



# Introducing the Care Framework

Development of a data-driven quality improvement project

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# IVC Evidensia

IVC Evidensia is one of the biggest veterinary companies in the world.

We have over 2500 clinics across 20 countries in Europe and North America, with a team of around 41,000 people, treating more than 8.5 million animals a year.

We cover a wide spread of veterinary areas including first opinion practices; state-of-the-art referral hospitals; companion animal, farm and equine practices; and supporting businesses including crematoria and online pharmaceutical providers.

The Group Clinical Research & Quality Improvement Team has been built over the past year to support research across IVCE at all levels.



# How to improve the quality of veterinary care on a grand scale?

Ongoing drive to improve quality of care holistically

Need to reduce antimicrobial usage as part of global efforts

Time from research to adoption of new clinical practice is long

Need to measure any changes and improvements effectively

Potential to drive evidence-based veterinary medicine forward using data in large scale projects



# Introducing Care Frameworks

Created for common conditions

10 points highlighting optimal care based on current research

Created by a team of peers – over 100 involved in creation

Tools not rules - aid, not prescriptive

Aim to support closer engagement with care

Linked to measurable behaviours

## Canine Atopy Care Framework



### Scope/Inclusion Criteria

- Dogs, >6m, all breeds
- Pruritus and skin inflammation/infection
- Supporting otitis externa care framework cases

### WELFARE



Manage pruritus, pain and stress

### DIAGNOSTICS



Take a full history, physical and dermatological examination

Perform a diagnostic food trial in patients with non seasonal symptoms

Allergy testing is not required to make a diagnosis of atopy

### TREATMENT



Manage acute flares with fast acting drugs and arrange follow up

Create a proactive individualised multimodal treatment plan for chronic management

Support skin barrier function using topical therapy and supplements

Antibiotic therapy is rarely indicated in well managed atopic cases

### CLIENT CARE



Set client expectations for long-term condition – always book a follow up consultation

Address caregiver burden

Full framework documents will be regularly reviewed. For the most recent version, please refer to intranet documents.

This Care Framework is a summary of recommendations from a QI group including Vets and Nurses (first opinion and specialists/referral), experts in welfare, nutrition, and quality improvement. It is based on evaluations of the latest evidence, specialist expertise and clinician experience. This Care Framework is designed to support tailored clinical judgement and apply to the vast majority of dogs with Atopy. Clinician discretion is required for comorbidities and other significant patient/client factors. It should be used in conjunction with the underlying supportive guidance.

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**WELFARE**

- Manage pruritus, pain and stress**
  - 1a) [Short form of the Glasgow Composite pain scale for dog owners](#) (opens in new tab)
  - 1b/c) [Dermatology itch tracker](#) (opens in new tab)
  - 1d) [FAS](#) (opens in new tab)

**DIAGNOSTICS**

- Take a full history, physical and dermatological examination**
  - 2a) [cAD overview](#) (opens in new tab)
  - 2b) [Favrot's signs and differential diagnosis](#) (opens in new tab)
  - 2c) [Dermatology appointment questionnaire](#) (opens in new tab)
  - 2d) [Dermatology itch tracker](#) (opens in new tab)
  - 2e) [Canine body map](#) (opens in new tab)
  - 2f) [Breed distribution of lesions in canine atopic dermatitis](#) (opens in new tab)
  - 2g) [Clinical features of canine atopic dermatitis](#) (opens in new tab)
  - 2h) [Ear cytology microscopy examples](#) (opens in new tab)
  - 2i) [Skin Sampling](#) (opens in new tab)
- Perform a diagnostic food trial in patients with non seasonal symptoms**
  - 3a) [Exclusion dietary flow chart](#) (opens in new tab)
  - 3b) [External allergens chart](#) (opens in new tab)
  - 3c) [Pet wont eat diet list](#) (opens in new tab)
  - 3d) [Shape & bake instructions](#) (opens in new tab)
- Allergy testing is not required to make a diagnosis of atopy**

**TREATMENT**

- Manage acute flares with short acting drugs and arrange follow up**
  - 5a) [cAD acute management](#) (opens in new tab)
  - 5b) [Oral treatment options to reduce itch, inflammation and mode of action](#) (opens in new tab)

This Care Framework is a summary of the current evidence and is not intended to replace clinical judgement. It is based on evaluations of the latest evidence, specialist expertise and clinician experience. This Care Framework is designed to support tailored clinical judgement and apply to the vast majority of dogs with Atopy. Clinician discretion is required for comorbidities and other significant patient/client factors. It should be used in conjunction with the underlying supportive guidance.

