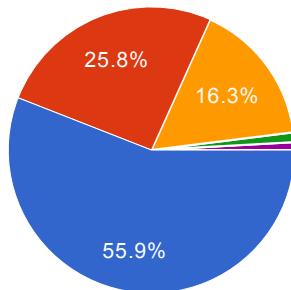


# 454 responses

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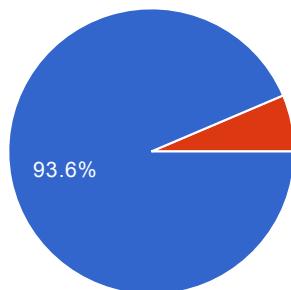
## Summary

**Please select which best describes your position?**



RVN	<b>254</b>	55.9%
Student VN	<b>117</b>	25.8%
Head Nurse (RVN)	<b>74</b>	16.3%
Practice Manager (RVN)	<b>5</b>	1.1%
Veterinary Nurse (not RVN status)	<b>4</b>	0.9%

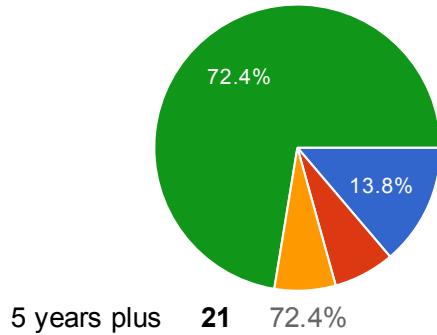
**Are you currently working in practice?**



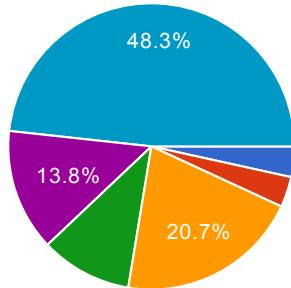
Yes	<b>424</b>	93.6%
No	<b>29</b>	6.4%

**Not Practising?**

**How long did you work in practice for?**

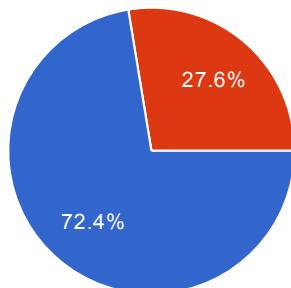


### What was your main reason for leaving practice?



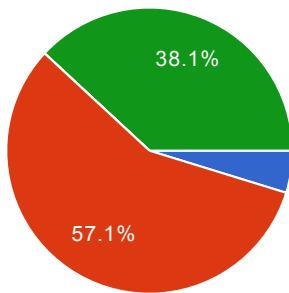
Family	<b>1</b>	3.4%
Relocation	<b>1</b>	3.4%
Salary	<b>6</b>	20.7%
Change of career	<b>3</b>	10.3%
Career Progression	<b>4</b>	13.8%
Other	<b>14</b>	48.3%

### Are you still working within the veterinary field?



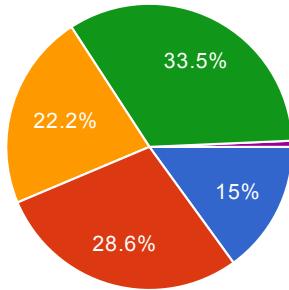
Yes	<b>21</b>	72.4%
No	<b>8</b>	27.6%

### If Yes what area do you currently work in?



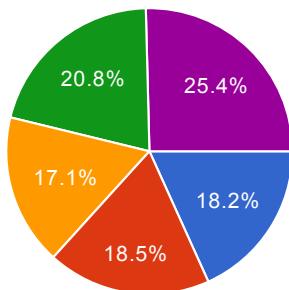
## In Practice

**How long have you been working in practice?**



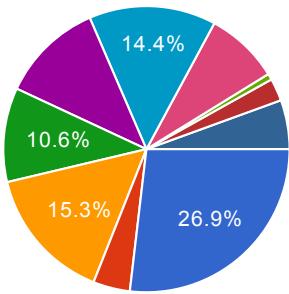
Under 2 years	<b>65</b>	15%
2-5 years	<b>124</b>	28.6%
5 - 10 years	<b>96</b>	22.2%
10 years plus	<b>145</b>	33.5%
Does not apply	<b>3</b>	0.7%

**How long have you been qualified?**



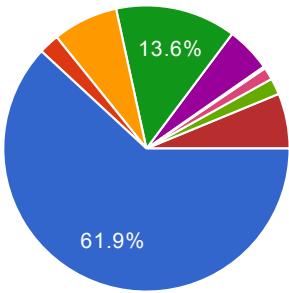
Under 2 years	<b>79</b>	18.2%
2-5 years	<b>80</b>	18.5%
5 - 10 years	<b>74</b>	17.1%
10 years plus	<b>90</b>	20.8%
Does not apply	<b>110</b>	25.4%

## Which region do you work in?



South East England	<b>116</b>	26.9%
London	<b>18</b>	4.2%
South West England	<b>66</b>	15.3%
East of England	<b>46</b>	10.6%
Central England	<b>50</b>	11.6%
North England	<b>62</b>	14.4%
Scotland	<b>36</b>	8.3%
Ireland	<b>3</b>	0.7%
Wales	<b>11</b>	2.5%
Other	<b>24</b>	5.6%

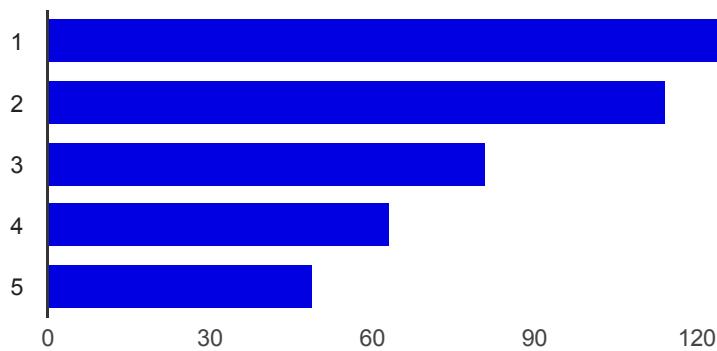
## Please indicate the type of practice you work for.



Private/Independent	<b>268</b>	61.9%
Group Medivet	<b>10</b>	2.3%
Group CVS	<b>32</b>	7.4%
Group Vets4Pets/Companion Care	<b>59</b>	13.6%
Group IVC	<b>22</b>	5.1%
Group Pet Doctors	<b>1</b>	0.2%
Charity PDSA	<b>6</b>	1.4%
Charity Other	<b>8</b>	1.8%
Other	<b>27</b>	6.2%

## Tasks

**Recognition from vets [Rank the following in order from most important (1) to least important (5)]**



1 **126** 29.1%

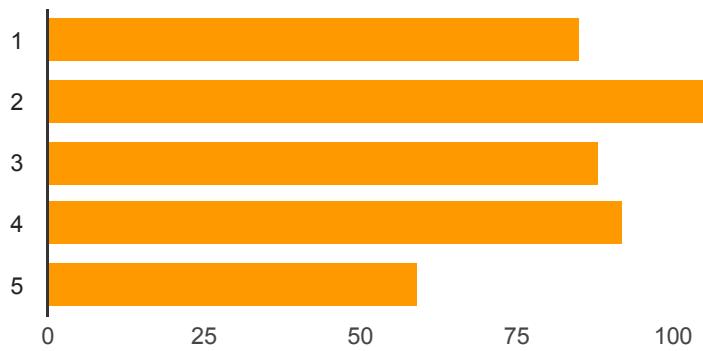
2 **114** 26.3%

3 **81** 18.7%

4 **63** 14.5%

5 **49** 11.3%

**Recognition from other nurses [Rank the following in order from most important (1) to least important (5)]**



1 **85** 19.6%

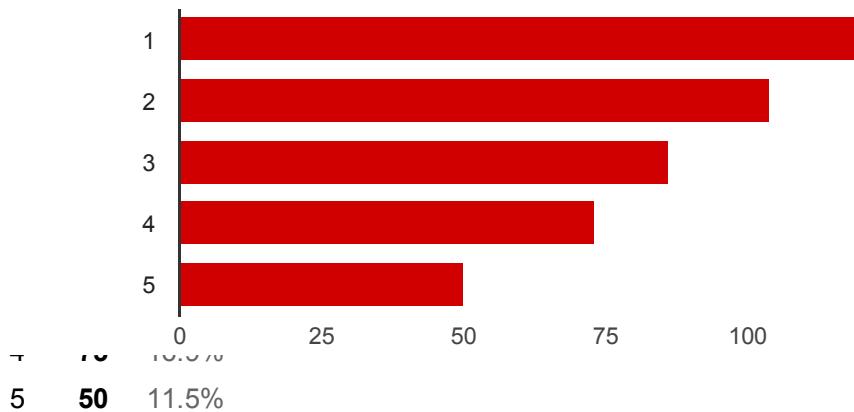
2 **109** 25.2%

3 **88** 20.3%

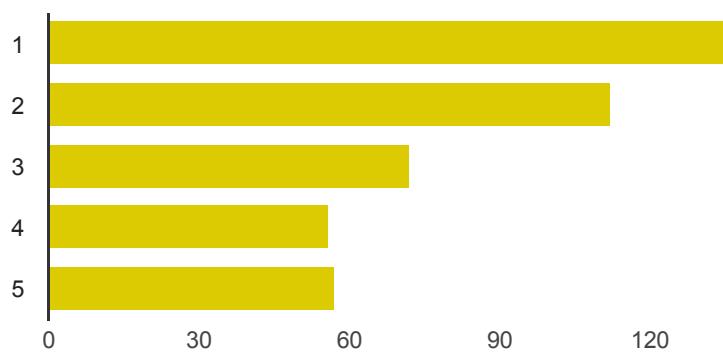
4 **92** 21.2%

5 **59** 13.6%

**Recognition from clients [Rank the following in order from most important (1) to least important (5)]**

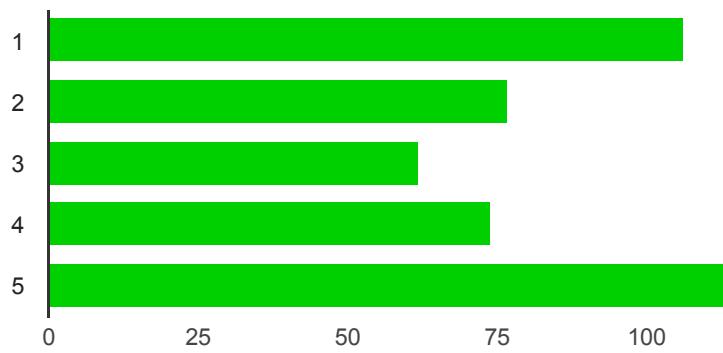


**Salary [Rank the following in order from most important (1) to least important (5)]**



1	<b>136</b>	31.4%
2	<b>112</b>	25.9%
3	<b>72</b>	16.6%
4	<b>56</b>	12.9%
5	<b>57</b>	13.2%

