

Thank you for your financial support

VSHSP is grateful to the following organisations for their generous support in 2008.

- Royal College of Veterinary Surgeons
- Veterinary Defence Society
- British Small Animal Veterinary Association
- Society of Practising Veterinary Surgeons
- British Equine Veterinary Association
- British Veterinary Hospitals Association

It is only through generous financial support from sponsors that VSHSP continues to function and offer a service to the profession which is inevitably valued by those individuals needing help with mental health problems and addictions but also by many who are reassured by the existence of this facility should the need arise.

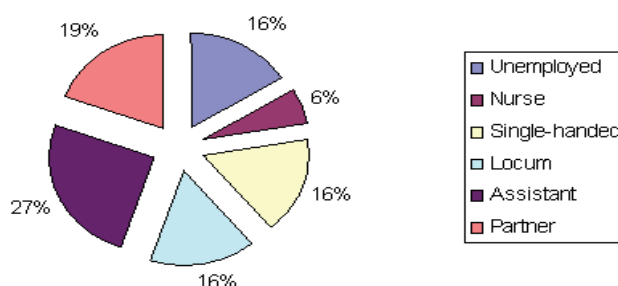
Ongoing support is required

We invite our sponsors to continue to support us with annual grants into the future and prospective sponsors to give serious consideration to providing regular financial support in order that the Programme can maintain and expand its function.

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NEW CASES BY EMPLOYMENT TYPE

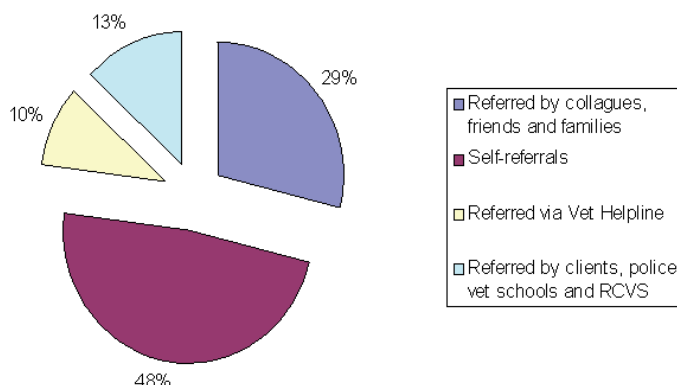


New VSHSP cases in 2008

There were 31 new cases in 2008, almost half of whom were self-referrals to the Programme. 13% were under the age of 30 years.

The majority of new cases were assistants in practice.

SOURCE OF NEW CASES



Veterinary Benevolent Fund

7 Mansfield Street
London W1G 9NQ
Tel: 020 7908 6385
Fax: 020 7980 4890
Email: info@vetlife.org.uk
Web: www.vetlife.org.uk

Treatment offered by the Programme

VSHSP treatment programmes vary but are designed to suit an individual's specific medical needs.

For some, advice from the National Co-ordinator is sufficient; the more severely affected may require out-patient treatment

whilst for the seriously ill, inpatient therapy is usually needed.

With intervention and a one-to-one individually tailored therapy programme a high proportion will return quickly to work and to normal family relationships.

The cost of a course of treatment at a well established clinic may be given as a gift to those individuals requiring in-patient treatment who are not able to obtain funding from other sources or fund themselves.

“Treatment is tailored to specific medical needs”

Treatment provided in 2008

There was an increasing number of approaches to the Programme from members of the profession suffering with mental health problems including stress and depression.

VBF was notified of several members of the profession who had sadly lost their lives through suicide during the year.

Diagnoses of new cases 2008

Figures include multiple diagnoses (this means that % figures total more than 100)

Alcohol related	35%
Drug related	22%
Mental-health related	58%
Eating Disorders	6%
Other	13%

Inpatient	3
Counselling from the VSHSP National Co-ordinator	26
Referred to psychiatrist	8
Referred to GP	4

“Increasing number of members of the profession with mental health problems including stress and depression”

Information and educational activities 2008

The National Coordinator was available to provide information on drugs, alcohol and mental health. Educational visits and presentations are offered to all of the veterinary schools and it is planned that these will be delivered to all of the schools by the end of 2009.

The Vetlife website (www.vetlife.org.uk) continued to be a valuable tool for disseminating information and increasing awareness of the Programme.

Those seeking help and advice from the National Coordinator were now able to contact him by

email and this proved to be a popular method of communication for members of the profession with health problems.

“Presentations offered to vet schools”

“Members of the profession can now make contact by email”

New National Co-Ordinator

Dr Virginia Richmond resigned from the post of National Coordinator during the year.

Mr Rory O'Connor, a mental health nurse with specialist post-graduate qualifications in addictive disease and with many years experience of working with addicted health

professionals, including in association with VSHSP was appointed as National Co-Ordinator in September 2008.

The Programme was also fortunate to gain the involvement of Dr Douglas Fowlie, Consultant Psychiatrist and Honorary Senior Lecturer at the University

of Aberdeen, who holds a special responsibility for developing nationally dedicated assessment, treatment, rehabilitation and support services for clinicians. He has agreed to audit the Programme in 2009 and to provide mentoring and clinical supervision for the National Co-ordinator.

“Rory O’Connor is the new National Co-ordinator”

New for 2009

The tenth anniversary of the VSHSP’s launch at the House of Lords in March 1998 seemed an appropriate time for the VSHSP Steering Committee to undertake a review of the Programme.

One of the outcomes of this review was that it was considered appropriate for the VBF Board to manage the Programme more closely and for 3 of the VBF Board Directors to be given special responsibility for the overall management of VSHSP while the National Co-ordinator continued to run the Programme day today on a consultancy basis and report to these 3 Board Directors.

These Directors report to the Board and the National Coordinator will also attend VBF Board meetings regularly to report on his activities.

The National Coordinator can call on the help of Special Carers, people close to the profession who are recovering from addictive disorders themselves, and Regional Carers, well respected senior members of the profession who are able to provide support to the sick person, their family and their practice or other workplace.

Neither the Special nor the Regional Carers receive any remuneration but they are entitled to claim out-of-pocket expenses. A new electronic record facility has been established for the National Co-ordinator.

This will facilitate use of information extracted from the case notes, without compromising anonymity, to identify possible risk factors for substance

misuse and other mental health problems within the profession.

A Practitioner Health Programme (PHP) is currently being piloted with doctors and dentists from the London area and may then be rolled out nationally. The PHP service offers primary care, access to secondary care for addictive disorders and recurring mental illness (a dedicated in-patient clinic) and ongoing care until recovery. VSHSP will work towards the inclusion of veterinary surgeons in the PHP and, in the meantime, develop the VSHSP service to mirror the PHP as far as possible.

A National Coordinator (NC) will be employed in some capacity whether or not VSHSP is included in PHP in the future.

“New management structure for VSHSP”

“Electronic case record facility established”

VBF Board Directors with special responsibility for VSHSP:

L A Brown
BVSc BA PhD
MBA FRCVS

Kenelm Lewis
DVM CertVR
MRCVS

H S Orr
BVSc DVR
MRCVS