

## Building Bonds to Improve Patient Care

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If there is one thing we can all agree on it is that the ability to build strong relationships with clients and their pets is one of the most defining characteristics of a successful veterinary practice. It's not rocket science – we live and breathe the importance of this bond. We train our staff to master it, keep our eyes and ears open for new ways to enhance it, and recognize that a practice's greatest strength can be found in how well it becomes an integral third party in the relationship between owners and their pets.

Following this train of thought, could there potentially be additional benefit for a practice that chooses to emphasize building a bonding between individual veterinarians and clients? According to the 2011 Bayer Study, the answer is a resounding "yes," and the data from the study actually points to this one-to-one relationship between a practitioner and a client as a key driver of increased visits. The study found that practices that encourage clients to bring their pets to the same veterinarian for every visit are the same practices that experience increased compliance and acceptance of recommended treatment protocols. It appears that the apparent disconnect between what veterinarians think they are communicating and what pet owners are hearing is greatly minimized when it comes from a single voice. It is natural that pet owners who understand and trust in their veterinarian's recommendations, and believe that he/she always has their pet's best interests at heart, will be more likely to act in accordance with these recommendations (see *Tips for Encouraging a Client-Veterinarian Bond*).

As with anything, emphasizing individual relationships does have associated risks, especially when the success of a practice becomes overly dependent on individual bonding, which is never more apparent than when a well-liked doctor leaves to practice elsewhere, followed by half of the active client base. Many owners have experienced such an exodus in the past, and are understandably hesitant to promote a policy that would allow them to become that vulnerable again. The interests of the practice must always be primary, and a good way to ensure this is through a system in which there are at least two veterinarians with whom each client is familiar and comfortable. When facilitated by the primary doctor, this secondary relationship is usually well received and minimizes the likelihood that doctor-client bonding will result in negative repercussions for a practice at some time in the future. (see *Tips for Encouraging a Continuous Client-Practice Bond* below).

A somewhat more difficult risk to handle from a management standpoint is a situation in which the loyalty a specific doctor engenders among clients is both extreme and/or based on elements that actually fall outside the scope of best medicine. In worst case scenarios clients that have formed these relationships with a certain doctor often express overt distrust of other associates, team members, and even the practice entity itself. Jessie Merritt, practice administrator of Oswego Veterinary Hospital in Oregon, explains, "On one level it can be such a positive for the practice when clients bond with a specific doctor, but there must be consistent standards of care in place, and a culture where doctors, and the entire staff for that matter, always support one another and show solidarity. When clients sense or experience disagreement or contradiction amongst colleagues it can become toxic on so many levels, and in that situation the client may not only form a positive bond with one doctor, but harbor negative opinions regarding the others." Although rarely intended, these situations can lead to a debilitating rift not only among practice employees, but between a practice and a portion of its client base.

If a practice does not currently have written standards of care in place, then the first step is relatively simple – divide the work, develop consensus, and get them done! Often, though, the medical standards have already been developed, and it is more delicate issues, such as generational differences and the tenure of a veterinarian from which problems stem. In some cases, client loyalty is founded on recommendations that require less compliance than the hospital's standards, and it is not uncommon to hear stories of pets that did not receive necessary and/or timely care because their owner refused to make an appointment based solely on the fact that their veterinarian of choice was unavailable. While surely the doctor never intended for clients to react this way, when their clients are presented with more stringent standards or policies it can often escalate into a situation where the practice and other associates are forced to deal with unfounded accusations of over-charging or over-treating. This can be extremely frustrating and detrimental to the development of collegiality and collaboration amongst a team of doctors, both of which are the very foundation of a successful multi-doctor practice.

Often times a doctor truly believes in the practice's standards of care and even helped develop them, but the fear of angering and alienating clients makes it too difficult and uncomfortable to change recommendations or enforce new protocols. And while it's a great feeling to be the most popular, encouraging "exclusive" client loyalty often comes with a personal price tag that can include excessive client phone calls, lack of client respect for a doctor's personal time, and longer hours spent trying to keep everyone happy. In short, veterinarians that enable this type of client behavior, even if unintentionally, are their own worst enemy.

Sadly, a lack of communication and accountability are very often culprits in these types of situations. Far too often, these "favorite" doctors have never been educated on the financial ramifications of their actions, nor are they fully aware of the toll it is taking on their team. If no one has said anything to them, and clients are happy, what is the incentive for doing things differently? In best case scenarios, once communication is initiated and the ramifications of their actions are fully understood, these doctors will get on board. On the other hand, if left alone to continue practicing as a non-team player, it can take reaching the point of burnout to recognize the personal price they have paid for doing so, and only then is there a strong enough incentive to change.

For multi-doctor practices where the above risks have been assessed and managed, and the entire medical team is committed to documented standards of care, and agree to stand behind these protocols with *every patient every time*, individual client-veterinarian bonding is truly one of the best ways to increase patient visits and client compliance. Perhaps there are some uncomfortable internal discussions that need to take place to ensure this level of commitment from the entire team, but the value to the practice is well worth the minor discomfort. And what about the value to our patients? If forming individual veterinarian-client relationships leads to greater compliance with health care recommendations, then they are the ultimate winners. And at the end of the day, isn't that truly what it's all about?

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## SIDEBARS

### Tips for Encouraging a Client-Veterinarian Bond

- Each doctor should have their own practice business card with just their name (and email address) on it; these should be on their person whenever seeing appointments and offered to each client at the end of the exam with the suggestion that the client contact them with concerns or questions.

- Have the technician bring the client directly to the receptionist for check-out and communicate doctor preference. For example, “Jane, Ms. Jones and Buddy are ready to check out; they will need to schedule a recheck with Dr. Specific in 3 weeks.”
- Receptionists should be trained to make the assumption that a client would like their pet to see the same doctor as previously, unless the client indicates otherwise. When a receptionist takes a call for an appointment they should immediately identify the owner and pet, pull up the record on the computer, determine the last doctor seen, and easily respond, “Dr. Specific is available to see Buddy at 3pm on Tuesday or 1pm on Thursday, which of these times works best for you?” While the client may not have initially had a preference, this is an effective tool for encouraging client-doctor relationships.
- If you are aware that a client has a doctor preference, it’s a good idea to put some type of notification in the computer as a safeguard; that way the potential for a “situation” when the client arrives, and discovers that they aren’t scheduled with their preferred doctor, can be averted.

#### Tips for Encouraging a Continuous Client-Practice Bond

- The preferred doctor should always provide the name of a secondary doctor for times when they are unavailable (this should also be added to a computer alert) and whenever possible should facilitate this relationship via a face-to-face introduction.
- “Train receptionists to use the word ‘and’ instead of ‘but’ when a client calls and their primary vet is unavailable,” says practice consultant Shelley Johnson, CVPM. “Saying something like, ‘*but* Dr. B is available’ has negative connotation and sounds like giving permission not to bring in their pet. Simply changing the approach by saying ‘*and* Dr. B is available at 2pm or 5pm,’ greatly increases scheduling success.”
- With chronically ill pets, the primary veterinarian should contact the owner not only to let them know that they will be gone for a period of time, but to let them know that their pet’s case has been discussed in detail with another doctor(s). This outreach goes a long way to easing a client’s mind, initiating trust in the secondary doctor’s recommendations, and fostering a culture that values collaboration amongst doctors.