

SPECIAL EDITION

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IMPROVING THE PET OWNER EXPERIENCE IN YOUR PRACTICE

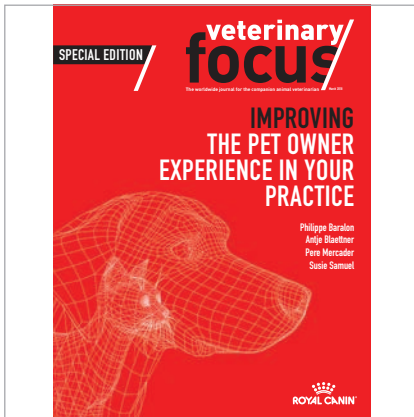
**Philippe Baralon
Antje Blaettner
Pere Mercader
Susie Samuel**




ROYAL CANIN®

**IMPROVING
THE PET OWNER
EXPERIENCE
IN YOUR PRACTICE**

IMPROVING THE PET OWNER EXPERIENCE IN YOUR PRACTICE



“THE MOST COMMON “COMPLAINTS” FROM CUSTOMERS ABOUT PHONE SERVICE USUALLY FOCUS AROUND PERCEIVED UNFRIENDLINESS.”



“A quick client file review before the appointment is highly advisable.”



“The vet should always explain diagnosis and treatment carefully and, whenever possible, use a visual aid to demonstrate a point.”



“The most serious inconsistencies are those that affect the messages of different team members to the same client.”

OFFERING A GOOD PET OWNER EXPERIENCE IS THE BEST WAY TO MAKE THEM COME BACK!

“The vet must rethink the pet owner experience in their practice”

The art of judo is to use the strength of the enemy against him. In this respect, this Focus special edition is a lesson in martial art.

Indeed today, for many veterinarians in Europe, the Internet is perceived as “THE” enemy, not only because it challenges the position of the vet (the famous “Dr. Google”), but also because it represents competition, offering drugs and diets at a lower price than the veterinary practice.

This phenomenon is not limited to the vet world and has produced a new concept of shopping. You realize this when you enter an Apple store or an Abercrombie & Fitch shop. In a similar way, the vet must rethink the experience of the pet owner in his practice.



This Focus special has no miraculous solution but it considers the practice as a new and different step in the “pet owner journey”.

After learning more about the “ZMOT” (“zero moment of truth”), you’ll discover easy solutions to implement before, during and after the visit of the pet owner to your practice. Written by 4 state-of-the-art consultants in practice management, this Focus special edition will also offer reflexion on delivering a more effective strategy to face the challenge of the 21st century.

Enjoy!

Philippe Marniquet,
DVM, Dipl. ESSEC
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THE AUTHORS

Written by 4 state-of-the-art consultants in practice management, this *Focus* special edition will also open the reflexion for a more effective strategy to face the challenge of the 21st century.



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Philippe Baralon

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Philippe Baralon graduated as a veterinary surgeon from the École Nationale Vétérinaire of Toulouse, France, in 1984. He has also studied Economics (Master of Economics, Toulouse, 1985) and Business Administration (MBA, HEC-Paris1990). He founded his own consulting group, Phylum, in 1990 and remains one of its partners to this day.

Philippe Baralon firstly acts as a veterinary practice management consultant in the areas of companion animals, equine practice and animal production in 26 countries (France, European Union and overseas). His main areas of specialisation are strategy, marketing and finance. He is also involved in training vets and support staff in the field of practice management (lectures and workshops). Finally, benchmarking the economics of veterinary medicine in different parts of the world is also one of his working areas.

Philippe Baralon has authored more than 50 articles on veterinary practice.



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Antje Blättner

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Antje Blättner grew up in South Africa and Germany, graduated in 1988 after studying Veterinary Medicine in Berlin and Munich, and then engaged in her own small animal practice.

In 2001, she took part in a post-graduation course on training and coaching at the University of Linz, Austria, and founded "Vetkom" — a company dedicated to educating vets and vet nurses on practice management through lectures, seminars and in-house training. Antje Blättner is the editor of "team.konkret", a professional journal for veterinary nurses and "Veterinär Spiegel", a professional journal for Vets.

