

A photograph of several black graduation caps with blue tassels flying through the air against a clear blue sky. In the foreground, the hands of graduates in blue gowns are visible, reaching up towards the caps. The bottom half of the image is overlaid with a large orange triangle.

Pawfect Beginnings

New and Recent Grad Symposium

Spectrum of Care for New Graduates: When Gold Standard Isn't Possible

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Introduction

As a new veterinary graduate, you enter practice carrying both scientific rigor and profound compassion. Yet you will quickly encounter a gap between the care you were trained to deliver and what is achievable within the real-world context of your patients' families. This proceeding accompanies the presentation Spectrum of Care for New Graduates: When "Gold Standard" Isn't Possible and is designed to serve as a practical reference as you navigate the early years of your career.

The central aim of this session is to invite a shift in perspective - from a binary "gold standard or failure" mindset toward a curious, compassionate, and contextualized approach to care. This shift has implications not only for the animals and families you serve, but for your own moral wellbeing and professional longevity.

Rethinking the "Gold Standard"

Veterinary training is appropriately grounded in evidence-based, tertiary-referral-level medicine. However, when that framework becomes the default lens through which all clinical interactions are evaluated, it can inadvertently create harm - for clients, for patients, and for practitioners.

The concept of the "gold standard" implies a single correct path. When that path is unavailable - due to financial, geographic, cultural, or other constraints - it positions the client (and sometimes the clinician) as having "failed." This framing is not only inaccurate; it is a known contributor to moral injury.

Key Insight

The art of veterinary medicine has always been making sound clinical decisions that meet the goals and resources of all involved. This is not a compromise of The Veterinary Oath - it is the fulfillment of it.

Three Phrases to Retire

The following phrases, though common in veterinary culture, carry judgments that can erode trust, deepen moral distress, and damage the human-animal bond:

- “If you can’t afford the vet, don’t get the pet.”
- “You can’t care more than the client does.”
- “That’s below the standard of care!” (when what is meant is: “that isn’t the gold standard”)

Replacing these reflexive judgments with curiosity and compassion is a skill - one that can be learned, practiced, and modeled for your teams.

Access to Veterinary Care: Understanding the Landscape

Access to veterinary care (AVC) is a growing public health concern and a One Health issue. Data from Australia highlight that over 250,000 people live in areas without ready access to veterinary services, and that 1 in 4 pet owners have faced a barrier to care - with 80% identifying cost as the primary cause. Veterinary service costs have been rising faster than general inflation, and lifetime healthcare for a pet can reach tens of thousands of dollars.

Barriers to care include:

- Financial limitations
- Geographic location and access deserts
- Lack of personnel or equipment
- Client identity factors: language, culture, age, gender
- Client mental or physical health limitations

Understanding these barriers allows clinicians to approach each case with informed empathy rather than judgment. The AVCC (2018) has noted that “the lack of access to veterinary care is the greatest threat to the health and well-being of pets with loving families.”

Spectrum of Care & Contextualized Medicine

Spectrum of care - also called contextualized care or incremental care - is a patient-centered, problem-solving approach that seeks the best possible outcome for the animal and family within the context of their available resources. It is not a lesser form of medicine; it is medicine practiced with both clinical skill and human wisdom.

Gold Standard Thinking	Contextualized Care Thinking
Single “correct” protocol	Range of evidence-informed options
Failure framing when unachievable	Success defined by best available outcome
Client positioned as obstacle	Client as partner in shared decision-making
Clinician distress when standard unmet	Meaning and agency preserved for clinician
Tertiary-referral lens applied universally	Context-sensitive decision making

Incremental Care in Practice

Incremental care focuses on a step-by-step problem-solving approach where each decision is calibrated to the patient's needs and the family's circumstances. The goal is to achieve the best possible outcome for the family and the human-animal bond - not to approximate an idealized protocol.

Building confidence with decision-making in the face of uncertainty is a core competency for new graduates. Tertiary referral center training is invaluable, but it must be integrated with the skills of contextualized communication and creative problem-solving.

Moral Injury, Moral Distress & Moral Resilience

Moral injury is the emotional and psychological harm that arises when a practitioner knows the ethically appropriate action but feels powerless or constrained from taking it. It is distinct from burnout, though the two frequently co-occur and can fuel each other.

In veterinary medicine, top contributors to moral injury include:

- Financial euthanasia
- Futile care or dysthanasia
- Client preferences in conflict with clinical recommendations
- Concerns about patient quality of life
- Overwork and systemic burnout
- Fundamental economic and legal constraints of practice

Important Distinction

When the "gold standard" framing is applied rigidly, it doesn't just affect clients - it becomes a direct driver of moral injury for clinicians. Reframing toward contextualized care is, in part, a wellbeing intervention.

Signs of Moral Distress

Recognize these indicators in yourself and your colleagues:

- Persistent guilt, frustration, or shame after cases
- Feelings of powerlessness, betrayal, or being devalued
- Loss of meaning in work
- Emotional numbness or disconnection
- Diminished moral sensitivity (a sign of compassion fatigue)

Building Moral Resilience

Moral resilience is the ability and willingness to speak and take right action in the face of moral and ethical adversity. It is the antidote to the powerlessness of moral distress.

Strategies for cultivating moral resilience:

- Define and refine your personal moral compass and code of ethics
- Develop self-awareness and self-regulation (self-mastery)
- Embrace your circle of control and influence - focus energy where you have agency
- Cultivate realistic optimism and a growth mindset
- Seek connection with a compassionate, morally resilient community
- Find meaning even in difficult cases
- Identify mentors who model moral resilience in practice

Honoring the Human-Animal Bond & Cultural Humility

The human-animal bond is not merely a sentimental consideration - it is a One Health issue with real consequences for both animal welfare and human wellbeing. When clients face barriers to care, they are often experiencing significant emotional distress. How we engage with them in those moments matters enormously.