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## References for Canine Atopy care framework

| Welfare                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Harvey et al (2019). Behavioural difference in dogs with atopic dermatitis suggest stress could be a significant problem associated with chronic pruritis. (2019). MDPI (9).                                                                                                                                                                                      | <a href="https://www.mdpi.com/2076-2615/9/10/813">https://www.mdpi.com/2076-2615/9/10/813</a>                                                                                                                                                                                                                     |
| Koch, C. et al. (2022) Associations between atopic dermatitis and anxiety, aggression and fear based behaviors in dogs. Journal of the American Animal Hospital Association 58 (4). 161-167.                                                                                                                                                                      | <a href="https://www.researchgate.net/publication/361822487_Associations_Between_Atopic_Dermatitis_and_Anxiety_Aggression_and_Fear-Based_Behaviors_in_Dogs">https://www.researchgate.net/publication/361822487_Associations_Between_Atopic_Dermatitis_and_Anxiety_Aggression_and_Fear-Based_Behaviors_in_Dogs</a> |
| Noli C, Minafo, G & Galzerano, M. (2011). Quality of life of dogs with skin disease and their owners. Part 1. Development and validation of a questionnaire. Veterinary Dermatology. 22. 335-343. <a href="https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1365-3164.2010.00954.x">https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1365-3164.2010.00954.x</a> | <a href="https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1365-3164.2010.00954.x">https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1365-3164.2010.00954.x</a>                                                                                                                                                   |
| Rybníček J, Lau-Gillard PJ, Harvey R, Hill PB. Further validation of a pruritus severity scale for use in dogs. Vet Dermatol. 2009 Apr;20(2):115-22. doi: 10.1111/j.1365-3164.2008.00728.x. Epub 2009 Dec 19. PMID: 19171021.                                                                                                                                     |                                                                                                                                                                                                                                                                                                                   |
| Diagnostics                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                   |
| Miller J, Simpson A, Bloom P, Diesel A, Friedeck A, Paterson T, Wisecup M, Yu CM. 2023 AAHA Management of Allergic Skin Diseases in Dogs and Cats Guidelines. J Am Anim Hosp Assoc. 2023 Nov 1;59(6):255-284. doi: 10.5326/JAAHA-MS-7396. PMID: 37883677.                                                                                                         | <a href="#">JAAHA7396_proof.pdf</a>                                                                                                                                                                                                                                                                               |

• 5a) [CAD acute management](#) (opens in new tab)

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## Care Frameworks are available across many different common conditions and treatment approaches

Canine Atopy

Canine Diabetes Mellitus

Canine Mitral Valve Disease

Canine Otitis Externa

Cushing's Syndrome

7 more in development, as well as  
Equine and Farm frameworks

Feline Cardiomyopathy

Feline Diabetes Mellitus

Feline Lower Urinary Tract  
Disease

Feline Renal Disease

Feline Urethral Obstruction

Also launched in 7 other countries:  
Sweden, Norway, Spain, Germany,  
Netherlands, Republic of Ireland,  
Canada

Osteoarthritis

Periodontal Disease

End-of-life

Urgent Eye Conditions

Major Trauma

Emergency Seizures

Low Flow Anaesthesia

Health Checks

Wellness Screening

# How can we measure the impact of Care Frameworks?

## What can we measure?

- What is possible?
- What is useful?
- Do we want to change it?

## How do we measure?

- Product codes
- Timeframes
- Benchmarking reports

## What does 'good' look like?

- Known benchmarks
- Estimates in literature
- What is realistic?