Nowadays, she lectures and trains vets and vet nurses on client communication, marketing and other management-related topics in Germany and — together with Royal Canin — in over 21 countries worldwide.



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Pere Mercader

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Pere Mercader established himself as a practice management consultant to veterinary clinics in 2001, a role which he has been developing ever since in Spain, Portugal and some Latin-American countries. His main professional accomplishments include authoring profitability and pricing research studies involving Spanish veterinary clinics, lecturing on practice management in more than 30 countries in Europe, Asia, Africa and America, and authoring the textbook "Management Solutions for Veterinary Practices" published in Spanish, English and Chinese, and sold in more than 10 different countries.

In 2008, he co-founded VMS (Veterinary Management Studies), a business intelligence firm that provides a benchmarking service for more than 800 veterinary practices in Spain, calculating a wide range of business indicators.

Pere Mercader was a co-founder of the Spanish Veterinary Practice Management Association (AGESVET) and served its board during eight years.



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Susie Samuel

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Susie graduated from Cambridge University in 2001 and spent 10 years working in a variety of practices including mixed and small animals. In 2006, she set up the website VetHelpDirect.com to help owners work out how quickly they needed to seek veterinary attention for their animals.

The business quickly evolved becoming a Veterinary Specialist Internet Marketing Agency; in 2013 Susie left practice to work full time as the MD of VetHelpDirect. In 2014, she graduated from the Google Certificate in Internet Marketing and in 2015 VetHelpDirect won the Veterinary Marketing Award for Practice Marketing with Inglis Vets.

She now works as MD of VetHelpDirect as well as lecturing and training veterinary staff in Internet marketing.

THE IMPORTANCE OF THE PET OWNER EXPERIENCE

Vet practitioners are often not aware of their environment. They never stay in the waiting room of their practice for long. They sometimes even enter the practice through a different door than the one used by their clients. A bad pet owner experience is a matter of small detail but it is proven that it has a huge impact on the efficacy of the clinic. This chapter will also explain the concept of Net Promoter Score which is very useful to assess your clients' satisfaction. Research based on the Net Promoter Score methodology shows how positive client experience results in higher revenue and improved profitability.

KEY POINTS



●○○ Self-assessment: find the 15 errors

Below is the story of a client that could have happened in your practice. Read it carefully and identify the "errors" made by the practice.

“ On Thursday, shortly after 19:30, Marianne could hear Vicky meowing softly in her box in her car on her way back home.

It had all started on Tuesday evening. Marianne was surprised that her young kitty was not trying to get her attention and her usual routine of strokes on coming home around 19:00; Vicky stayed in her

corner. Preoccupied with finishing an assignment, Marianne was not worried right away, as Vicky could be rather independent. On Wednesday morning, Vicky had hardly touched her kibbles and Marianne decided to call the vet to set up an appointment with Dr. Samson.

After 6 or 7 rings, Marianne finally got somebody answering the phone and Marianne was able to explain what was going on with her pet and to request an appointment for that evening, preferably after 18:00. She would leave work earlier, avoid rush hour, get home in about 45 minutes, pick up Vicky and, in about fifteen minutes, would have arrived at the clinic. The first person she

spoke to explained that Dr. Samson was not in on Wednesday and that the late afternoon consults were completely booked. Why not come the next day, Thursday, a spot being available at 17:00 (but not with Dr. Samson). Marianne insisted on having an appointment the same day, or on Thursday but later in the late afternoon, but this was impossible, she eventually accepted the appointment Thursday at 17:00. On Wednesday night, Vicky's condition had not really deteriorated, but she still had hardly eaten and remained in her corner. At least, Marianne had had time to arrange a half a day off on Thursday afternoon to drive her cat to the vet.

Arriving in front of the clinic on Thursday at 16:45, Marianne was surprised to see that the car park was full. She had had to find a parking spot on a neighbouring street, which is never easy in that neighbourhood. After five minutes of unsuccessful searching, she decided to park in a public car park 700 metres away. After coming up from the second underground level and walking quickly to the clinic, she arrived at 17:10. Welcomed by a smiling and caring person, she was directed to the waiting area. There were only two free chairs, and Marianne chose the one farther from the big dog that was a little too interested in the box in which Vicky was curled up.