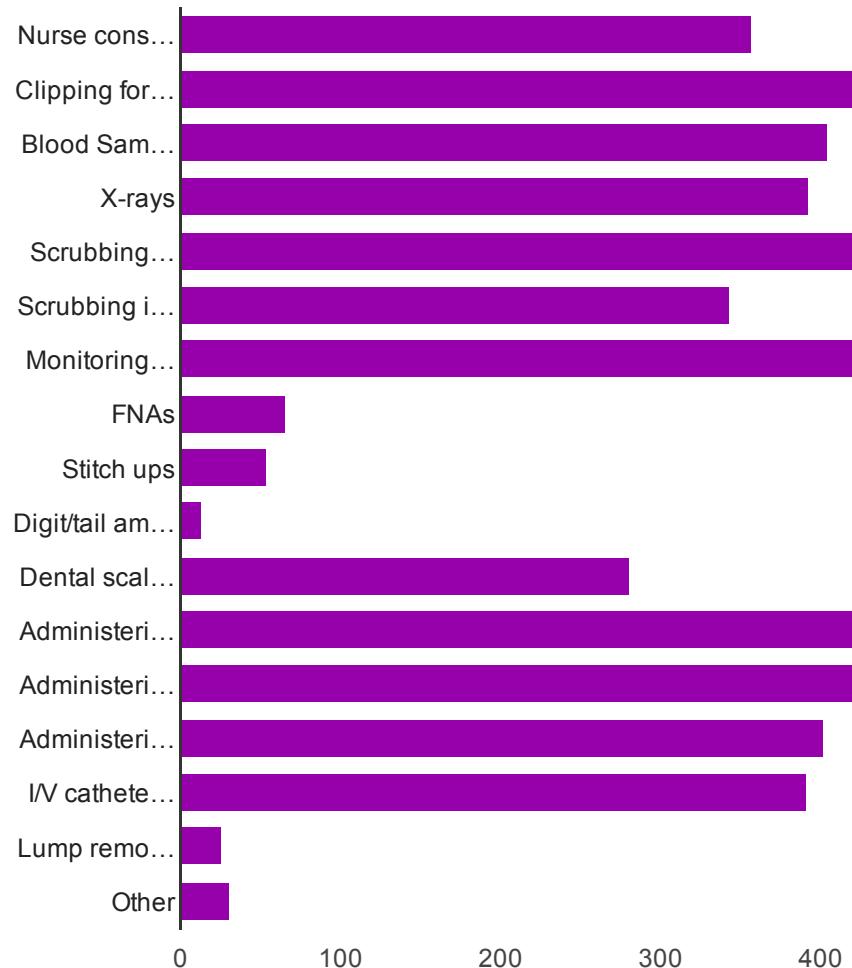
**CPD [Rank the following in order from most important (1) to least important (5)]**



1	<b>106</b>	24.5%
2	<b>77</b>	17.8%

3	<b>62</b>	14.3%
4	<b>74</b>	17.1%
5	<b>114</b>	26.3%

### Which of the following tasks do you complete in your practice?



Nurse consultations	<b>357</b>	82.4%
Clipping for operations	<b>422</b>	97.5%
Blood Sampling	<b>404</b>	93.3%
X-rays	<b>393</b>	90.8%
Scrubbing animals for operations	<b>426</b>	98.4%
Scrubbing in to assist with operations	<b>343</b>	79.2%
Monitoring anaesthesia	<b>422</b>	97.5%
FNAs	<b>65</b>	15%
Stitch ups	<b>54</b>	12.5%
Digit/tail amputation	<b>14</b>	3.2%
Dental scale & polish	<b>280</b>	64.7%
Administering medication (oral)	<b>425</b>	98.2%

Administering medication (S/C, I/M)	<b>425</b>	98.2%
Administering medication (I/V)	<b>402</b>	92.8%
I/V catheter placement	<b>391</b>	90.3%
Lump removals (not entering body cavity)	<b>25</b>	5.8%
Other	<b>31</b>	7.2%

## Do you feel your practice is using you to your full potential?



## If you answered NO how could this be improved?

Training nurses to do schedule 3 surgeries, more nursing consults

Being able to carry out more consultations (supported by vets) as although we do some consults, vets don't refer enough to us.

doing more with bandage change and wound management

more nurse consults nurses doing minor ops (under schedule 3) more responsibility less cleaning

### Training

Better staffing ratio, need more ANA's to free up nurses to do nursing!

I feel I could be asked to do more schedule 3 tasks, more frequently. My practice could make more use of nurse clinics. Rather than just parasite control post op checks & admits + discharges

We are allowed to nurse to our full potential as we are expected to fulfil so many other roles within the practice. We spend too much time doing admin and cleaning

By doing all the things I am legally allowed to do but not given training

### More schedule 3 opportunities

could do more testing and clinics such as skin work ups fnabs all xrays, kidney clinics diabetes monitoring and communicating with owners etc

### More schedule 3 and anaesthesia

More clinics Nutrition advice including raw More tire testing Laser therapy Pain clinics

Actually Use rvns to do dental scale and polish & stitch ups

Nurses are not given enough opportunities to complete Schedule three tasks

### More lab equipment

More freedom to perform surgery where applicable with schedule 3, lack or staff and

occasionally organisation mean it is quick to allow a vet to do a scale and polish or lumpectomy than allow a nurse to develop those skills.

Difficult at times to get hands on when I have to be the one to monitor the patient as staffing can be limited at times

I would like to be allowed to do schedule 3 procedures

More minor surgery not entering a body cavity

Lump removals and stitch ups

Would like the opportunity to do lump removals and minor surgery such as stitch ups

Improved awareness of what an even can legally do, vets are often unaware.

Allowing/assisting with progression of skills such as suturing/minor surgical procedures.

Listening to staff

In all other practices I've worked in, nurses are never used to their full potential with most vets choosing to use them just for restraining, cleaning, monitoring

Do more schedule 3 work and nurse consults/clinics

I would love to be more involved with schedule 3 ie lump and tail amputations etc, I would also like to be able to do 2nd vaccines as I used to do it in my last practice and know I can

I used to work in charity practice where I carried out schedule 3 procedures and feel I was utilised well. Now I'm a university setting I feel I am utilised well for a referral environment.

Do not wish to do any further schedule 3 even though have in the past.

I would like the opportunity to carry out more schedule 3 work, more nurse consults, more inpatient care, less reception

Nurse consults in my new practice are far more limited than I have been used to. I would like to see this improved and be able to use my skills in in this field again.

I know I am capable of more and have been allowed to perform a lot of schedule 3 in previous jobs.

I feel the nurses in my practice should be allowed to carry out minor surgery such as stitch ups an lump removals to take some of the pressure off the vets when there are many busy days of operations for them to get through.

More schedule three

More schedule 3 I am not just the cleaner and to clean up after everyone else

>90% work is reception and cleaning. Would like more opportunities to do nursing tasks including schedule 3

Being allowed to carry out more schedule three procedures. Expanding nurse consults more

I wish to use my knowledge to its full potential.

would rather do more minor ops

More schedule 3 tasks

Let nurses do more. RCVS have taken away lots....

more referrals of clients to myself and other nurses for nursing clinics and advice.

Would like chance to do nurse consulting

Student- More teaching time in practice

We only get a chance to do iv catheters, blood samples, nurse consults if the vets are too busy.

Time and cost of educating me to do so willing (I work part-time) I should like to learn to do stitch-ups, lump removals, FNA's, digit/tail amputations. It is very difficult to find time (and the money) to do this in a busy, understaffed small practice. However, it is something to strive for!

Could do more surgery but I need to be competent in doing this and have not have the training in this yet

More post grad courses

they have been missing a RVN for a while now i just started working for them part time my hope is they will in time use me for more tasks

More schedule 3

Support and opportunity for experience

Let us do what we trained for. Employ kennel assistants and cleaners so we can nurse.

ratio of vets to nurses is outweighed - often vets just do the tasks as we are the ones that hold the animal etc.

Could be allowed to do more surgical tasks. Nurse consults- anal glands, 2nd vacs, id chip. All left to vets

Having more nurses so that we were able to do more without that extra person being a vet and therefore doing lots themselves

Hiring another nurse. Therefore allowing potential for more work to be generated and allowing nurses to do more procedures. Unfortunately there aren't many nurses around.

Vets allowing nurses to do what they have trained for

Feel like a cleaner only get to do things the vets don't like or don't charge for.