## How can we involve everyone?

- Reports available for all
- Bespoke reports for different teams

# How can we measure the impact of Care Frameworks?

Detailed metric measurement



Time Period



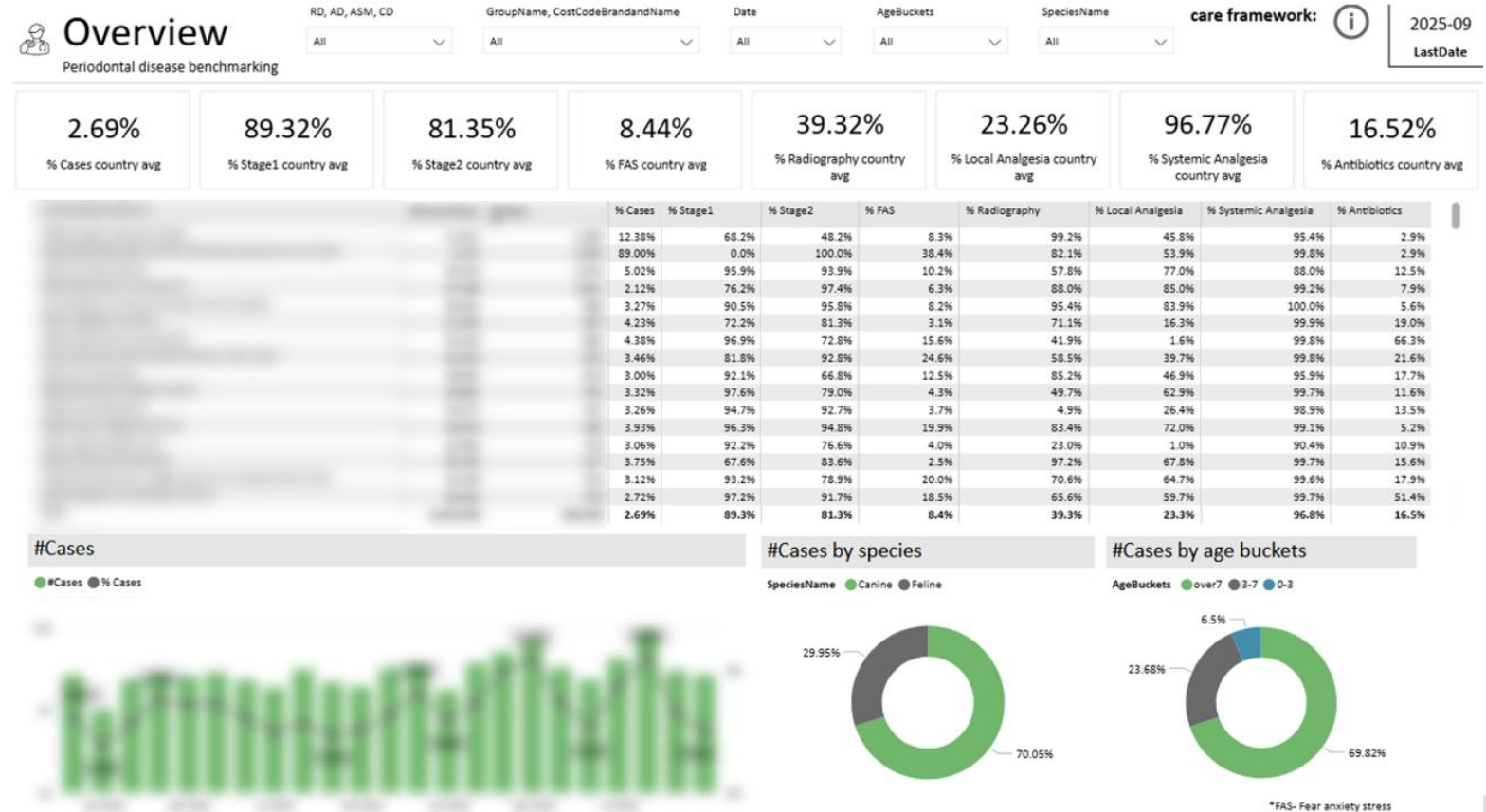
Clinic/Region



Species/Age



Time trends



# How can we measure the impact of Care Frameworks?

Detailed metric measurement



Time Period



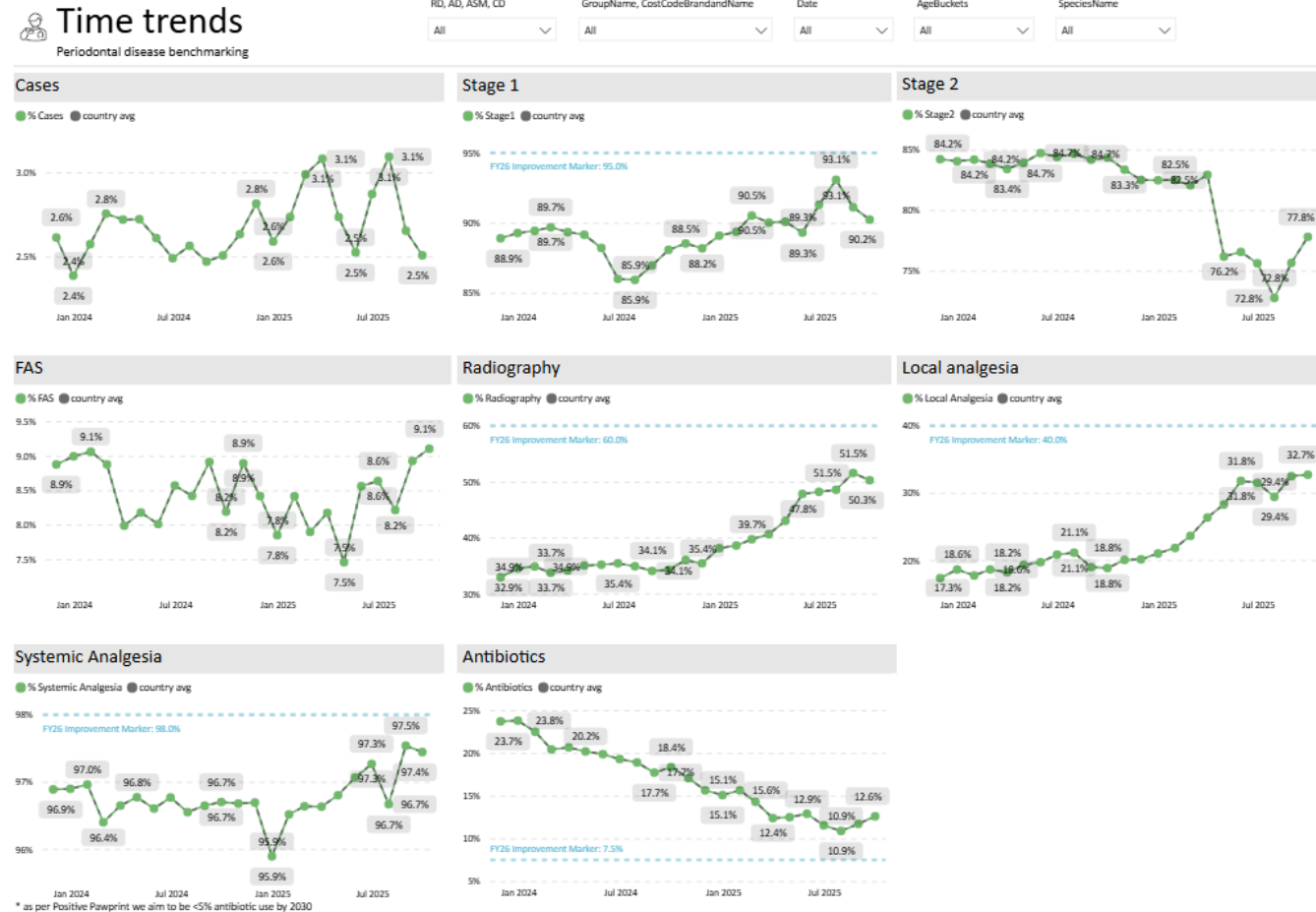
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Time trends

