



Meadows Farm Vets – Highly Commended

Work Demands & Work Conditions

Veterinary work can involve specific demands, such as working with distressed or discourteous clients, patient cases that are stressful, and lone working. Managing these demands effectively supports wellbeing.

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

Formal training is given during induction. When specific cases occur, they are discussed with the staff involved, suggestions are listened to and if necessary, further guidance is given. It's difficult to deliver training for every possible situation that may happen, so if a particularly relevant incident happens, it's added to the agenda for the next staff meeting or jotted down in the new staff handbook: e.g. responding to demands for CIA = listen, acknowledge but refuse & offer alternative.

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

Colleague is pulled aside without alerting other staff members and informed of the complaint. Given reassurance that it can be resolved and asked to convey/write down their version of events (depending on severity). If necessary, colleague phones the VDS with the senior vet next to them for support and reassurance. Always keep the staff member up to date with the progress/resolution of the complaint and if appropriate, share at practice meeting in the future so that rest of team offers support.

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

Everyone knows that they can contact the senior partner directly at any time and receive the full backing of the practice to get out of the immediate situation. Senior partner investigates case (chats to colleague and client) and if there are no extenuating circumstances, client is immediately fired in writing with reasons. We've only had cause to do this twice: clients were racist/sexist/made derogatory comments in high stress situations but also failed to apologise or acknowledge the distress.

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

Very active WhatsApp groups: lots of them! New grads, everyone, cases, social etc. Easy to get hold of another vet day or night (always 2 on call) to ask opinions, confirm going to surgery/returning home, checking who wants lunch collection from Brian the Butchers (fab hot pork rolls). Plenty of time built into the day to catch up in the office and see others, plus space to go for a walk and clear your head (boisterous "support" dogs available for walkies). Management also ask for help.

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

Management closely monitor workloads especially when vets have been on call at night or weekends. All the work is equally shared (good jobs and tedious ones) but adjustments are made for personal circumstances, exceptional situations, cases that go wrong, extreme weather. Plenty of flexibility in the diary to move consults around. E.g. Busy night on call means morning consults might be shuffled around, extra paperwork time allocated, another vet washes your kit up, get sent home for a shower or an early finish/hot lunch provided.

Everyone pitches in to help without hesitation because next time it might be them that needs the support. All staff know they can ask for support off the record too

Workload and work scheduling

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

We keep a tally of visits/number of cases seen and make sure that if someone has had a busy week, the next few days are easier to allow them time to follow up labs, make phone calls, deal with less stressful cases. Occasionally staff ask for projects e.g. client meetings and extra time is given to complete these. They are always thanked privately and again in public when the job is done. Management are easy to approach and ask for more/less work of a particular nature (if possible, its sorted!).

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

Prompt finish at 5pm if not on call - gives 15 hours before have to be back in office at 8am. Tend to find that people leave around 5.30 or so because they like to wait for everyone to be back at the office, have had a final cup of tea/piece of cake and handed over cases to on call vet. Everyone pitches in to help finish labs, wash up and tidy consults, restock etc. Supportive team who are genuinely interested in how everyone's day has gone, what's happening tomorrow, checking all jobs done.

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

Management are extremely keen at the interview stage of finding out hobbies/interests of new staff members, then directing them to local community/resources/people with similar interests. Fixed night on call and weekend rota written 3 months in advance, easy to swap. E.g. One of our vets is heavily involved with the Church Youth Group

- having morning off near Christmas to set up their Pantomime. Also attends weekend church (with on call phone on silent & 2nd vet will step up during services)

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

There is only one diary and the office administrator is primarily responsible for making sure consults happen on time. However, anyone can enter appointments to follow up cases & give themselves time for paperwork/projects if needed. Because you can see the whole diary on one screen, you can appreciate what everyone else is up to: this prompts vets to offer to see consults if colleagues are busy/held up/delayed and reception rarely have to ask for help. E.g. If a health plan consult is over-running, there is usually someone in the office/nearby who will volunteer to see next consult so that the first vet can catch up. Clients are trained to accept any vet for any job. All vets do everything.

