



Blacks Vets – Highly Commended

Work Demands & Work Conditions

Q. Is training in working with clients provided for team members?

Yes, using mixed media. In house consultation skills, telephone skills & "Dealing with Difficult Situations" is part of everyone's induction. Clinical members have attended "Colourful Consultation skills." Line managers & mentors are Institute of Leadership & Management accredited coaches, coaching our team members resulting in developmental changes to their thinking & how they react & deal with clients. This leads to a greater understanding of clients, self-confidence, and personal resilience.

Q. How are colleagues supported in the event of client complaints?

A clear process is provided and VDS support & guide us when needed. Staff know that complaints can be passed to mentors/line managers/partners & the practice manager. Complex complaints are overseen by the PM & we ensure that vets never feel victimized & are fully supported. We record all calls & have consult room cameras in most branches, as a result team member feel confident dealing with difficult clients knowing this evidence is there to back them up. We ensure we learn from all feedback.

Q. How are colleagues supported in the event of clients being abusive or threatening?

Team members are briefed at induction that this is never tolerated, clients are immediately referred to the PM or a partner to deal. Staff know they can (following a warning) end calls or meetings immediately if the client is threatening or abusive. Recording as detailed above provides evidence to support them. We have & will

in-conjunction with the VDS "sack" clients due to their threatening or abusive behaviour should we need to. As a result, our team feel confident to deal with any situation.

Q. How are colleagues who may spend time working alone supported?

This is rare, but we have lone worker alarms & mobiles if needed. We have a policy that no one sees a client on their own at night & there is always a vet & nurse in attendance. See recording above. We provide the CPD that the team members feel THEY need to be confident working OOH. Management have mobiles turned on & the vet has a partner mentor to contact at any time of day or night for guidance, they can be (& are) there within 20 mins to support complex procedures or if the team need them.

Q. Give one additional example of how work demands are managed to support wellbeing in your practice.

Investment of over 400k in the last two years to make this THE place to work. This has been on IT infrastructure & clinical equipment to increase efficiency and reduce frustrations, implementing a Lunch and Learn & wellbeing room, & VIP CPD room to provide suitable downtime. Consults increased to 15 mins & increased resource levels across the teams including growing from 11 to 16 vets; reducing in the day demands, & the number of weekends & OOHs. Staff retention is high (over 40% above 5 years, 30% above 10 years), with vet churn improving from 70% to less than 7% per annum.

Workload and work scheduling

Q. Are individuals' workloads monitored and, if necessary, revised?

We have completed a full resource model review for all functions within the last 2 years, resulting in resource level, resource mix and job description changes to meet requirements. These are reviewed via mentor sessions, monthly staff meetings & appraisals. Rotas are reviewed at least quarterly, consultation and procedure slots adapted to meet resource levels. Workload across branches is reviewed on a daily basis & adjusted to support unexpected workloads so team members don't feel overwhelmed.

Q. Do work schedules allow adequate rest between one working day and the next?

Evening surgery finishes with enough time to allow team members to socialise in the evening. The night nurses field OOH calls to reduce the on-call vet interruptions. We provide an en-suite bedroom for vets to use as suits them. Partners can and do support busy evenings and clinical caseloads are adjusted to allow rest if needed the following day. Weekend working members have a 4-day weekend the following week to gain balance & partners cover Sunday OOHs to allow the weekend vet to rest.

Q. How is colleagues' work-life balance supported?

We support this in many ways, all rotas are provided at least 4 weeks in advance, weekend and evenings months ahead, some 12 months. We have varied working patterns across the business creating a huge puzzle for managers but ensuring staff can be there for their families or pursue personal interests. Vets work a 4- or 4.5-day week and have 5 weeks annual leave which we balance across the year. We reward long service with up to 5 additional "Paws days" to take as they chose.

Q. Give one additional example of how workload and work scheduling are managed to support wellbeing in your practice.

We absolutely do all we can to support this for our team. More recently appointment scheduling has been reviewed providing "book on the day" and "emergency" spaces for urgent appointments. This means we can see all patients meeting client expectations and meet our teams desire to provide the best possible care but at the same time (in most cases) eliminating the need for staff to have to stay beyond their allocated working hours.

Relationships at work

Q. Does the practice provide opportunities for colleagues to spend time together outside work, if they wish? Do these involve activities to suit different interests and preferences (e.g. people who might prefer to avoid alcohol)?