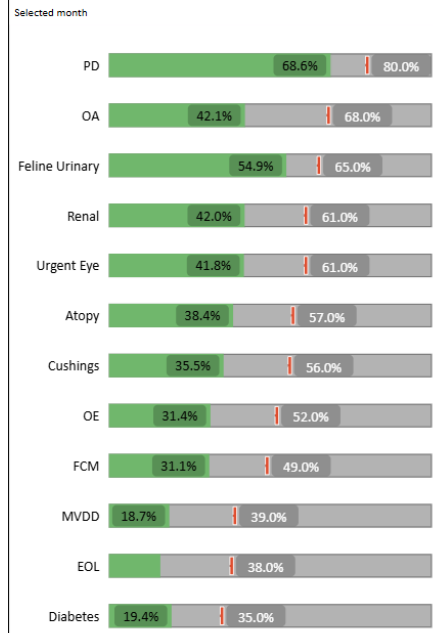


# How can we measure the impact of Care Frameworks?

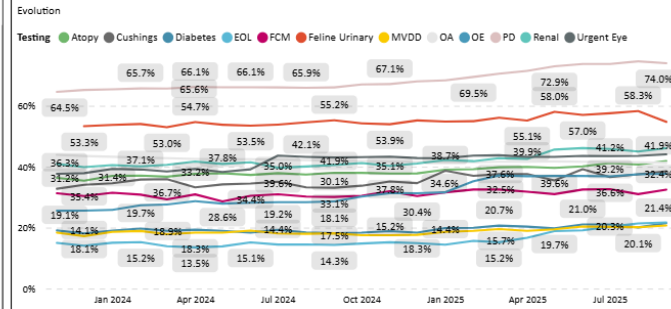
## Adoption score – summary metric

- At-a-glance view, single number per CF
- Aggregate of individual metric measurements
- How close are we to what could be possible in an ideal situation?