Culturally humble, compassionate communication requires:

- Recognizing that your own perspective, assumptions, and biases shape every clinical interaction
- Approaching clients with curiosity rather than judgment
- Honoring diverse relationships with animals across cultures, identities, and life circumstances
- Building trust through skillful, reflective listening

Clinical Empathy in Action

The goal of clinical empathy is to advocate non-judgmentally for the patient's needs while honoring the client's experience, increasing the likelihood of a more positive outcome for everyone involved.

Helpful open-ended questions to guide client conversations:

- "What are your goals for today's visit?"
- "What is your budget today?"
- "What concerns do you have about your pet's treatment?"
- "What other questions do you have?"

Pairing these questions with active and reflective listening creates an environment where clients feel seen and respected, and where creative, collaborative solutions become possible.

Ethical Decision-Making Framework

When facing morally complex cases, a structured debriefing approach can help you process the situation and make grounded decisions:

1. **Pause and check in** - What emotions, assumptions, and biases are present for you in this case?
2. **Clarify the core problem** - Where is the ethical tension?
3. **Review objective facts** - Animal, owner, and available resources.
4. **Explore options** - From best to least-worst. What are the available paths forward?
5. **Consult when possible** - Colleagues, mentors, or ethicists.
6. **Negotiate and collaborate** - Discuss options with the owner and work toward a mutually agreed "least-worst" path.
7. **Practice self-care and acceptance** - Release what is beyond your control.

Perfectionism & Imposter Phenomenon in Early-Career Practice

These two psychological patterns are especially active for new graduates and are deeply intertwined with how the "gold standard" framing affects wellbeing.

Perfectionism

Maladaptive perfectionism - driven by fear of failure and feelings of unworthiness - leads to anxiety, burnout, strained relationships, and reduced clinical flexibility. Adaptive perfectionism, by contrast, channels conscientiousness into growth and excellence without self-punishment. Strategies to shift toward adaptive perfectionism include mindfulness, self-compassionate self-talk, realistic goal-setting (see WOOP, below), and embracing "good enough" as a valid and ethical clinical outcome.

Imposter Phenomenon

Up to 68% of veterinarians experience imposter phenomenon. For new graduates, this is nearly universal. Recognizing the signs - attributing success to luck, overworking to prove worth, avoiding new opportunities - is the first step. Working with mentors, practicing positive affirmations, and building a community of peers who normalize struggle and growth are evidence-based strategies for shifting the inner narrative.

A Note from Dr. Katie Ford, "Imposter Buster" (UK)

"You are not an imposter! You are valuable, skilled, and worthy regardless of outcome."

Financial Support Resources for Clients

Being familiar with financial resources allows you to offer options rather than ultimatums - a key skill in spectrum-of-care practice:

- Pet insurance and wellness plans
- Instant credit options: CareCredit and similar programs
- Hospital-based "Angel Funds" and charity programs
- Community charity hospitals and subsidized care centers
- Crowdfunding (e.g., GoFundMe)
- Wildlife care through veterinary universities and government initiatives
- RSPCA hospitals (major city centers, GP and ER care): freevet.com.au
- PetSafetyNet / Animal Care Australia: animalcareaustralia.org.au

Additional Resources

Access to Veterinary Care Research

- **JCU Vet Access Blackspots (Australia, Jan 2026):** <https://www.jcu.edu.au/news/releases/2026/january/vet-access-blackspots-raise-animal-health-alarm>
- **Merck 4th Veterinary Wellbeing Study (2024):** <https://www.merck-animal-health.com/blog/2024/01/15/4th-veterinary-wellbeing-study/>
- **The Twenty Highest Priority Questions to Answer to Improve Access to Veterinary Care.** (2025). *Journal of Shelter Medicine and Community Animal Health*, 4(1). <https://doi.org/10.56771/jsmcah.v4.106>
- [From Academia to Action: The AlignCare Journey in Pet Health Equity \(2024\)](#)
- [Access to Veterinary Care—A National Family Crisis and Case for One Health - Advances in Small Animal Care \(2023\)](#)
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- Skipper, A., Gray, C., Serlin, R., O'Neill, D., Elwood, C. and Davidson, J. (2021), **'Gold standard care' is an unhelpful term.** *Veterinary Record*, 189: 331-331. <https://doi.org/10.1002/vetr.1113>
- AAVMC Spectrum of Care Initiative Collection: <https://www.aavmc.org/the-spectrum-of-care-initiative/>
- Benson, J and Tincher EM. (2023). **Cost of Care, Access to Care and Payment Options in Veterinary Practice.** *Vet Clin of Small Anim.* Available at <http://doi.org/10.1016/j.cvsm.2023.10.007>.
- Quain, A., Ward MP, Mullan S. (2021). **"What Would You Do? Types of Ethical Challenging Situations Depicted in Vignettes** Published in the *Veterinary Literature* from 1990 to 2020." *Vet Sci.* 2022, 9(1) 2. <https://doi.org/10.3390/vetsci9010002>.

Recommended Reading

- Clark, T.R. (2020). **The 4 Stages of Psychological Safety.** Berrett-Koehler Publishers.
- Olson, S.A. (Spring 2026). **Your Veterinary Wellness Journey: An Interactive Guide to Thriving with Growth, Resilience, and Purpose.** CRC Press.
- Holowaychuk, MK. (2022). **Improving help-seeking for mental health among veterinarians.** *Can Vet J*, 63(12).
- **Diversity, Equity, and Inclusion in Veterinary Medicine.** Ed, Kemba Marshall. Wiley, Hoboken, 2025

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You are not alone. Thriving is possible - together.



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