Yes! - many & varied, we have a fun family summer BBQ, with games, pony rides, swimming & the infamous quad bike rides for all staff & their families, allowing us to thank our team AND their family for their support. A New Year event where the whole practice gets together in a more "party" style. Incentives provide branch rewards for the branch to choose bowling, cinema etc. Beer Thursdays are becoming regular occasions & there are a number of charity events including fire walks & coffee mornings.

Q. What mechanisms are used to identify and address any difficulties or conflict between colleagues?

Our regular meetings/mentoring sessions/appraisals and "open door" approach ensure we are aware of difficulties, we have & will support independent resolution, but mediate if needed. To support our goal of "outstanding" communication DISC profiling has been used with some of the team to support close mentor & team relationships, a very insightful method delivering a greater understanding of both ourselves & our colleagues, facilitating clearer communication & greater acceptance of diversity.

Q. Does the practice have a clear policy relating to harassment and bullying at work, including processes for managing allegations of harassment or bullying?

We have a zero-tolerance policy on any behaviours likely to negatively impact the team e.g. bullying, racism, gossiping, trouble making, in-sighting victimisation, this expectation is written into every job description. Our distributed staff handbook clearly outlines our position and details our policy, the process to raise issues & to challenge decisions. A positive, harmonious 'one team' family environment is core to our success, & our team know we deal swiftly and fairly if needed.

Q. Give one additional example of how positive relationships at work are supported in your practice.

As well as weekly CPD for vets, fortnightly for nurses & functional or branch monthly team meetings, we hold a monthly practice meeting with all vets & a number of representatives from the different teams, this is a lively & engaging session but where via gathering points from the whole team we invite & share ideas for improvement & feedback, gather views & make a number of key decisions. As a practice we were noted by the RCVS Client Satisfaction Award inspector for our approach to communication & acting on feedback.

Career development

Q. Is supervision provided for less-experienced colleagues?

Yes! - Our lead vet & 4 cert holders support our less experienced vets; our head of nursing & reception are still live & support team members "in action". Vets have a mentor & a well-being buddy when they join us, their buddy to support them to settle quickly in what can be a new location, accommodation & workplace. A detailed off rota induction plan is in place for all new team members, Vets & nurses with 2 weeks off rota, reception up to 8 weeks.

Q. Does the practice support (e.g. fund and/or give time for) relevant training (e.g. clinical and/or professional/non-clinical skills) for colleagues in the following groups?

Vets: We fund and support "Thinking Thursdays" for Vets – internal and external CPD speakers over an extended lunch period with early afternoon appointments blocked off (healthy lunch provided). This is co-ordinated by our vet development co-ordinator whose role is purely to coach & accelerate the skills of the vet team. This focus on the vet team's development is evident in the increase in their confidence & skills, & our vet team retention. In addition, each vet has their own external CPD budget.

Nurses: We fund and support "Training Tuesdays" for nurses – internal and external CPD speakers over an extended lunch period, this is co-ordinated by the Head Nurse who is still clinical & actively working alongside the team to support & develop them, understanding what development is needed. Our nurse team are THE most experienced & long serving of all our teams with over 50% of the team having worked for us for more than 10 years, many over 20.

Reception: Up to 8 weeks off rota induction for new receptionists. Reception have the steepest learning curve. New team members spend time with all the different functions to ensure they fully understand the different roles & how they work together & spend time at other branches to learn best practice (bonus of getting to know the whole team).

We ensure that new members are trained on a task they can pick up quickly, so they feel they are adding value as soon as possible, thus aiding their confidence.

support staff: Our support team enjoy a variety of CPD, a structured induction ensures they learn about all functions not just their role & as a result make decisions that support our overall team goals. External CPD is encouraged & shared with the team. We utilise the expertise within the team to deliver in house CPD too, great for recognition. All our line managers are ILM accredited coaches which results in a change in thinking of the team leading to greater self-confidence especially in decision making.

Q. How are good performance and colleagues' achievements recognised by the practice?

We recognise our colleagues in many ways; simple thank you, flowers, "Pawsome Awards" and an annual salary review. In addition, we have our Oscar style "Best of the Best Awards" at the annual garden party & shared in newsletters & social media. These awards are voted for by colleagues, a winner & runner up in each function.

Everyone who is nominated receives a written copy of the wonderful things said by their colleagues. Now talked about all year & great for morale & team spirit.

Q. Give one additional example of how colleagues' professional and career development is supported in your practice.

We absolutely believe in developing our own people. We succession plan & work with our team members on their future. Career progression forms a large part of annual appraisal discussions if that is their desire. We always promote first from within; in the last two years 6 receptionists, 3 support staff, 2 of our vets & 3 nurses have been promoted into new roles. Our Practice Manager while only being in the industry less than 3 years has been promoted twice. Our team know we will support them.