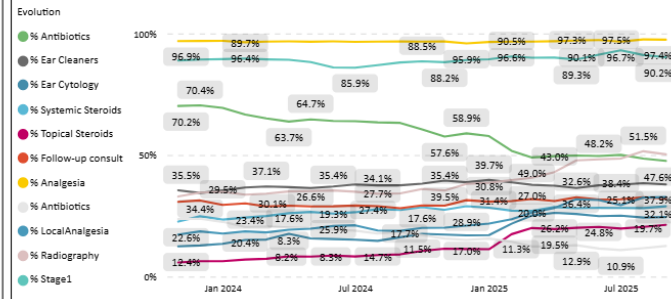
### Score vs Improvement marker



### Framework adoption score



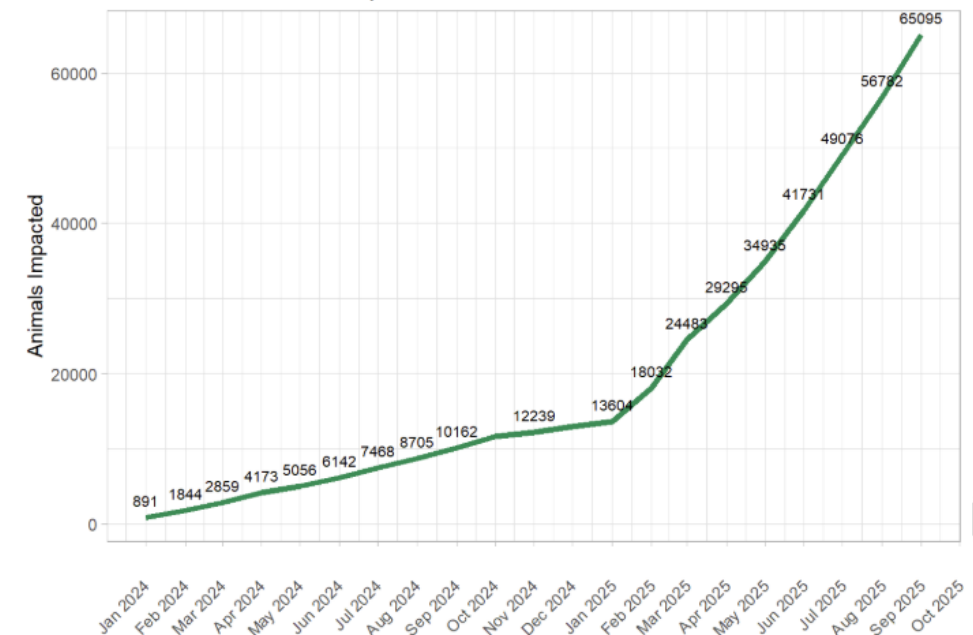
### Treatment metrics over time



## Animals impacted – summary metric

- Higher level, single number overall
- Calculated based on % of animals receiving 3+ of the measurable recommendations on a CF compared to baseline of 12m prior
- Some caveats, i.e. may duplicate if animals are seen for more than one condition, but gives a general trend

### Cumulative Animals Impacted, 2024 - 2025, All Care Frameworks Combined



## Colleagues have reacted very positively and are using Care Frameworks in practice

“

To produce a care framework for something I am passionate about and to provide guidance and materials for other practices to use gave a huge sense of achievement.

“

I really enjoyed collaborating with other vets from all the different backgrounds and putting something together that will hopefully really make a difference.

“

The care framework prompted us to look at our antimicrobial usage and ear cytology now plays a key role in guiding these decisions.

“

We assign each one to a vet to go through it in detail and then put together a summary presentation highlighting what we could do to improve on our current approach.

“

Client care have accessed and used resources in other frameworks - such as End of Life to act as training and support resources for their team. I think it is great how it is all joined up!



## Colleagues have reacted very positively and are using Care Frameworks in practice



**88%** were **aware** of the Care Frameworks



**71%** rated the Care Frameworks either **very** or **extremely useful**.



Of those that were aware, **72%** had **used** a Care Framework in the last 12 months.



