

A Lesson in Veterinary Communication: Veterinary Professionals Learn How Enhanced Client Interactions Improve Medical Outcomes, Staff Retention

By tapping educational resources once limited to students, veterinary professionals are reaping the rewards of the latest in veterinary communications with hands-on training and consulting services from university professors. These are not the rank and file veterinary clinics, say communications professionals in Colorado who offered a pilot program in 2006-07 and may soon offer the program to other clinics. Veterinarians who are interested in this intensive training recognize the importance of good communication and know that while their investment may not show immediate, bottom-line results, it will pay off through improved patient care and staff retention.

Earlier this month a Colorado-based veterinary hospital completed a pilot program that tests academic theories in private practices. Positive results from a year-long consultation between Firehouse Animal Health Centers and the Argus Institute at Colorado State University may prompt a regional rollout of the communications consultation program. It also marks an expansion of services offered by the Argus Institute, which previously focused on end-of-life communication for veterinary students and pet owners.

The Firehouse Project, which was funded by the hospital, Hill's Pet Nutrition, Pfizer Animal Health, and CSU, marks the first time that Argus has worked intensively onsite with a veterinary clinic on veterinarian-client-patient communication, said Jane Shaw, DVM, PhD, director of the Argus Institute.

Shaw, who has published much of her extensive research into the field of veterinary communication, was able to implement communication theories within a clinical setting. "It's so rewarding to work with a practice so in-depth and to see [effects of the] program over time," Shaw said. "It's some of the most fulfilling teaching you can do."

With five veterinary clinics and an aggressive expansion plan in place, Firehouse owners wanted to surpass industry benchmarks of patient and client care, which is why they sought out industry experts, said Jed Rogers, DVM, co-owner. Referring to Shaw and partner Gwyn Barley, PhD, director of the University of Colorado School of Medicine, Rogers said they "understood our issues better than any veterinarians we had talked to. I knew right away that this would help us out tremendously."

Although owners value high-quality service and teamwork, Rogers quickly realized that they had merely scratched the surface and that implementation of Shaw's suggestions would yield results.

During the program, Firehouse technicians learned new intake procedures using open-ended client questions that facilitate information sharing and honed their ability to convey data before doctors entered the exam room. Technicians, who spend about 10 minutes with clients during 30 minute exams, previously thought that clients saw them as middlemen instead of valued team members. By emphasizing the value of effective information gathering that perception changed, Shaw said. "It takes a team to serve a client," she added.

From technician to doctor, the switch to open-ended questions like, "Tell me what you observed" is scary, Rogers said. "You think, 'oh my God, I'm going to be stuck in

the room for 50 minutes with this client,' but [if you use this technique] you actually spend less time with the client.”

More importantly, Rogers said, you obtain more information, which expedites diagnosis. “You get a more complete list [of symptoms] from the get-go by letting the CVTs [certified veterinary technicians] and clients do that work, which for us as doctors is hard to let go of,” he added.

Research conducted by Shaw shows that open-ended questions encourage honest dialogue with clients and better information sharing whereas closed-ended questions solicit short, limited replies.

“From research done in the human medical field, we know that it is therapeutic to tell a story and have someone listen to you,” Shaw said. As a result, she suggests that veterinary professionals ask, “What would you like to accomplish today?” when clients arrive for their appointments, or if there is a specific problem, focus on a general, open-ended question about the ailment. For example, “How has the dog’s behavior changed?” or “What did you see?” instead of “What color was the vomit?”

Shaw compares using closed-ended questions to throwing a dart at a board. You will get an answer to the targeted question, which may or may not pertain to the diagnosis. On the other hand, throwing a wider net with your question may result in several pieces of information that could clinch the diagnosis. In essence, the approach alleviates pressure from doctors. “It’s a lot of work on the veterinarian’s part to ask the right questions,” Shaw said.

Shaw and Barley, who coach medical students on client interactions, have been approached by other clinics about the new consultation package, which is similar to the communication curriculum offered to third-year students. The pilot project included about 100 hours of onsite training with the practice team, Shaw said. Every staff member was involved in the consultation process, which ranges in scope and in price from \$200 an hour to \$60,000 for a six-month contract. The year-long program is available to other veterinary clinics that meet specific criteria, including geography (proximity to CSU), university resources, and use of a customer intimacy model designed by Michael Treacy and Fred Wiersema. The management method shows that successful client relationships are based on a partnership, the ability to work together to reach a common goal, Shaw explained.