

Editorial Board

Malcolm Ness

BVetMed MRCVS DipECVS CertSAO FRCVS

Malcolm is a European Specialist in surgery and heads up the surgery team at Croft Veterinary Hospital in Northumberland.

Giunio Bruto Cherubini

DVM DECVN MRCVS

Giunio is responsible for neurology/neurosurgery service at DWR and contributes to the undergraduate teaching programme at the University of Nottingham School of Veterinary Medicine and Science.

Ian Wright

BVMS BSc MSc MRCVS

Ian has a Master's degree in Veterinary Parasitology and is a member of the European Scientific Counsel Companion Animal Parasites (ESCCAP UK and Ireland).

Anna Meredith

MA VetMB PhD CertLAS DZooMed MRCVS

Anna is Head of Melbourne Veterinary School, University of Melbourne, Melbourne, Australia.

Iain Cope

BSc BVM&S Cert AVP (Zoo Med) MRCVS

Iain is an RCVS recognised Advanced Veterinary Practitioner in Zoological Medicine. He runs his own practice at Newmarket Vets4Pets.

Kate Bradley

MA VetMB PhD DVR DipECVDI MRCVS

Kate is a Senior Clinical Fellow in Veterinary Diagnostic Imaging for the University of Bristol/Langford Veterinary Services.

Mark Craig

BVSC MRCVS Cert SAD

Mark runs Re-Fur-All Referrals, a veterinary dermatology referral service in the south of England and the Midlands.

Mark Lowrie

MA VetMB MVM DipECVN MRCVS

Mark is an RCVS and European specialist in veterinary neurology (ECVN). Mark works at Dovecote Veterinary Hospital, Castle Donington, part of CVS Group plc.

Molly Varga

BVetMed CertZooMed DZooMed (Mammalian) MRCVS

Molly is an RCVS Recognised Specialist in Zoological Medicine. She works at Cheshire Pet, Cheshire.

Jo Murrell

BVSc PhD(Bristol) DipECVA MRCVS

Jo is a European specialist in Veterinary Anaesthesia and Analgesia, primarily based at the School of Clinical Veterinary Sciences, University of Bristol.

Karen L Perry

BVM&S CertSAS DipECVS FHEA MRCVS

Karen is Associate Professor in Small Animal Orthopaedics at the Veterinary Medical Center, Michigan State University, Michigan, USA.

Kit Sturgess

MA VetMB PhD CertVtr DSAM CertVC FRCVS

Kit is an RCVS Recognised Specialist in Small Animal Medicine and an Advanced Practitioner in Veterinary Cardiology; he sees clinical cases 3 days per week at Optivet Referrals in Hampshire.

Sam Woods

BSc (Hons) MA VetMB CertSAS Dipl.ECVS MRCVS

Sam is a European and RCVS Registered Specialist in Small Animal Surgery and is currently a Senior Lecturer in Small Animal Surgery (Soft Tissue and Orthopaedics) at the Royal (Dick) School of Veterinary Studies, University of Edinburgh.

Valerie Lamb

BVM&S DipECVIM-CA MRCVS

Val is a specialist in small animal internal medicine working at Southern Counties Veterinary Specialists in Hampshire.

Matthew Oxford

BVM&S GPCert(SAS) MRCVS

Matthew is a referral Veterinary Dentist and oral surgeon with clinics at Lumbry Park Veterinary Specialists, South Devon Referrals, Stone Lion Veterinary Hospital and Priory Veterinary Hospital. He is the Course Organiser for the British Veterinary Dental Association, included in which he lectures at Bristol University.

Paola Monti

DVM MSc FRCPath DipACVP (Clinical Pathology) MRCVS

Paola is an American Specialist and RCVS-Recognised Specialist in Clinical Pathology. She is a Clinical Pathology Consultant with Dick White Referrals, Cambridgeshire

Changes, growth and loss

This issue of the journal goes to press as we leave the EU. It's a situation sought by some, opposed by others. However, like it or not, we now need to learn to live with it and deal with any changes in our veterinary (and personal) lives that might come as a consequence of Brexit.

The RCVS recently introduced changes in assessing compliance of veterinary professionals in their CPD undertakings. One of these was changing from a 3-year rolling CPD hours requirement to calculation solely on an annual basis (35 hours per year for veterinary surgeons and 15 hours per year for veterinary nurses), with safeguards in place to allow for professional pauses such as parental leave. The second was moving from the online Professional Development Record for recording CPD to the new 1CPD platform, designed to be easier and more intuitive to use as well as providing dedicated space for recording reflection. This fits with the third change: introducing outcomes-focused CPD, involving a 'reflect' portion of the cycle of 'plan, do, record, reflect'. The importance of reflection has been highlighted previously in this journal, with an excellent article 'Reflection and our professional lives' by Stephen May in December 2016 (<https://doi.org/10.12968/coan.2017.22.1.32>), and we constantly aim to provide useful CPD for our readers, even though the platform for recording that CPD may change.

Meanwhile, RCVS Knowledge recently published 'Continuous Quality Improvement: a road map for the veterinary profession' (<https://knowledge.rcvs.org.uk/document-library/continuous-quality-improvement-a-roadmap-for-the-veterinary/>). This is based on findings of research commissioned by RCVS Knowledge and carried out by RAND Europe. It covered what is being done at present; what quality improvement/clinical governance means to the veterinary professions; whether veterinary professionals measure the quality of care they are providing; the 'incentives, enablers and barriers' faced when engaging in QI; and how stakeholders could help to support engagement with QI and overcome barriers. It was noted that most (96%) agree that QI would improve veterinary care in their practice, but only 40% had spent at least 3 days on QI in the past year. Lack of know-how was perceived as a major barrier by 74%, and 81% would like training in QI. Lack of time was also a major challenge, and it will not be easy to balance dedicating time to QI with already-full workloads. However, QI is important to ensure that practices continue to change, grow and improve.

Change of any sort, even if wanted, is not always easy (think how many New Year's resolutions will already have been consigned to the rubbish bin by the time you are reading this February Editorial) and may be considerably more difficult for those having to cope with a change they didn't want. It is important for all of us to support our professional colleagues during these times of change — and to be kind to ourselves if we struggle with some aspects.

Finally, I want to highlight in this issue not any of the great clinical articles — and they are great articles — but this month's Endpiece on 'Baby loss and infertility in the veterinary profession' (p50). As Nat Scrogie explains, baby loss and infertility have a huge impact on those directly affected; they also have an impact on colleagues and employers. Vet MINDS aims to provide support and to give guidance useful for both employees and employers, for example when returning to work. [CA](#)



Debra Bourne
MA VetMB PhD
MRCVS
Editor,
*Companion
Animal*

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