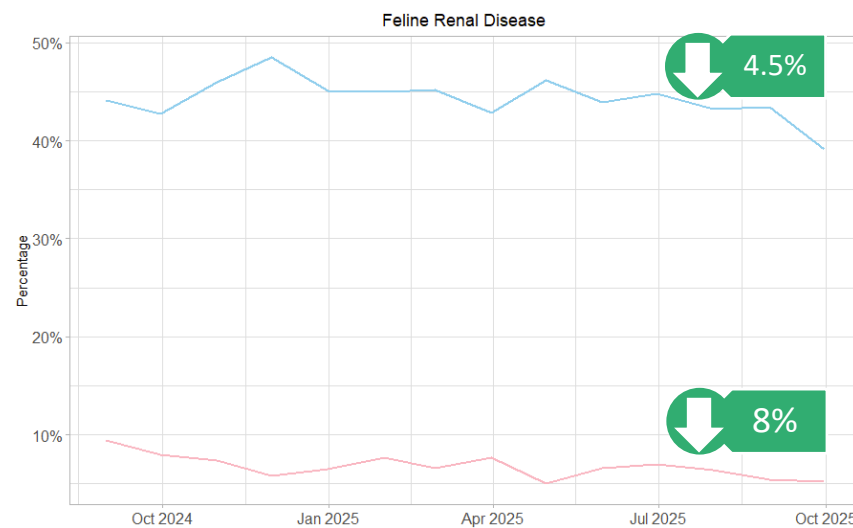
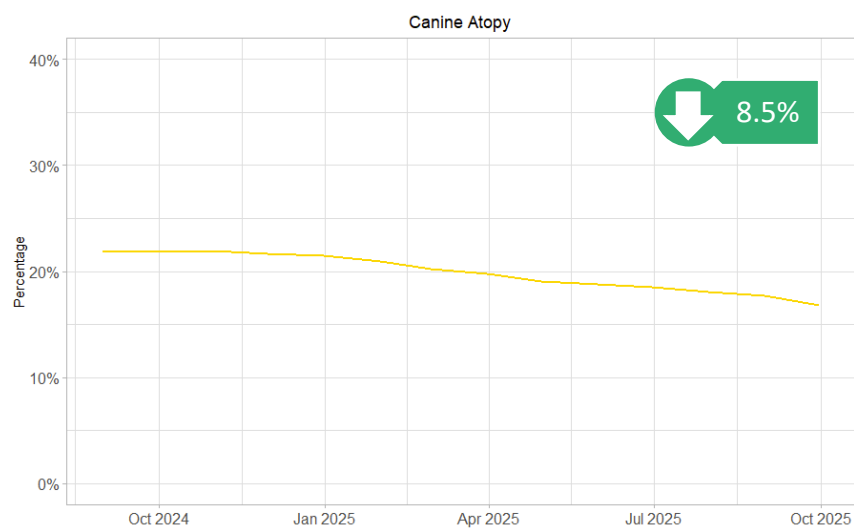
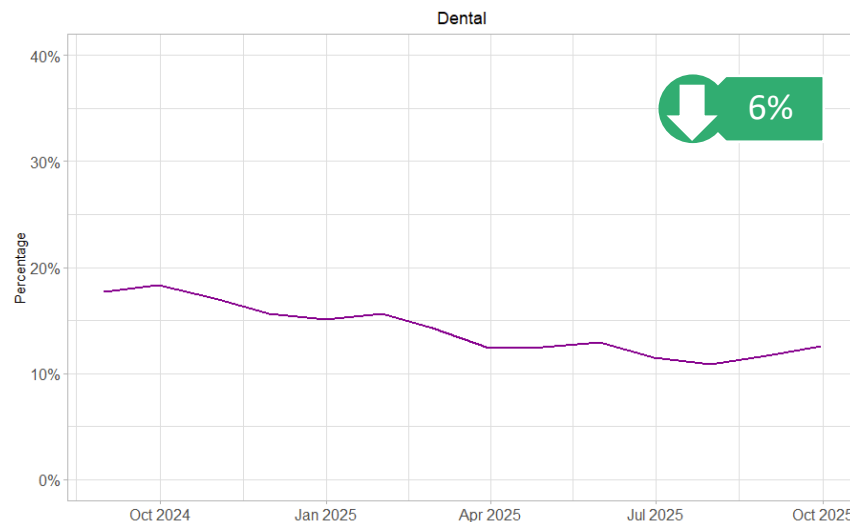
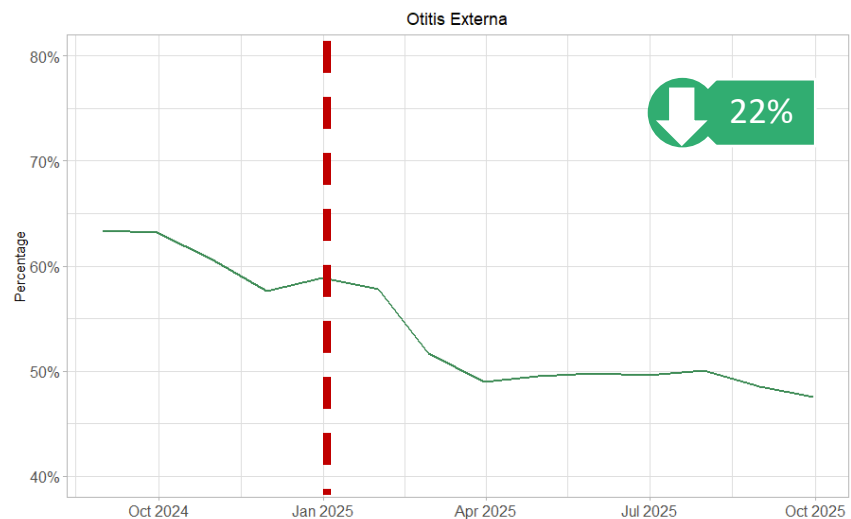
**64%** agreed or strongly agreed that the Care Frameworks had changed the way they treated cases in their clinic