Increase of nursing staff (or support staff) to allow RVNs the time to complete tasks that they are capable of doing but gets normally do. The mindset of some vets would also have to change to allow nurses to do more than they are capable of.

Nurse consultations and clinics, more awareness of VN role as clients seem to think we don't have any training for some reason.

Letting nurses do what they are qualified to do, I.e. Lump removals, stitch ups.

Rather than being told why should I let a nurse do it when a vet can do it...

Our head nurse favours certain student nurses and will help them, give them time to carry out studies and give them the opportunity to complete nursing logs. 2nd year students who need to be signed off on things to progress on don't a look in over some 1st year student. Overall it would benefit other nurses and the practice.

We have a lot of students because we are a university teaching hospital so often

they get to do things that I could do

Our practice is over staffed so not enough patients to go around.

Minor surgery, scrubbing in to assist, dental scale and Polish, suturing

Could do minor surgeries More consulting appointments Scale and polishes

I would like to develop the nurse clinics further

Would like to do more hands on. Would like to do more nurse consultations

I am a locum so this will vary but from what I tend to see and how I feel I am utilised

I would still say as a general "No".

Vets take most of bloods and place catheters due to lack of nurses. Also they have to do a lot of consults we could do due to lack of resources

Schedule 3 procedures

Increase number of receptionists so that nurses don't spend so much time answering phones. Employ kennel assistants to keep on top of cleaning/laundry.

Listen and trust

More staffing. Things to nurses could be doing for example bloods scale and polish a vet will do because there isn't a second nurse to restrain/monitor.

Schedule 3 procedures, nurse consultations

Trying to do too much. Need to do what interests me and I'm good at. Rather than covering short staffing

More minor surgery procedures

More staff to enable nurses to help vets more is take bloods etc

Could be doing FNAs, stitch ups and digit amputation to help free up vet time on busy days.

More schedule 3 procedures ie stitch ups, minor lumpectomies

Allowing nurses to carry out dental hygiene (descale and polish) or stitch ups ect.

By actually letting me do my job as a nurse i am allowed to fo the above jobs but the vets generally take over!

Allowing schedule 3 procedures to be performed... However, there is not enough time for training and enable nurses to gain confidence to want to do these minor procedures

No current capacity for nurse clinics or minor operations

We are a small new clinic so we normally only have 1 vet and 1 nurse together but we are getting busier so it will be good to use my nursing skills and assist the vets more and promote more nurse clinics such as preventative care

allowed to perform more schedule 3 tasks

I would like more training in surgical techniques and would like to do more catheter placements and blood sampling.

More schedule 3 operations to take the pressure off the vets. Certain vets will allow you to do more than others in regards to small lump removals/stitch ups.

Allowing nurses to step to to what they deserve to be doing

Due to staff shortage there is not enough time to spend on some of the more important tasks in practice. The majority of the time is spent cleaning. I would like to do the ticked above tasks more often.

They could take advantage of nurses individual strengths to improve the running of the practice and implementing patient care

schedule 3 work

More focus on clinical skills we have rather than cleaning and reception duties.

More training to be able to complete these tasks. More of a training issue.

Would like to have more opportunities to improve on skills such as suturing.

Not specifically myself as being a student I am very limited. However RVN's would love to blood sample, scale and polish and place I/v catheters and I'm sure I'll feel the same once qualified. We have nurses that specialise in certain areas eg behaviour and nutrition, and they would love to do nurse clinics.

We do not carry out stitch ups, lump removals.

The practice is understaffed, so not able to nurse my patients to the best of my ability. Too much time spent cleaning when should be concentrating on patients.

I am able to do a dental scale and polish. I would training to do stitch ups, lump removals, digit and tail amputation and euthanasia. It was mentioned at Dr Caroline Hewson's lecture at BVNA Congress on Friday, 9 October, 2015 that nurses CAN put animals to sleep. I would like a refresher on FNAs.

I would like to be allowed to: place I/V catheters, run nurse clinics, perform scale and polishes on dentals, blood sample, carry out more lab work and do a little less cleaning.

The attitude if the vet needs to change. Nurses are not being allowed to do what they are legally allowed to do. I fear we are still seen as glorified cleaners. Human nurses are allowed and expected to do so much more. We are allowed to do less and less these days therefore we do seem to be just glorified cleaners :-(

We do not have a nurse consult room, vets are doing 2nd vaccinations.

I feel that nurses in my practice, and most practices, should be allowing nurses to train and take on more responsibilities in terms of nursing clinics and client support. I feel this would make the role of the Veterinary Nurse much more recognised to the public, and nurses would gain more respect and acknowledgement.

By letting me undertake more schedule 3 procedures

More opportunity to practice and be competent in Schedule 3 tasks such as amputations, stitch ups, lump removals etc.

Could use use more for extra help such as fna stitch ups and 2nd vax etc

Allowing nurses to do more stitch ups/lump removals/digit removals

No, as I'm not in practice. The nurse which was my clinical coach left, I received no training/ help or support while training as a nurse and I failed my anatomy exam so told me to leave. I'm a qualified VCA and dog groomer they never gave me a chance.

Allowing RVNs to do schedule 3 work

Minor surgical procedures Client information events

Stitch up and lump removals would be nice to do

I could do more eg xrays, scale/polish etc but as it's a small practice there is usually 1 vet and 1 nurse doing procedures so in order for me to do more, the vet would then be doing the restraining/monitoring roles which are generally best left to nurses!

Central line placement Feeding tube placement Specific nursing clinics

Job satisfaction a bit low. Not doing enough nursing and am generally still doing only a little more than a student could be doing. Do a few nurse consults, but very few and informally, -as in only when I manage to get hold of a weight case or a pet to microchip. Not even allowed to dispense any more.

Could do more. Stitch ups for example.

I am desperate to be able to do more schedule 3 procedures but my practice like many think this would reduce the standard of care clients receive. I think it makes good business sense to use nurses to their full capability allowing us to do second vacs and minor surgical procedures.

I have many skills that the vets don't recognise or utilise

I would like to do more of the skills I am trained to do, however we don't have enough nurses to allow us the time to do much as we always seem to be overstretched, making it seem unorganised. This makes it feel like I'm having to prioritise certain jobs over the long list of care and attention I would like to spread between my inpatients. Also, vets seem to take all the front work from clients and get a lot of recognition, which is great, but I feel they could introduce us nurses to the clients as we spend most of the time nursing the patients through their conditions.

We sometimes position for X-Rays but not all the time and its never left to solely nurses. We never perform minor surgeries i.e stitch ups or do bandage changes. We are taught so much now that we rarely get to use in practice.

I would like to not be on reception so much.

I feel i could do more nurse clinics, more blood sampling, do FNAs etc but due to staffing i am not able to do this!

Allowing the nurses and myself to do more schedule 3 procedures.

Keep vets more informed about what a VN is allowed to do. Raise client awareness to the VN role. More inhouse training for VNs e.g. stitch up, lump removals etc.

Hopefully if the vet you work for has trained you they will be quicker to accept your ability.

More nursing clinics

Capable of much more clinically. Have training in practice management, not used.

Schedule 3 nursing opportunities

i would enjoy doing more feline behaviour, puppy training, elderly pet advice and weight clinic consultations.

Could do more e.g lump removals, senior pet clinics etc

More time for nurse clinics and consulting, more dental work, more schedule 3 eg

xrays, fna's and anything else we are allowed to do

Publicise free nurse consults to advise clients to bond them to the practice and refer to vets: boost footfall and long term financial turnover

Allow nurses to do everything in their job description as set out by the RCVS

The vets to go on a course and learn what nurses are able to do.

allowing me to do more procedures.

Need more support staff i.e nursing assistants to help with the cleaning and post op care of patients

By doing Schedule 3 operations (points listed above that I have not ticked)

Helping more with stitch ups / lump removals etc

Nurse clinics, minor surgery - lumps / stitch ups etc

By nurturing my interests and supporting me to fulfill my potential rather than being a helper "girl"

We need more staff so that we can be used to our full potential, we spend half of our time answering the phone and serving clients on reception as we have no receptionists.

Doing more blood samples and assisting the vet in a more practical way. Doing more nurse consults in practice

support me while doing a further course (graduate diploma in veterinary nursing)  
nurse consults,

Allowing theatre nurses to be scrubbed in more often

By vets having more knowledge about what RVNs are trained and qualified to do.

Practice is changing. Never had an RVN in 30years. Learning curve for the practice.

Not allowed to give telephone advice to clients. Not allowed to spent more than 10 mins in a consult with client. As an RVN I feel we should be utilised as more than a cleaner

Utilise nurses better

I need some more experience then I can do more things.

I answered yes but I do feel that it could still be improved as in allowing nurses to do surgical procedures - eg, aural haematomas.

To many students in our practice, it is a good thing but us QVN'S become rusty when it comes to doing things on our night duty.

Could do stitch ups \_ more schedule 3

By the vets letting me do work that I am qualified to do, instead of trying to do it all themselves.

More time to delegate tasks more efficiently.

by vets allowing nurses to work to our full capacity

Stitch ups, lump removals, tail amps, FNA etc. Utilise me to fullest extent if Schedule 3. Also, more nurse consults such as dermatology, geriatric etc.

We do not use nurses for schedual 3 procedures

The practice does not use vet nurses to carry out schedule 3 tasks such as stitching up wounds

By utilitieing our time more and using the skills we were tought

Recognizing our full individual potential and allowing us to specialize in areas similar to what the vets do.

I feel that we could be utilised more by being allowed and able to regularly partake in all the skills we are trained in as veterinary nurses. I find that certain tasks are only carried out sporadically within my practice because we are required to as part of our training, or if the clinic is especially busy (this has also been the case in the majority of other small animal first opinion practices I have worked in).

