



**Amy Thornley RVN Dip CVN**

Following her VN training, Amy worked in a referral practice for two years. She then took a year out to travel and work in Australia and Namibia. Amy is currently working for the PDSA in a busy charity practice environment.

# Working for the PDSA

**Amy Thornley** RVN Dip CVN

PDSA, 7, Warwick Road South, Old Trafford, Manchester M16 0JW UK

**ABSTRACT:** Working for a charity can be a very different experience to that of private practice; and although challenging, it is also extremely rewarding. The PDSA provides care to the sick and injured pets of people in need and promotes responsible pet ownership.

## Day-to-day running

The PDSA PetAid Hospital, where I am based, can be very busy on a daily basis. It goes without saying that in such a busy environment no two days are the same. With a varied nursing rota that includes theatre, ward and consultations, nursing skills are utilised well within the hospital; but with such a heavy workload, the challenge of prioritising nursing duties is vital to allow nursing of the highest standard.

Routinely there can be four or five vets consulting throughout the day with a constantly busy appointment diary. Nurses have their own consultation list consisting of second vaccinations, weight clinics and postoperative checks, as well as helping with X-rays and blood samples as requested by the vets (**Figure 1**).

There are generally two vets operating; with one vet solely dedicated to our elective neutering service and the second performing non-preventive surgeries. The ward has an average of 15 to 20 animals per day requiring pre-operative assessments, postoperative monitoring and discharge of the pets from the hospital.

## Preventive services

One of the biggest differences that I found in my move from a private practice to working for a charity was the increase in unneutered and unvaccinated animals. Whereas previously I rarely saw pyometra cases, I am now seeing them on a weekly basis; and cases of suspected parvovirus are encountered much more often. Clearly owner education about preventive care is vital in order to reduce these numbers.

The PDSA has been providing 'paid-for' preventive services since 2005. These include neutering and vaccination,

microchipping, and flea and worming treatments. This gives the opportunity for nurses to educate owners on responsible pet ownership and pet well-being. I feel that owner education is a very important aspect of veterinary nursing and since working for the PDSA this role has grown significantly.

## Breeding

A challenging area I discovered when moving to a charity practice was the increased number of puppies with inherited problems – often resulting from a lack of correct breeding procedures. Again this highlights an area for education and although PDSA does not support owners who breed from their pet, a great deal of advice is provided about inherited health problems, both directly to our clients and through broader information campaigns.

I think this work is essential in order to minimise the occurrence of such problems as puppies with hip dysplasia, Shar Peis with skin and eye problems, young animals with heart problems, and other inherited conditions that could have been prevented had the correct checks been performed.

**Figure 1.** Nurses have their own consultation list



To cite this article use either  
DOI: 10.1111/vnj.12125 or Veterinary Nursing  
Journal VOL 29 pp107-108





Figure 2. We routinely ask our clients for a contribution towards their pet's treatment

The number of pregnant cats seen at the PDSA PetAid Hospital in Old Trafford has also highlighted the large scale of the feline stray population. The biggest cause of this is a general lack of awareness; which fact underlines again how essential it is to ensure clients are helped to understand the factors involved.

## PDSA eligibility and income

The PDSA veterinary services are available to pet owners who receive means-tested help with their rent or Council Tax (Housing Benefit or Council Tax reduction/support). Services are available at PDSA PetAid hospitals or PetAid practices, depending on where the owner lives.

Voluntary income through donations and legacies is the PDSA's most important income source, constituting 65 per cent of its total income. Additional income comes from shops, fund-raising groups and other revenue sources. We also actively ask our clients for a contribution towards their pet's treatment, and this accounts for a growing proportion of our income (Figure 2).

## Restrictions

The charity receives no government funding; therefore, it is essential that money is used wisely to benefit all the pets in our care. Blood analysis is performed using in-house blood tests to measure packed cell volume, blood glucose, total protein and blood urea


nitrogen, with access to an external laboratory if further analysis is required.

Histopathology is not performed routinely, although tumours are sent to external laboratories if there is cause of concern and fine needle aspirates are often evaluated at the PDSA hospital. There is also restriction on the drug range supplied.

Surgical procedures performed include fracture repairs and various soft tissue surgeries, all similar to procedures in private practice. If medical or surgical cases do not fall within our specified remit, referral is always advised – though, sadly, owner financial restriction means this is not always an option.

## Summary

Although life at the PDSA can seem hectic at times, the reward is that every day I know I have contributed towards a pet's well-being and helped clients in situations where they cannot afford their treatment.

The PDSA provides the opportunity to work in a challenging and fulfilling environment in which I can make the most of my nursing skills, as well as helping to improve animal welfare. 

## NEWS REVIEW by Jean Turner

### 492 VNs removed from the List/Register

The Royal College of Veterinary Surgeons (RCVS) has written to 492 veterinary nurses (VNs) whose names were removed from the RCVS *List/Register of Veterinary Nurses* for non-payment of fees. The number of VNs removed from the *List/Register* is down from a total of 625 who were removed for non-payment at the beginning of last year.

The deadline for payment of fees to remain on the RCVS *List/Register of Veterinary Nurses* was 1 November 2013, although fees were accepted until 31 December.

Although the RCVS has written to the VNs who have been removed, it is likely that some of these nurses have not kept the RCVS informed about changes to their addresses. Consequently, these VNs may not receive the letters and may not have received the previous fee reminders sent by the College.

Others may have chosen not to renew their fees voluntarily – owing to a change in circumstances, for example.

Employers are encouraged to check that the VNs they employ remain on the *List/Register*, as those who are not

listed or registered are not legally permitted to carry out minor surgery or medical treatment under Schedule 3 of the Veterinary Surgeons Act 1966.

The list of VNs removed is available on the RCVS website at [www.rcvs.org.uk/vnremovals2014](http://www.rcvs.org.uk/vnremovals2014) to assist with these checks.

VNs and others can check the updated *List/Register* online by visiting [www.rcvs.org.uk/checkregister](http://www.rcvs.org.uk/checkregister) VNs who have been removed from the *Register* and wish to apply to be restored should contact the Registration Department on 0207 202 0706 or [regnurses@rcvs.org.uk](mailto:regnurses@rcvs.org.uk)

### Foundation needs help at BSAVA Congress

The Bella Moss Foundation relies solely on volunteers. The organisation is seeking student vets and nurses to help out on its stand at the BSAVA Congress between 3-6 April where it will be promoting the forthcoming One Health Conference 13 October 2014.

If you would like to help, call 0845 2888804 or e-mail [info@thebellamossfoundation.com](mailto:info@thebellamossfoundation.com)