**64%** agreed or strongly agreed that the Care Frameworks had helped reduce the use of antibiotics in their clinic



# Antibiotic Usage has noticeably decreased

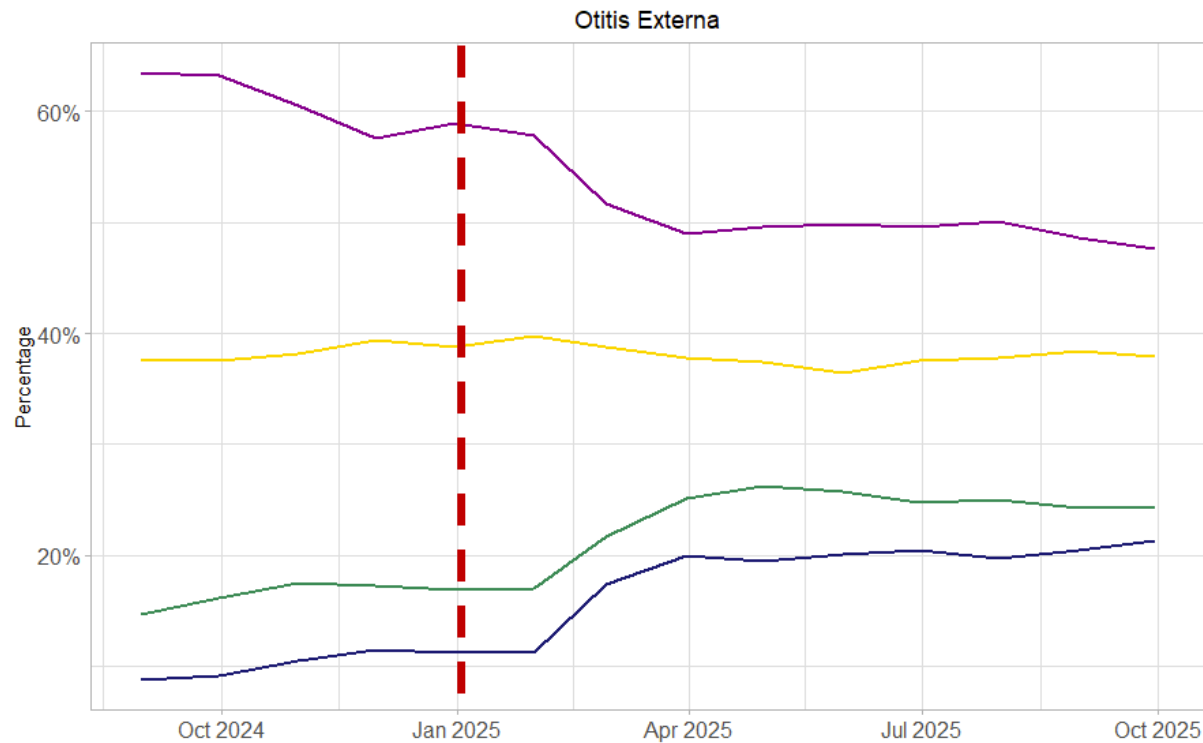


Clear decreases in antibiotic usage since launching the CFs

In particular for Otitis Externa since Jan 2025 – focus in clinics

— All  
— Convenia

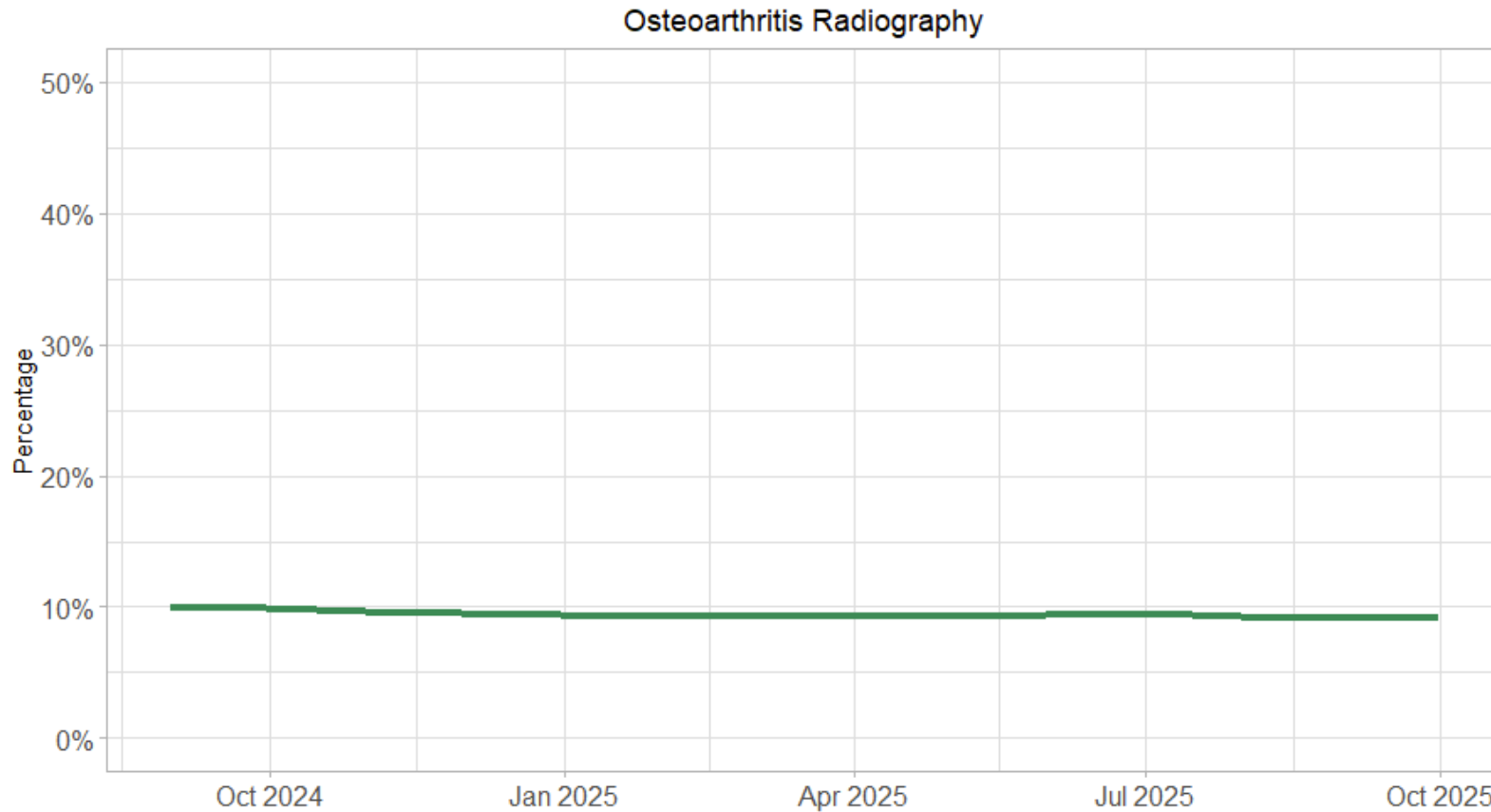
# Otitis Externa has been a particular success story