Doing more schedule 3, such as lump removals, stitch ups. We do most of the second vaccines which is nice

We no longer do stitch ups and minor lump removal which we used to do.

Nurse consults mainly and dental scale and polish

We do not currently perform any jump removals, or stitch ups.

Nurses can be used as much more than what certain vets allow

The vet needs to let the nurses do the nursing.

Working ECC I don't do nurse clinics, dentals, much lab work

I would like more training in all areas. I feel it's the other nurses who see my potential and allow me some of there jobs other than basic husbandry and inpatient care. I feel those who train me enjoy there job and like to do it themselves!

The vet is going to teach me how to do stitch ups etc and use my full potential surgically too.

Improve staff levels

I want to do more sutures and things but lack of staff stops me from doing this

Vets could give student nurses a little more recognition.

More responsibility

I would really like to do more on dog behaviour, my practice have discussed this with me, but I feel I've been left to sort it all out with little or no guidance as to what courses I can do, how to go about finding out about them. If they could spend some time with me finding courses to suit myself and my employer, that would be of a benefit to my practice and patients, it would make me feel more supported and help me feel like a have a role in the practice.

More time/space for nurse clinics, schedule 3 procedures and support to perform minor surgery

More surgery time, less reception cover etc.

Increased number of nurse clinics.

I would like to do more of the above.

Our practice does not utilise the nurses enough. Enough of us taking bloods, doing drips, nail clips etc - the head vet gets the other vets to do them

I work in a quite branch where I'm not always needed, it would be beneficial to allow

me to go to the hospital in these circumstances.

The only things I don't do are schedule 3 procedures such as lump removals, stitch ups however we are a 3 vet, 2 nurse practice so with the lack of nurses it's easier for the vets to do these things.

I am only nurse in branch so unable to do ops extra due to lack of help

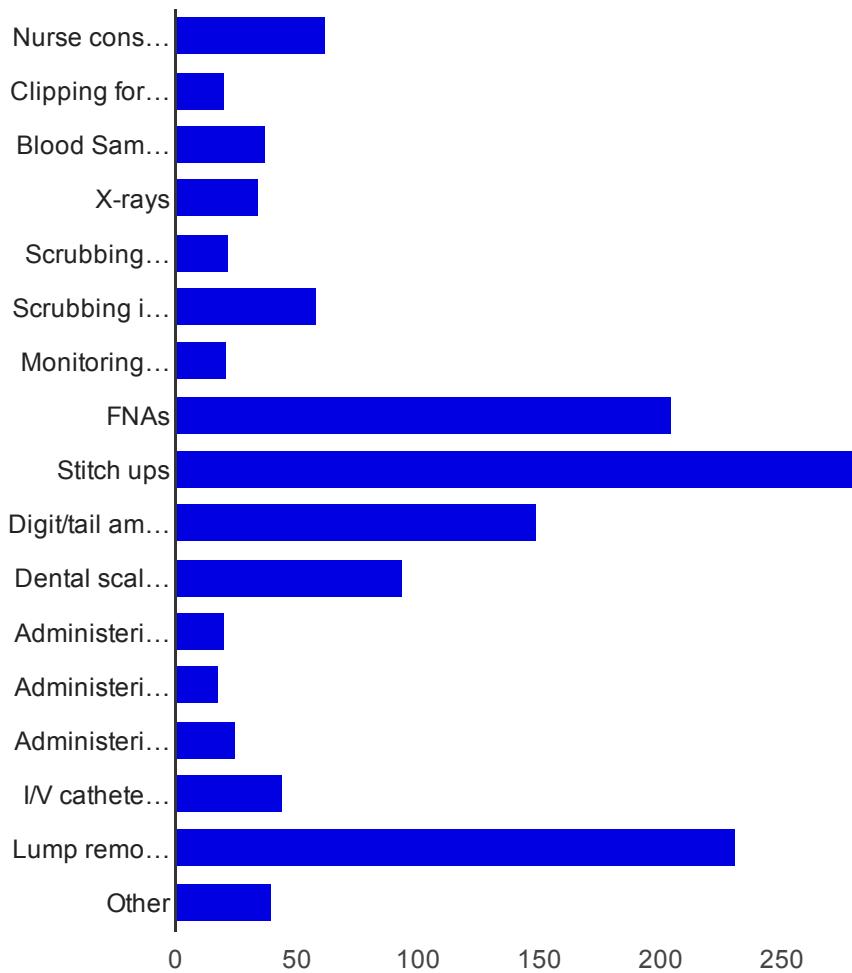
More practical schedule 3 tasks, stitch ups and lump removals.

Stitch ups, digit & tail amputations and chatting through diagnostics/diagnosis to learn more etc

more nurse consults carried out - freeing up vet time

Further skills could be utilised e.g. Skills for schedule 3 minor surgical procedures

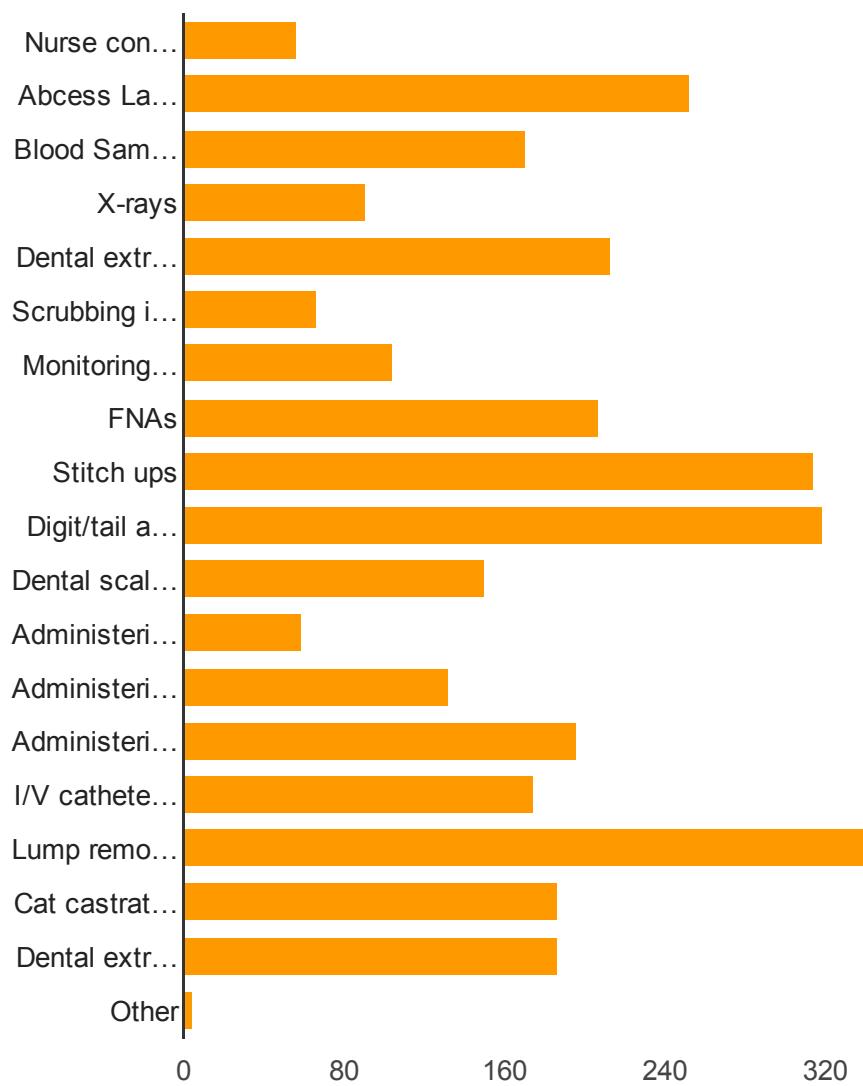
### **Are there further tasks you would like to do?**



Nurse consultations	<b>62</b>	14.6%
Clipping for operations	<b>20</b>	4.7%
Blood Sampling	<b>37</b>	8.7%
X-rays	<b>34</b>	8%
Scrubbing animals for operations	<b>22</b>	5.2%

Scrubbing in to assist with operations	<b>58</b>	13.7%
Monitoring anaesthesia	<b>21</b>	5%
FNAs	<b>204</b>	48.1%
Stitch ups	<b>281</b>	66.3%
Digit/tail amputation	<b>149</b>	35.1%
Dental scale & polish	<b>93</b>	21.9%
Administering medication (oral)	<b>20</b>	4.7%
Administering medication (S/C, I/M)	<b>18</b>	4.2%
Administering medication (I/V)	<b>25</b>	5.9%
I/V catheter placement	<b>44</b>	10.4%
Lump removals (not entering body cavity)	<b>231</b>	54.5%
Other	<b>40</b>	9.4%

### Which of the following tasks do you consider to be Schedule 3?



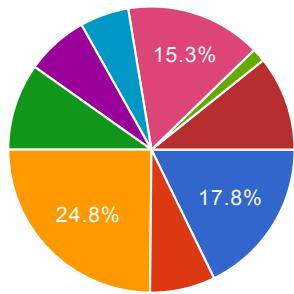
Nurse consultations	<b>57</b>	13.2%
Abcess Lancing	<b>253</b>	58.6%
Blood Sampling	<b>170</b>	39.4%
X-rays	<b>91</b>	21.1%
Dental extractions (with fingers only)	<b>213</b>	49.3%
Scrubbing in to assist with operations	<b>66</b>	15.3%
Monitoring anaesthesia	<b>104</b>	24.1%
FNAs	<b>207</b>	47.9%
Stitch ups	<b>314</b>	72.7%
Digit/tail amputation	<b>319</b>	73.8%
Dental scale & polish	<b>150</b>	34.7%
Administering medication (oral)	<b>59</b>	13.7%
Administering medication (S/C, I/M)	<b>132</b>	30.6%
Administering medication (I/V)	<b>196</b>	45.4%
I/V catheter placement	<b>175</b>	40.5%
Lump removals (not entering body cavity)	<b>340</b>	78.7%
Cat castration	<b>186</b>	43.1%
Dental extractions (using instruments/drill)	<b>186</b>	43.1%
Other	<b>4</b>	0.9%

## Previous History

Have you had a previous veterinary nursing job?