Around 17:35, Marianne started trying to get the attention of the receptionist. First she was busy responding to the telephone — obviously someone was asking for a very detailed update of a hospitalised dog — before welcoming another person and finally settling the bill for a client

coming out of one of the consultation rooms. Around 17:45, the receptionist met Marianne's questioning look and waved to her that it would not be long. It was around 18:10 pm that Marianne was invited to go to the consultation room number 3 where a young vet whom she did not know tersely welcomed her.

After a few minutes of reviewing the case history, the young vet began to examine Vicky, while asking some questions. She strongly suggested "for next time", not to wait to bring Vicky to the clinic, "because two days lost before receiving proper treatment can make a difference". Marianne tried to explain the difficulty in making an appointment and all she had had to do to be able to come that evening, but the vet had already dived back into the examination and the client judged it would be better not to bother her any further. The young vet explained that she suspected a urinary tract infection and that she proposed to take Vicky to the treatment room for a few moments to carry out a "cystocentesis" in order to carry out a urinalysis and a blood test for a "6-point, biochemical profiling". Marianne agreed although she did not know what "cystocentesis" and "6-point, biochemical profiling" covered exactly.

After another 15 minutes in the waiting room, the client was invited back to the consultation room



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After 6 or 7 rings, Marianne finally got somebody answering the phone.

The waiting room was nearly full. Marianne chose one chair farther from the big dog.



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Marianne was astonished to have to pay such a big amount of money.

where she found Vicky. The cheery young vet explained that the urine analysis had confirmed the diagnosis of urinary tract infection and that she had immediately given the cat an antibiotic injection, adding that “things should go back to normal within two to four days” and that in the meantime “it was important that Vicky drink a lot”. She advised that the receptionist would take care of giving her the necessary treatment and Marianne realised that it was time to take her leave. After saying “goodbye” to the vet who already welcomed a client and her German shepherd, it was around 18:55 that Marianne headed back to the reception. As soon as she had hung up, the receptionist, still charming, explained the treatment to be given to Vicky: one tablet morning and evening for 7 days.

“Tablets?” Marianne replied, “but I have so much difficulty getting Vicky to swallow it. It’s a fight every time.” The receptionist explained that it was a pity that she did not report this point to the vet who could have opted for long-acting injectable treatment and avoided the use of tablets. She continued, “You know, it’s not so hard to give tablets to a cat and with a little patience, you always get there.” In conclusion, she gave the client an illustrated sheet with various drawing showing how to administer a tablet to an animal (in this case, a Poodle).

Then she announced the price to be paid: €177. Frankly surprised, Marianne expressed her dismay over the gap between the price of the consultation, €42, and the total amount of €177. Calmly, and still smiling, the receptionist explained

the breakdown of the costs. “The consultation at €42, the cystocentesis at €20, the urinalysis at €23, the blood sampling at €11 and the s6-point biochemical profiling at €38, one antibiotic injection for €13 and 14 tablets at €30 come to a total of €177.” Essentially, the bill was right.

While handing over her credit card, Marianne asked the receptionist about the blood biochemistry test at €38 (excluding the blood sampling): “I understood the reason for the urine analysis, since that is what confirmed the diagnosis, but for biochemistry test, I did not hear about any results...” Without dropping her smile, the receptionist reassured her, “If the vet didn’t mention the results to you, then it probably means that everything is normal and compatible with a urinary tract infection. Any other questions?” At this point, Marianne thought it would be better not to pose any more questions, settled her account, grabbed the cat carrier housing Vicky and the packet containing the pills and the prescription, before heading out to the parking lot to fetch her car around 19:25.

What do you think of Marianne’s experience? Vicky probably benefited from an exact and well-founded diagnosis and subsequently received adapted and effective care. Medically, everything went well and that is obviously the point of it all. But is Marianne satisfied? Is she going to recommend the clinic to a friend or neighbour? This is not likely, because a large number of errors and shortcomings prevented an optimal experience for this client. Did you spot them all? Would they have happened at your clinic?