Communication at work

Q. Do colleagues meet regularly – i.e. daily or weekly – to discuss day-to-day work matters?

Yes - see "Relationships". All teams meet on a regular basis. In addition, our hospital has a morning huddle to review procedures and inpatients and agree the "balanced" allocation of surgeries. We introduced "branch meetings" for nurses and receptionists that would find it hard to get to a central location, these are very supportive meetings, share ideas for improvement and gather feedback. These meetings ensure all team members feel valued and part of the team.

Q. Apart from meetings, what other communication channels for colleagues are used in the practice?

Every day we are communicating, huddles, meetings Email, WhatsApp groups, Rx messages, noticeboards. WhatsApp groups are used both for formal work comms & the more fun elements; photos after staff event, eek! Christmas morning messages, sharing family news, fund raising & great surgical success (with suitably gory photos) are all shared through this secure medium. As a large and multi sited practice this medium unites the teams, and supports across team support, but can be muted if wished!

Q. Are all members of the practice team able to have a say in how work is carried out?

As part of the function reviews all team members completed detailed surveys, were invited to attend workshops & share their views both at the start of the process & on proposed changes. The monthly whole practice meeting now provides all staff the chance to raise points either personally or via colleagues. This initial & now ongoing process ensure team members have their say in the shape of the business, a shape that is better for their input. We communicate that changes are as a result of this.

Q. Give one additional example of how effective communication is supported in your practice

Also see Relationships at Work.

Rx messages introduced this year are used heavily by the teams, great to share feedback, flag cases and ideas. The message can be linked to a specific patient, sent to a whole group, an individual or selected group. Great for across branch messaging, no need to chase around trying to find a colleague. A real time saver for the teams allowing them to deal with messages through the day from the same application they use with patients. This has not only improved the effectiveness of comms but also assisted team members to finish on time, & less emails!

Promoting physical and psychological health at work

Q. Does the practice take a proactive approach to managing health and safety hazards at work?

Absolutely!! Our people are our most valued asset and we think of them as family! We have a full time Buildings & Health & Safety coordinator, two independent inspections at all branches in the last year. A maintenance team of 3 who come off jobs to fix issues immediately, staff know they are there & it's easy to flag a concern before it becomes a hazard. All staff complete on-line H&S training via Citation. As a result, we are a hazard conscious bunch and have minimal accidents.

Q. Are healthy eating, exercise and similar health initiatives for colleagues promoted?

Much to some colleagues' disdain, we promote & provide "Healthy" lunches for CPD & meetings, & we don't have sweet or sugary drinks machines. We provide tea, coffee, herbal teas & a range of milk choices, along with filtered water, & low sugar squashes. Staff fridges are provided at all branches for food. We have invested in our lunch & learn room which includes a Mindful moments area to relax. We are just working on the final details for all staff health plan.

Q. How is awareness of mental health promoted by the practice?

We promote mental health awareness across the practice. This year we have added a Mental Health First Aider to our support. A balanced, open and trustworthy staff member who provides first line support and signposting for our team members, be it that they are experiencing difficulties personally or one of their family. We absolutely believe that this is as important as traditional first aid. This support is in its early days but has been well received and utilised by our team.

Q. What stress management initiatives are promoted by the practice?

A number! We utilise Caroline Crowe's "reset" (see below) have a mindful moments area with a basket of tools, & we are trialling 30 min weekly meditation sessions. Occupational therapist guides our heavy desk users on desk position & office environment. We actively encourage breaks, colleagues looking out for each other & insist on lunch away from desks. As a close-knit team colleagues observe each other, knowing they can flag stress concerns & that they will be handled quickly & sensitively.

Q. Are colleagues supported during extended sickness absence and on return to work?

With the number of staff, we have, this is something we face regularly. We offer phased return to work, amended contracts, part time working (see workload) keep-in-touch days & have provided financial flexibility. We ensure we utilise health practitioner's guidance & will engage occupational health if the situation requires. From this we willingly provide necessary equipment & role adaptation. As stated, we have a LOT of long serving team members as a result of this approach to "Our family".

Q. Give one additional example of how physical health and psychological wellbeing are supported in your practice.

As the vet industry has such a high rate of suicide, we felt the need to tackle this head-on. We have engaged with Carolyn Crowe from the VDS who has run the first session on resilience with our whole vet team, mentors & selected individuals from across the practice. The tips & techniques have supported our team to rationalise and re frame difficult times, developed their ability to support and communicate with each other and made it ok to need to ask for help and support. Session two is being planned!