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)?

Try to meet down the local pub at least once a week and decompress if had a particularly busy day when everyone has pitched in to help (alcohol not usually consumed by everyone). Non-management meet regularly at each other's houses for dinners, housewarming, BVA YVN, welcoming new grads etc. Have a team meal out at least 4 times a year (paid for by practice). Listen to requests for activity days: done a painting workshop "how to paint a cow", going paint balling next summer.

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

The main office is very open plan so conversations can be inclusive. There is a quieter area for studying. Much importance is placed on candidates at interview: everyone gets a chance to chat to them and contribute their opinion afterwards. Disruptive colleagues are pulled up privately and gently asked if there are extenuating circumstances or issues to air. We listen to them, address what we can, and try to resolve it. Office administrator = referee making sure things don't go too far!

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

There is a written policy (PSS accredited and Outstanding Award for Practice Team) available in the handbook. Gentle funny comments are encouraged but very strictly monitored by office admin and senior partner to make sure that it stays within reasonable terms. Usually check up with person who's been taking the banter to make sure they are ok, and if not, strongly reprimand the offenders to remind them to be professional. But gallows humour is rife and helps our team get through some awful days.

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

This year, the vets have allocated themselves as "teams": team new grad, team G, team international, etc. Usually starts with WhatsApp group and then seems to have percolated into everyday life in the office. E.g. Team new grad spend the morning on consults together, assisting and helping each other progress. Could be Team G on call at the weekend: share the visits out, get all the chores done, take credit for positive outcomes in cases. Totally created without management involvement but really effective! (& competitive). Strong mentor relationships between past and current mentors and mentees and new grads. Shared office space and respect between colleagues makes our team very cohesive.

Career development

Q. Is supervision provided for less-experienced colleagues?

Direct one-on-one supervision is always the starting point with staged levels of detachment tailored to the progress of the individual. Sometimes a younger colleague may be providing the supervision (seen more of that particular procedure) and older colleagues are open to assistance because it gets the job done quicker and shares the skill set around the practice. Everyone progresses at their own pace: monitored by a star chart so reception can see who needs more cases/who can go solo.

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: Usual CPD allowance and time off but very open to suggestions for particular courses/interests. Put one of the vets through a certificate with time allocated during the week for study, team meetings to discuss case studies/reports and help them bounce ideas for assessments. Management may recommend webinars/articles/courses (e.g. the RVCS Leadership course on FutureLearn) or the Webinar Practice Management series for the Clinical Director for example. Lots of in-house courses so everyone attends.

Reception Staff: Usually attend the in-house courses with the vets so that they can understand the new service/skill, answer client queries about it and direct relevant questions to vets for specific advice. We find that by not segregating staff, everyone learns more about each other's jobs and therefore can step in if disaster strikes (e.g. Vets can answer office phones and book consults, reception can triage phone calls, support staff can pre-empt equipment needed for cases) makes for a smoother team.

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

Management make a point of saying well done in front of the rest of the team and also privately. More recently we've started using a post-it-note system (great if we are really busy & everyone scattered around): senior partner makes sure staff have hand-written note stuck on screen saying thanks/well done etc. Achievements also reported in client newsletter/social media for everyone to hear about. Acknowledge when cases go well, certificates achieved, clients give positive feedback.

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

Annual reviews specifically address career development, but everyone can approach management all year round to discuss courses or interests. Sometimes vets are directed towards certain areas (e.g. health plans) that benefit the practice and end up inspiring the vet to pursue a specific skill or investigate a particular treatment. By giving everyone time in the day to work up cases, bounce ideas off each other and advance in the business (if that's what they want) we can engage aspirations.