THE 15 ERRORS THAT DAMAGED MARIANNE’S EXPERIENCE

- Marianne has to wait for 6 or 7 rings before somebody answers the phone.
- The clinic is not very flexible to arrange an appointment at a convenient time slot.
- The car park is too small or, maybe, busy with cars from staff members.
- There is no area specifically designated for cat owners in the waiting room.
- Marianne has to wait for 35 minutes without any explanation about the reason of this delay.
- Marianne finally enters the consultation room one hour after her arrival in the clinic, that is to say exactly at the time when she initially wanted to have an appointment.
- The vet takes a history and conducts Vicky’s physical exam at the same time, probably to save time, but as a result, she is not fully concentrating on Marianne’s answers.
- The vet explains to Marianne she brought Vicky in too late after the onset of the condition despite the clinic was not able to offer an appointment the day before.
- The vet does not explain what a cystocentesis, or a “6-points biochemical profiling” is.
- The end of the consultation is very quick, Marianne is not asked by the vet if she has any questions, the next client and his pet are already entering the examination room.
- The vet didn’t discuss with Marianne the issue of giving tablets twice a day to Vicky, although it might be difficult to administer them considering Vicky is a cat.
- It’s a good idea to provide the pet owner with a leaflet explaining how to give tablets to a pet, but it would be more efficient to have a leaflet dedicated to cats.
- The receptionist announces the total price without any explanation about the different billed items.
- When Marianne requests an explanation about the bill, the receptionist gives comprehensive information, but only verbally and does not provide her client with a printed detailed bill.
- The vet didn’t provide Marianne with any written results or even oral comments concerning the blood biochemistry, so she does not know the results and the contribution to the diagnosis when she has to pay €49 for the blood sampling and test.

●●○ Economic impact

A) Study on patient churn

Figures for client churn rates in veterinary clinics are devastating. In a study performed by VMS (Veterinary Management Studies) in Spain, they analysed the transactions carried out by over 515,090 patients from 485 veterinary clinics of different types and geographic locations over five years (2012 to 2016).

1/ Methodology

For each of these patients, 5 possible “statuses” were defined according to their economic relationship with the clinic each year:

- **New active patient:** when an economic transaction took place with the patient for the first time that year.
- **Recurrent active patient:** when an economic transaction took place with the patient during that year and when, during the immediately preceding year, economic transactions had already taken place with the patient.
- **Recovered active patient:** when an economic transaction took place with the patient during that year and when, during the immediately preceding year, no economic transactions took place with the patient, but transactions had taken place with the same patient in previous years.
- **Lost patient:** patient who, in the current year, did not make economic transactions with the clinic, but who had made at least one transaction with the clinic in the previous year.
- **Active deceased patient:** patient who, either in the previous year or in the current year has made a economic transaction with the clinic but dies during the current year.

2/ Result n°1: Practices lose 50% of their patients every year.

The surprising results of these large data set analysis are summarised in **Table 1**.

TABLE 1

Patient flow analysis.

	2013	2014	2015	2016
New patients	50.5%	47.2%	47.7%	45.1%
Recovered patients	6.8%	7.6%	8.5%	8.6%
Lost patients	50.0%	49.9%	49.4%	50.5%
Deceased patients	7.6%	7.3%	6.8%	6.4%
Net flow	-0.3%	-2.5%	0.0%	-3.3%

It should be noted that what we define as a “lost patient” does not necessarily mean a “defection”. In fact, experience tells us that many of these patients have not gone to other veterinary centres, but are merely in a sort of latency period (John Sheridan, an expert practice management consultant, refers to them as “lapsed patients”): they are peacefully at home without their owners perceiving the need to attend their clinic until something happens to justify a visit. Several of these patients end up returning to the clinic after two or three years, but others do not...

Many veterinary centre owners express their disbelief and even anger seeing these figures, but the experience of specialist consultants and a few rigorous quantitative analyses that have been carried out on this issue reveal that, each year, there are a substantial number of patients that do not return to the clinic on a regular basis.