|                   | Cleaner | Ear Cytology | Steroids | Topical Steroids | Follow-Up Consult | No Antibiotics |
|-------------------|---------|--------------|----------|------------------|-------------------|----------------|
| Cleaner           | 1.00    | 0.07         | 0.26     | -0.02            | -0.02             | 0.66           |
| Ear Cytology      | 0.07    | 1.00         | 0.26     | 0.03             | 0.12              | 0.40           |
| Steroids          | 0.26    | 0.26         | 1.00     | -0.16            | 0.02              | 0.27           |
| Topical Steroids  | -0.02   | 0.03         | -0.16    | 1.00             | 0.00              | 0.48           |
| Follow-Up Consult | -0.02   | 0.12         | 0.02     | 0.00             | 1.00              | 0.03           |
| No Antibiotics    | 0.66    | 0.40         | 0.27     | 0.48             | 0.03              | 1.00           |

Clear increases in Ear Cytology and Topical Steroids alongside reductions in Antibiotics indicates behaviour change

## However, less change has been seen in Osteoarthritis (OA)



Osteoarthritis is quite flat or trending down in most metrics

Ongoing investigation into why and if we can change this

Why not image all OA cases?

- Cost
- Risk of general anaesthetic
- Lack of confidence

## Identifying cases is the key issue in effectively measuring impact and change

### No consistent clinical coding

Need to use a combination of products within a timeframe

### Clear, discrete products?

- Simple to identify cases
- Data filtering based on product codes

Diabetes

### Generic products?

- More complex – may be notable misclassification
- Filtering based on codes, IF/AND/OR, timeframes

Osteoarthritis

### No identifying products?

- Not possible – need to use an alternative approach
- Machine Learning/AI

Major Trauma

## Identifying cases is the key issue in effectively measuring impact and change

### Major Trauma

- Obvious in clinic, not so in data
- Several different treatment approaches, but nothing that separates it effectively

### Text Mine

- Obtain possible cases through keywords in clinical notes and certain products

### Label cases

- Label a portion of cases for training – manual by clinical experts

### Model

- Machine learning: transform text to vectors, train model to predict cases

### Evaluate Output

- 30% accuracy from SVM, >70% from Neural Net

## Where do we go from here?

LLMs may improve performance further

Extending case identification to more conditions

Using results for further research

Apply rules & tools to other countries' data

Improve structure of our data to aid modelling –  
ontologies etc



# Thank you

## Acknowledgements

James Oxley, Tim Fraser, Alexej Ahn, Ruth Elliot, Caroline Gardner, Stuart Garde, Andreas Lervik, Rachel Malkani, Lesley Moore, Dragan Rusimovic, Karolina Scahill, Helen Tottey, Sara Turnbull, Gemma Williams, Richard Hooker, Gudrun Ravetz, Laura Playforth, David Singleton, Care Framework Consortium.

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