If you answered YES what was your reason for leaving?

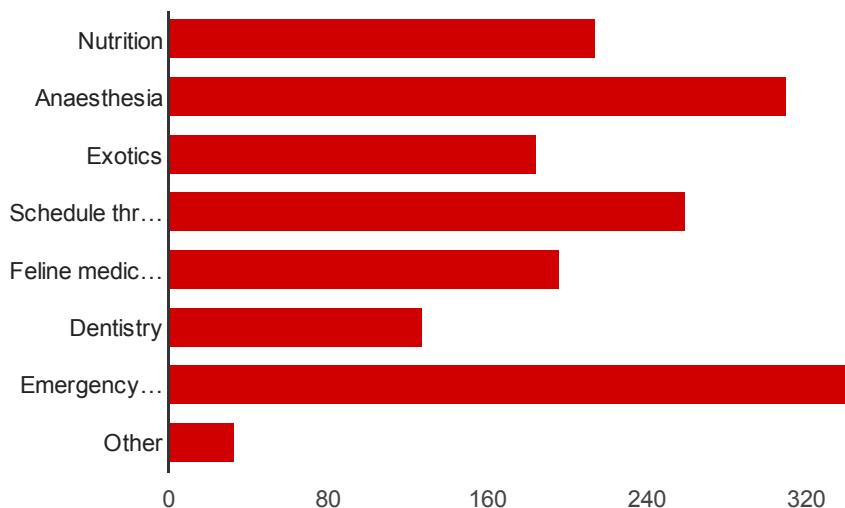


N/A this is my first/only job    **58**    17.8%

Salary	<b>24</b>	7.4%
Progression	<b>81</b>	24.8%
Low job satisfaction	<b>32</b>	9.8%
Relocation	<b>23</b>	7.1%
Family/Maternity	<b>18</b>	5.5%
Didn't feel appreciated	<b>50</b>	15.3%
Prefer not to say	<b>5</b>	1.5%
Other	<b>35</b>	10.7%

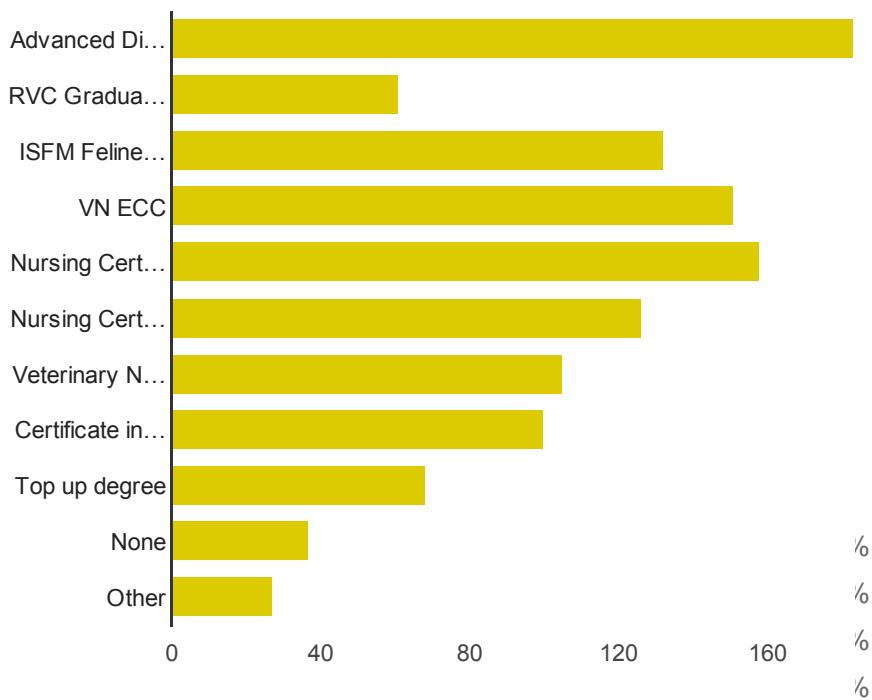
## CPD

**Would you like to do CPD in any of the following areas?**



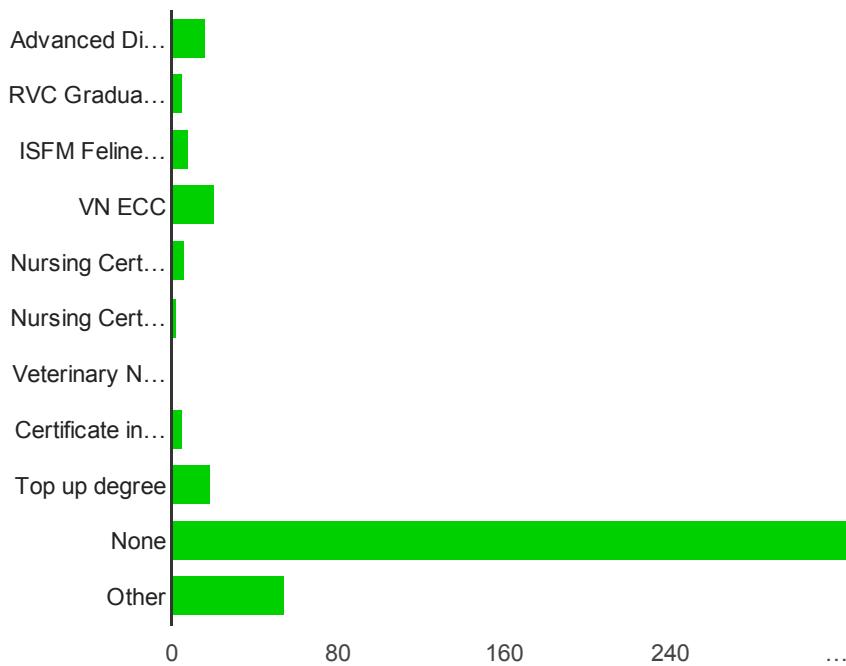
Nutrition	<b>214</b>	49.7%
Anaesthesia	<b>310</b>	71.9%
Exotics	<b>184</b>	42.7%
Schedule three	<b>259</b>	60.1%
Feline medicine	<b>196</b>	45.5%
Dentistry	<b>128</b>	29.7%
Emergency and critical care	<b>342</b>	79.4%
Other	<b>33</b>	7.7%

**Would you like to complete any of the following CPD courses?**



Nursing Certificate Anaesthesia (NCert (Anaesth))	<b>158</b>	37.4%
Nursing Certificate Animal Behaviour (NCert (AnBeh))	<b>126</b>	29.8%
Veterinary Nursing Rehabilitation Therapist (DipVNRT)	<b>105</b>	24.8%
Certificate in Small Animal Nutrition (CertSAN)	<b>100</b>	23.6%
Top up degree	<b>68</b>	16.1%
None	<b>37</b>	8.7%
Other	<b>27</b>	6.4%

## Do you hold any post graduate qualifications?



Advanced Diploma (DipAVN)	<b>16</b>	3.7%
RVC Graduate Diploma (GradDipVN)	<b>5</b>	1.2%
ISFM Feline Medicine Certificate	<b>8</b>	1.8%
VN ECC	<b>21</b>	4.8%
Nursing Certificate Anaesthesia (NCert (Anaesth))	<b>6</b>	1.4%
Nursing Certificate Animal Behaviour (NCert (AnBeh))	<b>2</b>	0.5%
Veterinary Nursing Rehabilitation Therapist (DipVNRT)	<b>0</b>	0%
Certificate in Small Animal Nutrition (CertSAN)	<b>5</b>	1.2%
Top up degree	<b>18</b>	4.2%
None	<b>328</b>	75.8%
Other	<b>54</b>	12.5%

**If you answered YES to the question above, do you feel you are able to use these skills in practice?**



## Comments

I thoroughly enjoy learning and progressing but I find the courses (certificates) available for nurses are too long and time consuming and that they are such a big commitment which put me off applying.

University gave me a drive for evidence based research and practice. Also to utilise many resources for problem solving. Also with the practice management and general practice and team running.

But not as much as I would like as the more senior nurses I work with tend to lead in the more demanding cases.

I unfortunately don't see the point of further education and paying extortionate amounts of money if you're not going to use it.

none of my additional knowledge is put to use, often we are told what to do and not consulted. Nurses look at different things to vets

Not got the case load

Some of my skills are in used like placing central lines

I find it hard to work full time and do a post grad qualification

Very occasionally

My degree is in biochemistry and I feel that I have a sound knowledge of physiology, microbiology, pharmacology and that this enhances my understanding of many areas

of work as a RVN.

Somewhat. I feel limited by some Vets eg. Some Vets do not trust you to work out sedation doses.

i did use them much more im my last job at a referral hospital but no so much in 1st opinion but the anaesthesia has come in hand just as much for both.

But I hope to become a clinical coach so then I would

I haven't pursued further qualifications as I don't believe I will be given the chance to use the extra skills in practice.

Some skills- not always given enough trust or responsibility to use everything

Generally not doing ga's enough compared to last practice

Not in a training practice currently

Hardly ever do anaesthesia anymore as do so my head nurse admin and consulting.

Would love to do more theatre work.

I love being a clinical coach and training the students. I feel that we don't get enough time to do this. It's always just expected that we get it done. I feel under valued.

