trying to think, in front of a room of politicians, how to try to say something that does not sound overtly political.

Jenny Riddell-Carpenter: No, feel free.

Dr Williams: Brexit happened for a reason and that is fair enough, but there are consequences to that decision. Veterinary medicines supply is a

great example. There was a system in place for the proceeding 35 or 40 years that worked, and it worked really well. Then this thing happened and that was all undone. That is definitely suboptimal as an outcome. If the Government were to negotiate a veterinary medicines agreement, where veterinary medicines that were licensed in European countries had the ability to be recognised as regulated in all countries, that would be very helpful.

From within the United Kingdom setting, it would unpick this very odd problem. Historically, veterinary medicines wholesaling happened from GB—this island—to Northern Ireland. Northern Ireland is in a very unique position. It is obviously part of the United Kingdom. It is also, in effect, still part of the European Union. I know that would not necessarily be a popular thing to say; one of your colleagues berated me for 15 minutes when I was giving a briefing for maybe saying that out loud but it is true. So Northern Ireland has to comply with European medicines regulations—that is a fact.

If we could somehow get to a situation where all of the United Kingdom were operating to the same rules and those rules were equivalent or consistent with the rules that operate in the European Union, that would be a better thing. It would ensure the continuity of supply of veterinary medicines in Northern Ireland without all these random workarounds.

Professor Jones: Just briefly, having worked in the pharmaceutical industry before and on projects and the development of new products, it was a system that worked really well. That scope of having the broader EU market made it much more viable to bring innovative medicines forward and there was nothing remotely wrong with that. It worked exceptionally well and it was a very positive interactive process in developing and regulating medicines. I think being part of that broader coalition that has the standards that we would be pleased to work to would be great if we could get back to that.

Chair: I cannot remember who it was who said earlier that unintended consequences are not always easy to identify. They can often be quite easy to identify, but they are also just as easy to ignore if it suits you. That is what often brings us into the place of difficulty where we have to unpick stuff later on in the day.

Can I thank you all for your attendance, and your engagement? It has been an enormously helpful, productive and informative session for the Committee. We do this as part of our inquiry into animal and plant health, but actually, what I hope we have been able to get from the session today comes from the rural affairs part of our Committee's title. It is about the important part that you play in the agricultural industry and the important part then, in turn, that the agricultural industry plays within rural communities and the rural economy, and the opportunity that so many of your members and your professional colleagues have to perform leadership roles within the rural communities in this country.

That is something that I think is enormously important. I am looking over your shoulders at the moment to the next generation sitting behind you.

There are clearly works in progress here—the CMA report, the forthcoming Veterinary Surgeons Act—that I think will require some attention from the Committee as we go forward. Your evidence today will be enormously helpful in shaping that, so we are very grateful to you for it. In the meantime, our proceedings for today are concluded.