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

8am is pre-team cup of tea huddle: gossip about last night on call, share updates on cases, check consults list. Usually reconvene around lunchtime/mid-afternoon (especially if someone has passed Brian the Butchers for pork rolls) to discuss the day. Tend to find that everyone hangs around until the last consult is completed (5.30ish) and all messages have been resolved so that everyone leaves at the same time. If super busy, someone volunteers to assist clean-up/go and relieve the vet/make tea.

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

WhatsApp is proving very popular - seems to be a good way to garner opinions and can be muted if on leave. Encourages photo recording of progress of cases and allows everyone to chip in their opinion equally. Also, great forum for offering support: e.g. Vet can discuss bad outcome case without facing everyone, get an idea of how to proceed, and then feels more comfortable to bring it up in the office/at meetings because everyone already knows the rough details. Stimulates healthy discussion.

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

Everyone has a voice and is listened to by management. We may not always be able to immediately effect a change, but our staff know that we will back them all the way and invest in new equipment/change procedures if mutually agreed by the team. Generally, find that younger vets are slower to question work, so management often challenge them by presenting the wrong option to encourage them to speak up and suggest the alternative (that management wanted all along anyway). Helps build confidence.

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

Vet had to leave for mental health reasons; made sure we dealt with them privately first of all, before steadily giving the rest of the team relevant information at pre-agreed stages with the individual so that they felt supported and not highlighted. Made sure that clients were given a specific version of events that raised no concerns and yet gave the vets an answer for the inevitable questions. Checked in regularly with the rest of team after the leaving to make sure their queries were answered and that they were coping with the changes. Some requested specific updates with respect to meeting the extra work required whereas others were more comfortable not discussing it further.

Promoting physical and psychological health at work

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

Comprehensive health and safety policy in place, plenty of safety equipment, review accidents at practice meetings. All staff know (and have at some point) asked for assistance and been given it immediately without question or recrimination. Management will have a word if someone does something questionable and usually have recruited another vet to provide supporting guidance so that individual does not feel picked on but know what is expected of them and what is definitely not expected!

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

What our staff do in their free time is up to them but we strongly encourage getting outside to get plenty of fresh air (staff dogs available for people without dogs to walk) and actively support individuals with particular interests in running/hiking/rugby etc with early finishes and fixed nights on call. Fruit and veg from people's gardens are brought in and shared out, gifts from clients also. Local resources are promoted - there's a gym nearby - so newcomers know what's about in the area.

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

Using the HALT campaign by Vetled and advertising the VetLife details. Sharing experiences at team meetings, or discussing matters privately and then ensuring the individual has options whether counselling (private health insurance provided) reduced workload, targeted discussions around cases, etc. Lots of articles in the Veterinary press (shared in WhatsApp groups) or magazines left out for perusal: cultivating an open and supportive atmosphere allows staff to voice concerns on/off record

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

HALT campaign has certainly made everyone stop and think about how they feel and how others might feel. It's used to prevent someone reaching a crisis point, or least to try and slow the deterioration down. Has made the team aware of tools to use when suspecting someone is not coping. Also, lots of open discussion about expectations, perfectionism, how to get over bad cases/outcomes and shared experiences so that no-one feels isolated. Anyone can approach management in confidence at any time.

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

Follow ACAS guidelines and use BVA legal advice line to address this. Have used Occupational Health services, interviews and repeated assessments to make sure that staff can ask for accommodations to be made, and that the business (where possible) can do everything they can to facilitate a smooth return to work/manage long term sick leave. Learning from experience and improving our policies on a case by case basis. Management audit cases and assess what could have been done better/went well.

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

Chance to use counselling without needing permission from management as part of private health insurance. Also think most staff are aware that management themselves have had issues and so mental health is not stigmatised or considered a hindrance to being part of the team. Special efforts made to accommodate certain team member's preferred environment: some like a quiet space to read and work, others have to be outside as much as possible, some need to be able to discuss every detail of recent consult to placate their conscience, others prefer to allow some time to pass before auditing bad outcomes. Adaptability of management and awareness of individuality means that responses are tailored.