Some things that I have learnt on my DipAVN course, I do feel has been a waste of time (for practical reasons) as I am unable to put it into practice because of the business within the hospital. What is the point of learning so much if it is never put into practice.

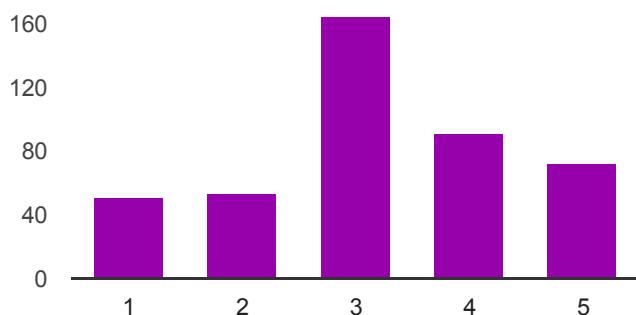
I feel that I have further knowledge and understanding of conditions and have a higher academic level of understanding for the needs of patients.

Because I am 'just a nurse' vets don't seem to see me as an option

Mostly. But some foreign vets do not realise how much we are capable of and how much knowledge and experience we have.

## Congress

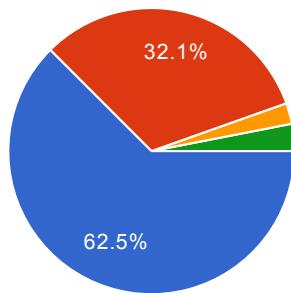
### How Important is attending congress to you?



Not Important: 1    **51**    11.8%  
                       2    **53**    12.2%

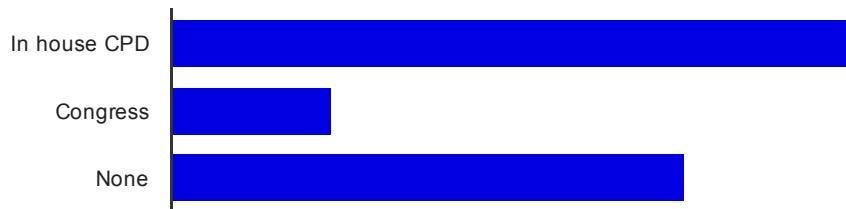
3	<b>165</b>	38.1%
4	<b>91</b>	21%
Very Important: 5	<b>73</b>	16.9%

### Which congress would you prefer to attend?



BVNA	<b>265</b>	62.5%
BSAVA	<b>136</b>	32.1%
LVS	<b>10</b>	2.4%
Other	<b>13</b>	3.1%

### Does your practice/group hold its own in house CPD/ mini congress?



In house CPD	<b>233</b>	54.1%
Congress	<b>55</b>	12.8%
None	<b>175</b>	40.6%

### Comments

Occasional 'lunch and learn' with reps, but predominantly to learn about new products rather than for CPD.

I'm a student and have never looked into congress/CPD

Our in-house CPD could be improved a lot, we could hold nursing CPD from external providers and by the nurses themselves to share ideas and skills with the rest of the nursing team.

I love learning

More of a lunch and learn.

Occasional lectures from Reps on site or cascade of CPD from colleagues

Before the merger the practice went but congress is held to far away now.

I have run a few clinical clubs

I am not sure as I have only just started at my new practice

although I am often not invited or it is when I am unable to attend

Rubbish lunch and learn

Lunch & learn meetings done by reps on various topics but need to be more structured & relevant

Over the past year our practice has started to have more I house cpd. It's great to get us all together and it's also a very good use of time and a free way to get good cpd. Again it's mainly the nurses that organise in house cpd sessions.

We regularly have lunch and learns.

I work as a locum so as i dont get any practice support for CPD it is sometimes hard to get the funds together to do some of the courses that I would like to do.

Although this has happened once

Usually from outside reps

Congress is only by invitation. It seems very cliquey

Working in referral you are pigeon holed into only being interested in your field and often fall behind in other aspects of first opinion nursing as you never do/see those cases. Especially hard as working long hours and finding time to travel to Cpd can be difficult as they are predominantly some distance away (Based Cumbria). We ourselves provide CPD for local practices so often just count that despite being very familiar with the subject.

they try to provide CPD each Friday lunchtime as there is no CPD allowance with the job

Occasional lunch and learns, but there isn't a massive amount for nurses. I would like there to be more.

We do a few lunch & learns we are encouraged to go on CPD

Some in house but area as I can't attend as work nights

Despite my request

I am the BVNA RCO for the area

Vets4pets nurses congress

I am the BVNA RCO for the area so organise a lot of CPD

We do a lot of lunch and learn and webinars during lunch though

## Your Job

### What is the best part of your job?

Managing a great team and rehabilitating animals without homes.

The variety of work, meeting lots of different patients & owners, job satisfaction, feeling that you make a difference.

I love nursing animals back to health that they thought they would never see again.

Seeing healthy patients go home to their families

The satisfaction knowing you've helped a patient.

Working as a team with colleagues to resolve a difficult case, mentoring students

Working with a wide variety of cases in different species

I enjoy doing clinics and nurse consultations to help education clients. I also enjoy inpatient care.

Providing the best care to my patients

Caring for the patients in the kennel area.

Seeing the change in animals for the better ie, comfort, healing, friendliness to vet practice and staff.

Making animals feel better

Consults

The satisfaction in seeing animals improve and recovery due to the care tour team provided. Advising clients and developing a bond with them and their pets

Having positive effect on how veterinary businesses operate

Using my nursing skills to rehabilitate patients, spending time in hospital is my favourite part of my job.

I'm still studying so becoming competent in a task I've been struggling with and already making an animal's life better and already making good relationships with clients.

Consulting and client care

Being a student and not having a lot of experience I have learnt a lot in my practice already

Caring for inpatients

The patients and the people I work with

Meeting different practices and people

cuddling puppies!! and being able to provide a high standard of patient care through continued learning. I never did care plan when I qualified if I hadn't gone on to do my HEDipAVN I would know about them and how useful they are to the individual patient needs.

Nursing looking after inpatients.

The patients, the people I work with, the amazing facilities we have.

Client appreciation, getting to use learnt skills, aiding animals back to full health

Hands on nursing

scrubbing in with operations

Seeing a patient go home to their family after being nursed back to health after a

long stay  
Caring  
Inpatients  
Taking care of patients  
Puppy/kitten consultations  
Nursing the patients on death's door, spending days with them and successfully bringing them back to health.  
Helping make difficult times easier for patients and clients.  
highly valued member of the team & flexible working hrs  
Managing a team of valued professionals  
Being able to nurse  
Nurse Clinics and Nursing Care  
Consulting  
Working in theatre and patient care!  
Nursing patients and nurse clinics.  
Animals! Every day is different. Interesting cases. Educating clients.  
communicating with clients and people who love their animals  
Seeing happy clients walk out of the door with their cured pet knowing I helped.  
variety of cases seen  
Nursing inpatients  
Seeing animals recover from illness.  
Getting to know animals and family's and educating them further.  
Nursing animals recovering from major surgery  
My team The animals  
Seeing animals progress to better health  
Helping animals  
Lovely client base, and fantastic colleagues (most)  
Reward of helping the next generation of RVNs.  
Providing nursing care for animals  
Seeing animals improve and get better after hospitalisation and treatment  
The animals, pay not too bad and leave allocation is good  
Nursing animals back to health.  
Being trusted enough to perform many surgical/clinical procedures and being appreciated by the Vets because I can perform these procedures competently.  
Continued development.  
Seeing patients improve  
Being able to use your skills to help in the treatment and diagnosis of the animal with the vet. All I/V work and schedule 3  
Hands on care of the animals, i enjoy monitoring anaesthetics and have started

taking blood samples.

Working with amazing people and making a difference to the patients that we treat

Educating my clients so as to improve the health and welfare of their companion animals.

Providing a high standard of nursing for my patients.

Nursing sick inpatients back to full health. Nothing more satisfying than getting an animal that has not been eating for days to start eating again.

Working with animals. Using my skills. Feeling recognised.

Animal interaction- seeing improvement in hospitalised animals etc

Anaesthesia and caring for animals in need.

Working with good vets and lovely patients

Scrubbing in

Team work Animals Client care

The clients

Knowing that your helping an animal to make their life better or more comfortable- to relieve pain.

seeing a patient you've nursed long time improve and be able to go home

getting to deal with exotics

Everything!

Helping sick animal recover, making ill animal comfortable and the fact that every day is different

Taking care of all animals Being there for the owners through good and bad times

Reuniting lost animals

Making a difference to clients and their sick animals

I love nursing patients back to health and seeing how happy they are to see their owner when they go home.

Helping animals, seeing them recover from things and advising clients. It's rewarding job to be in

Anaesthesia and theater work

I love facilitating interprofessional study sessions and communication skills.

Kennel nursing, having a hands on role with the patients and the ability to intensively nurse within our practice.

Hydrotherapy

Dealing with a range of different animals and never knowing what may be around the corner

Everything except reception duties

Client & Pet interaction & preventative healthcare

Getting to make a difference and working with a brilliant team that always have your back.

Making animals feel better & getting them well and back home

Dealing with critical care patients and watching their recovery  
being recognised

Helping patients

Medical nursing

Student progress. Doing research.

Caring for animals

Helping the clients to help their pets through advice and help given through nurse clinics

Working within a hospital and having a good/varied case load.

Seeing patients regain their quality of life through the care that I have helped to provide for them,

Teamwork, support from others,

Job satisfaction, helping both animals and their owners

Surgery staff team, location and very nice loyal clients

Case variety

Working with animals locumming seeing how different practices work

Seeing animals go home when they've come in so ill, and seeing their happy reaction when the owners come to visit

Being directly involved in an animal's recovery.

Helping clients with general care of their pets

Seeing animals improve

Helping animals.

Nursng hospitalised patients

Anaesthesia Intensive care nursing Training

Providing treatment to patients without as much restrictions re cost issues. Also being in a busy allows me to see an nurse lots of different cases

Building a client base at my new practice- being unrestricted (to a certain degree) on timing and working for a small family run business

Animal care, nursing skills

Theatre. Feeling challenged.

Working with different animals that all have individual needs- good experience when training

Inpatient care and emergency nursing then seeing the patients go home afterwards

Working to help animals get better and educate owners on their pets

Nursing of medical cases.

Nursing a patient to recovery and creating a bond with mypatients

Relly ill pet becoming better

The care of animals and seeing progress in there treatment

Nursing Educating clients Having a happy nursing team

Feeling you have helped someone look after their beloved pet.

Working with amazing people, and caring for the inpatients

Caring for sick animals

Appreciation for helping someone's loved one.

Being able to use my mind and skills to help animals. Teaching my colleagues.

Caring for my patients Client contact Organisation....slightly ocd!

Going home :p Seriously, job satisfaction

Making pets better and client happy

Client appreciation, nurse consults.

Working with animals

Job satisfaction

As a clinical coach I enjoy watching students gain confidence and become valuable team members

Being a voice for those that cannot speak for themselves.

High intensity case load.

Seeing a sick animal improve and go home to its parents. The look on both the animal and the parents faces.

Meeting new clients and pets

Helping animals and seeing clients happy

Surgery

After 14 years in practice I still love most aspects of hands on nursing, dealing with both patients and clients.

Home time

Critical care of patients, knowing that your actions are directly related to a patient feeling better.

ECC

Variety

working with animals

When a patient is able to go home due to your persistent nursing care, e.g. Hand feeding and providing every possible food source available!!!

There is not a bit of veterinary nursing that I don't enjoy. I am a clinical coach and enjoy mentoring the students and client education

Speaking with clients, I particularly enjoy running nurse clinics & helping with behaviour cases!

Actual nursing if patients

Being given the time to nurse the patient. Handing a patient back to an owner that is visibly much improved after 15 hours of care.

In patient care and client relations.

Seeing animal health improve and receiving appreciation from colleagues and clients.

Helping the patients and the clients with their pets

Feeling that I have made a difference in that I have watched a patient progress and

return to their normal able self and experiencing the gratitude the owners have for us  
Nursing the critically ill patients back to better health and seeing them go home.

Helping animals recover Puppy/kittens

Getting an anorexic animal to eat

I Consult all day, I love talking to and helping clients with their pets.

Anaesthesia, rabbit nursing, inpatient care, surgical nursing. I enjoy most things  
discharging sick animals

Looking after in patients

The staff I work with

Helping patients get better and them walking out the door

Seeing a really poorly animal walk out the door happy and healthy because I nursed  
him back to health

Caring for patients

Seeing the animals going home healthy and happy.

The satisfaction of aiding in an animals recovery

working with a great team seeing an animal progress through a treatment and come  
out better off in the end :)

Doing the job I trained to do. I enjoy clinics and being on the wards. Feeling  
experienced and competent in my job.

The staff

The variety of workload

Inpatient care

Clinical and management role

Satisfaction in making a difference Buzz of emergency nursing Being appreciated

Being able to devote time to very sick patients

Patient interactions

Rehabilitating poorly animals, seeing them return to good or better health

Watching a very ill patient recover due to my care and skills

Satisfaction of seeing the patients getting better

Working with patients and seeing their improvement whilst caring for them

The People and animals i work with.

The animals

Working as a good team and good patient care

Patient care and nursing consultation

Rewarding

Helping students reach their potential

Patient care to the beat of my ability

Sending an animal home fully recovered.

The small team I work with, it's like a family. The relationship with the clients, and of

course their fur babies too.

Animals

Saving animal's lives

Inpatient care

utilising my nursing skills

Everything I did

## **What is the worst part of your job?**

Euthanasias, salary

Salary and lack of support.

The clients!! Rude people. I find many are full of self importance and it grates on me.

I feel management side with rude clients and basically tell you to suck it up. I don't appreciate rudeness from anyone! Client or management!

Euthanasias. Not being able to save all animals.

Not being recognised for the hard work involved in Veterinary Nursing. Not being respected. When hard work involved in caring for a patient still does not produce the ideal outcome. The salary is not great either!

salary

In practice politics

cleaning and rubbish pay.

Salary Lack of sick pay Lack of maternity pay Vets and practice managers not understanding or appreciating that nurses wanted to be a nurse, not wanted to be a vet but could get the grades, and also not training to be a nurse to THEN train to be a vet.

Satisfaction/Appreciation at work

The long hours with having 2 very young children at home

Euthanasia bitchiness between nurses

It can be tiring and emotionally draining. I also feel veterinary nurses do not get the recognition they deserve financially.

The lack of recognition of being a RVN. The stress of having too many expectations from doing a long list of jobs and having little time to do it due to understaffing. The only way of getting it all done is by skipping lunch or finishing late (especially during the bust summer months), which I don't mind occasionally, but frequently it can become very draining and limit my enthusiasm for the next shift.

Scrubbing floors

Often short staffed

clients whom do not understand or know what a veterinary nurse does on a day to day in order to provide the best care for their pets.

Patients being euthanised

dreadful wage and living in poverty to continue nursing

Filing

difficult clients

Practice politics

Long hours

Pay and hours

Moody vets

Cleaning esp bodily fluids

Salary. Recognition for what we do from general public and vets.

Seeing a patient suffer, euthanasia when treatment could be given, heartbroken clients

Working with people

Feeling under appreciated

Cleaning up in isolation

Paper work

Client attitude e.g expecting free treatment

short of nurses

Case load:Staff ratio

Not being recognised as a official title and always being ask when I'm going to be a vet!!

Losing patients and under staffed

hours I work

Cleaning Poor wage Poor working hours for family life

When patients can't be saved.

The worst part of the job is that sometimes the long hours and the fast pace of the day can make you feel drained emotionally and physically. This doesn't put me off becoming a registered veterinary nurse at all however.

Losing a patient

Consults!!

working with difficult clients/ colleagues

Working with people who don't pull their weight.

Ooh

The boss

Politics within the practice

Clients.

Feeling disregarded by the public. The long hours with no appreciation from management and the sometimes copious amounts of cleaning.

Frustration at others not doing their jobs

When staff don't get on/ pull their weight/ neglect the team/ bullying

Start time

Cleaning constantly, undervalued

Not sure...picking up poo!

I'm not fond of reception work, especially when dealing with difficult clients who are aggressive.

Informing clients of accidents. Ie rta's

Not getting the recognition i deserve. The hours, on call and lack of pay. Admin duties taking up too much of my time.

Having to turn down people who need help due to terms and conditions

Long hours and rubbish pay.

Infection control (cleaning). Will probably spend about half my shift doing so.

Unwarranted complaints from clients about veterinary costs which they then refuse to pay.

Euthanizing animals when the death could have been preventable

Paperwork and management conflict

Dealing with difficult clients

Euthanasia of a healthy pet.

Being short staffed therefore limiting inpatient care, nurse consults etc. Too much reception work

Bitchy female staff members

Being shoved to the side on a busy day when I'm not competent in something so I can't help, for example as its busy I'm not being shown, the task is just getting done for me.

Stress and salary

When client think all you're doing is ripping them off

Low pay, high stress.

uncertainty due to no rvn in practice currently

Lack of skills recognition, under staffed, over worked

Salary

Lack of public acknowledgement.

Long shifts away from family

Poor salary, lack of respect and being undervalued and overworked.

Hours

The people, owners and other staff

Not enough hours in the day. Recognition of job you do.

Emotionally draining. Salary- I am a student after all! Knowing there's not much hope for progression.

Clients complaining about cost and lack of appreciation

being ignored

Pts

When people don't see how what they are doing is adverse for their pets.

cleaning PTS akward hours

Salary is not great Work load due to under staffing

Euthanasia due to insufficient funds

The stress.

Long hours, poor salary.

Clients wanting everything for nothing

Not being recognised for my skilid by clients, public and even some vets

Not always being used to my full potential

The salary..I think it's shocking for a medical professional saving lives day in day out..

People

Euthanasia

OOH duties, long days

Admin

Feeling patronised and underused. Feeling like a lot of my qualification was a waste.

Constantly feeling like the under dog. Having to fight to be heard amongst vets. The poor salary compared to experience level.

When you're extra effort with a patient doesn't pay off.

Discussing finance

Receptionist duties

Sad cases

low pay

Night shifts, low wages, excessive cleaning

Staff team work

Long hours. Little break, low money.

Euthanasia,

Lack of respect from vets

Lack of time.

Consulting

Not being appreciated by some clients as they sometimes refer to be as just a veterinary nurse!

Trying to manage a large team without any information or actual control over decision making.

Dealing with euthanasia, it's good to help the client through the experience and help an animal get peace but it is very emotionally straining

Being expected to do too much. Not being given enough time. Being under valued.

Clients and vets not appreciating who I am or what I can do. Not using my qualifications to the full. Not having time to further my studies by doing a certificate.

Being bored (sometimes!).

## Pressure

Euthanasia When the vet doesn't appreciate you/belittles you/talks to you like crap/blames you for the death of a patient When you know more than the vet and have to take charge of a dying puppy even though you're the student!!  
the salary

Clients not recognising how much you do PTS

Salary, hours, feeling unappreciated.

## Hours and pay

Being unable to help patients because of money resources vets time too busy etc

When animals don't make it after weeks of critical nursing, even though you've given them the best chance, they've still had to go through suffering. Also, being short-staffed & patients not getting care they deserve

Unprotected title, poor salary, lack of public awareness of my job role.

Being unappreciated and not used to our potential. Low salary and non recognition for good work

## No recognition

admin work

Being treated like you don't know what you are talking about

Stress, pressure, vets not helping and criticising

Bitchiness in the workplace

Stress inflicted by lack of time needed to do stuff ...so it gets left undone.....bad for a good business.

OOH and working weekends.

Under appreciated, nurses seem to be seen as girls rather than hard working professionals

People! Restrictions on best practises due to cost/ practice policy. Low pay considering long hours.

## Tiring

Salary and the hours

Some limitations with lots of VN and vet students

Rude reception staff

The pressure to work long hours and overtime to earn a decent wage. When you work in a team that don't respect or appreciate or value the work you do.

Dealing with difficult clients. Also clients that cannot afford or refuse to take responsibility for their animals. Dealing with clients that have poor perception of the veterinary industry and show little appreciation for it.

## Clients

Working on reception and nurse clinics with clients.

Client recognition

On call

Not being utilised to my full potential when the opportunity is there.

Dealing with people within the industry who think that they do not work for a business

Salary not mirroring responsibility

Poor salary, lack of respect and recognition for the veterinary nurse generally.

Not being used enough, dealing with insurance companies!!

D+ Stressed colleagues

Feeling undervalued

Low salary

The mental stress and strain.

Politics & paperwork

Pressure, low pay, often no breaks.

Death

Client communication

Lack of support for clinics

Rude Clients and being bullying nurses

Loosing patients

Finances and dealing with debt from clients

Salary. Hours. Stress. Understaffed. Reception

Long hours/lage responsibility for such a little wage

Poor pay and lack of recognition from public

Poor management and out dated vets who think RVNs are not needed

Emotional baggage from clients

Vets

Unnecessary euthanasia

Loosing patients you are close too

There's never enough nurses to ensure that I can do everything to the highest standard I'm capable of.

The hours, days without breaks.

Kennel cleaning - am getting too old to be crawling on the floor!

Unappreciated Uneducated clients on what we are Low pay for the effort I put in on my 12 hour days

The pay, not that it would change anything as I love my job to much.

Dealing with branch politics

Too much work

Low salary, under appreciated by colleagues and clients & OOH

Euthanasia and Owner compliance post op

Low salary Hours Lack of recognition of training & responsibilities from general public stress, admin,cleaning

Stress levels!

Not being recognised by clients for the work you do

People!

Not having clinical coaches weekly.

Seeing a patient you know isn't going to make it being kept alive and hospitalised just for PTS a week later

Having to help put healthy animals down or losing a patient

Frustration when you can see what needs to be done or should have been done but it doesn't happen

cleaning

fitting training hours in to a year is very difficult and I haven't been able to have any time off to relax, recuperate and study for important exams. i feel like places are always so understaffed that students are relied on very heavily before they are competent and also this affects ability to do npl.

The hours.

Unpaid overtime Only full time nurse Minimal schedule 3 opportunities

Some of the people

Cleaning

Clients unable to afford veterinary treatment

Client complaints, when staff moral is low

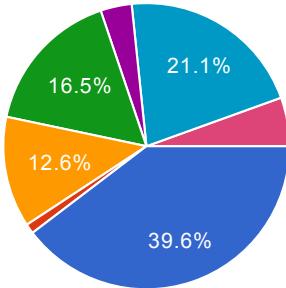
When things don't go right, and not being recognised for all the backstage hard work we all do!

Euthanising animals because the owners or breeders did not bring them in soon enough.

every day

Stress and pressures of combining clinical work with admin / managerial role

### Which of these would be the key factor in considering a new job?

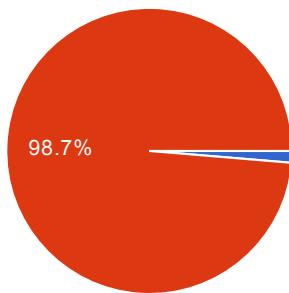


Salary	<b>180</b>	39.6%
CPD offered	<b>5</b>	1.1%
Location	<b>57</b>	12.6%
Hours	<b>75</b>	16.5%
On call	<b>16</b>	3.5%
Staff team	<b>96</b>	21.1%

Other **25** 5.5%

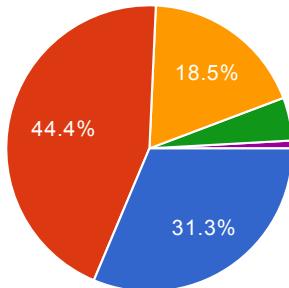
## Basic Info

Are you male or female?



Male **6** 1.3%  
Female **447** 98.7%

What is your age?



Under 24 **142** 31.3%  
25-34 **201** 44.4%  
35-44 **84** 18.5%  
45-54 **22** 4.9%  
55 plus **4** 0.9%

Please leave any further comments

I have entered as a student vn, I am qualified but my registration is not yet complete  
There are more reasons to leave the profession I feel then to stay with money,  
recognition, hours and expectation being the main reasons I left clinical and am  
considering leaving my VN career completely  
Any new job consideration would never be one single factor. It would always be a  
combination of hours/salary/role/team/location.

In addition to fact that I am only utilised for a small amount of my clinical skills at the moment I am also on a very low salary. As I have a young family I have to consider my future in veterinary nursing in terms of viability. The hours are long and antisocial and although I love my job I feel to turn to a reps job might be a more practical long term solution for me.

I have been nursing nearly 30 years and in that time I have heard lots of talk of how nursing is changing. The only real change I see is that we have to be more qualified and take responsibility for our own actions, which the majority of nurses would always do anyways. Working conditions, the attitude from vets, and the salary have remained poor with nurses working long hours, for little recognition from their vet colleagues and not using the skills they trained in. In fact one recent practice I worked in used my skills less than a practice I worked in twenty years ago!

I just wish a practice that is prepared to take a student on, then should be committed to see them through their training to the end with all the help and support anyone would expect. As a result of me losing my job which has not left me in a very good position to find another as I've been left with severe depression.

Stress fatigue & hard physicality of the job is becoming a real issue personally  
Bullying is very common in the veterinary profession.

Afraid the salary just doesn't cut it. So many of us topping up incomes by some means.

RVN's should have a minimum salary range. When I've trained hard for 2 yrs becoming a registered veterinary nurse, with a degree before hand, and now find myself in a situation where I have to do another course to become a physiotherapist to be able to better myself, earn more and have better working hours is unreal.

Working usually a 52+ hr week and earning less than people who stack shelves should be recognised and something needs to be done about it. On the plus, we do it because we love it!

Salary alone does not motivate me to pursue a career in any one practice, however it is a large percentage of the choice I HAVE to make when considering whether or not to accept a positon. I cannot afford to live on around 99% of the salaries offered for some really great jobs I have seen advertised or applied for/been in. The National Average Wage for the UK is £26,000.00 per annum. I can only dream of that as a vet nurse in a permanent position unless possibly a Head Nurse in a Referral Centre or specialise with further education. It is reasonably achievable as a locum RVN. This needs to change!

We are professionals that do not get paid enough. Some shop workers get better hours and pay than us.

The whole reason there is a shortage of nurses is salary, hours and lack of recognition. Most nurses have babies and mortgages hence why the older nurses leave, it really is a young persons job and the older you get the less you are going to put up with I.e stroppy vets etc.. These constant surveys are pointless everyone knows the issues but nothing seems to change.

I feel this job has aged me physically, I am stressed, depressed and have back

trouble. I can now see why I don't see many other nurses my age (mid 40's) in practice. If I was to leave my current position now I would definitely not choose to go back into practice as a nurse.

Salary remains a key issue for most RVNs. We can not stay in our roles and look for employment in a diverse position such as sales and fund quality CPD if we receive low wages

As a profession I think we should be separate from the rcvs and managed and regulated by a separate nursing council.

I think regardless of your skills, qualifications & experience vns are still not utilised as they should be. It often results in accepting the job you have due to your responsibilities, bills etc.& prevents you from trying to progress further as there is no incentive to. Whether you are motivated by job satisfaction or salary.

I'm probably going to leave the profession at some point 😞

Courses in bereavement work and being able to put this into practice providing the care for owners and their family - I feel there's a bit of a gap here.

Love being an RVN and would come back to practice for a better salary and more reliable hours

most nurses just want to feel appreciated and rewarded at work. The salary is disgraceful and we need to recognise experience with a banding system (similar to all other professions) that pays well and RETAINS nurses- this is the biggest issue that needs addressing because nurses are migrating away from practice in droves, the vast majority on financial grounds alone. In a short period a significant amount of veterinary lay-staff will probably be under the age of 25 and we are losing all the benefits of experienced staff.

i have worked in alot of differnt nursing rolls over the years and now i have a family i need to work two jobs to support us low wages make nurses with familys need to move to other jobs. also bad back/knees etc from low health and safety and that we are expected to crawl about on hands and knees or stoop over low/inappropriate tables when holding patients issues i feel need to be address. Its not often you see older RVN's still working on the shop floor.

Generally the kind of attitude i have worked with us that nurses are glorified cleaners and aren't always respected by vets or other staff. Vets also seem scared to allow us to do more in case things go wrong and they are sued.

There is a shortage of qualified nurses. We need to find out why and where nurses go. I believe that hours, on call and salary are to partly blame. There seems to be a salary for qualified nurses but it doesn't seem to change in response to experience levels unless you become head nurse. So newly qualifieds get paid the same as a 10year qualified nurse. This needs to change. Clients need educating on who we are and what we can do - we are not aspiring to be vets which is the common misconception - this suggests that nursing is a stop gap, a training step and not a job in itself. The title Vet Nurse needs protecting for RVN's and clients to ensure only those who have trained and qualified have the right to call themselves vet nurses.

## Number of daily responses