3/ Result n°2: lost patients vary from 35 to 75%

In this same VMS (Veterinary Management Studies) study, the percentage of patient defection was measured at an individual clinic level in 2015 for the 485 veterinary centres analysed. The aim was to measure whether the issue of defection was similar in all clinics or whether there were very notable

66%

of the cat owners
would take their cat
to the vet more often
if it was easier.

(US survey)





differences that could have a significant financial impact. **Table 2** summarised the results obtained:

- The difference between the clinics that better retained their patients and those that did not (quartile 1 vs. quartile 3 of the distribution of patient defection data) revealed a difference of 40 percentage points (35,5 vs. 75,5% loss of patients).
- If we take, for example, a centre with 2,000 active patients and €500,000 annual turnover (€250 per patient per year), this difference between “doing it right (best 25% of clinics) or doing it wrong (worse 25% of clinics)” translates into an incremental loss of 800 patients and a negative impact on annual income of €200,000.
- For a centre of this size, an impact on income of this kind can mean the difference between being profitable or not, or between having a precarious versus a healthy profitability.

“The business model for most veterinary clinics is based on generating a bond with the client.”

TABLE 2

Patient defection analysis.

% patients lost per year	
Best 25% clinics	35,5%
Median	47,5%
Worse 25% clinics	75,5%
For a 2000-pet clinic	
Spending per year	250
Cost of low quality (in additional lost patients)	800
Cost in euros per year	200.000

B) Net Promoter Score (NPS)

Empirical evidence shows that client satisfaction translates into higher retention and growth rates. In the last 15 years, the NPS (Net Promoter Score) has become a standard for measuring client satisfaction for many companies in various industries. Developed by Professor Frederick F. Reichheld of Harvard Business School, this methodology is based on a single question to a company’s clients: “How likely is it that you would recommend our company (clinic) to a friend?”

The answers are then grouped on a scale from 0 (unlikely) to 10 (definitely) according to the following scheme:

- Answers with scores from 0 to 6 are considered “detractors” of the company.
- Answers with scores from 7-8 are considered neutral.
- Answers with scores from 9-10 are considered promoters of the company.
- The NPS involves calculating the percentage of promoters minus that of detractors and monitoring it over time.

It is important to be aware that there may be cultural differences among countries which may affect the usability of the 0-10 scale.

Professor Reichheld showed, in various studies, that there was a positive correlation between companies that obtained better NPS metrics and those that obtained better sustained income growth over time. This correlation was


demonstrated in industries such as airlines, Internet service providers and car hire rental companies.


It is critical to invest in improving the overall experience at the veterinary clinic: good medicine is not enough. Except in special cases, such as in referral centres, the business model for most veterinary clinics is based on generating a bond with the client, which translates into regular visits to the centre. Good medicine is necessary, but an insufficient measure of performance. Our clients want to find us easily, park securely, not wait long, be in a pleasant environment, contact us easily by telephone when they need to, feel recognised and respected, know how much and why our services will cost the amount they are quoted... in short, they want a full client experience that confirms to them that they made the right decision to choose us. Regrettably, many veterinary centre owners have a different set of priorities when it comes to setting their clinic’s medical standards or when it comes to considering these other issues that they sometimes consider to be “non-priority or more commercial in nature”.


●●● Emotional impact

A) Internet reviews


We will now look at three real-life comments extracted from online reviews by clients who were unhappy with their veterinary clinic (All the comments below are genuine. Only the pet owners' names were changed).


 **Mr Jason Burn:** *Very poor now. Money is only concern it seems. Never see same vet twice and no time given for information. Even requests for medication repeats and advice is not done correctly. Not confident anymore they have time to deal with my animal.*


 **Mrs Julie O'Smith:** *Absolutely disgraceful display of 'client service' at XXXX this morning, which saw my cat left in his basket for over an hour, an impromptu Kangaroo court called in a consulting room, during which it was strongly inferred that I was a liar and where an insincere apology was offered as a last resort. All this from a comment in which I suggested it might be courteous to communicate to your clients if you are running 40 minutes late and why so that they are prepared and accepting, rather than endlessly walk past them discussing staff birthdays and cups of tea. Oh, and supposedly on their clock I was 5 minutes late and therefore didn't deserve to be communicated with. So dreadful, it's almost surreal. One-star rating, only because it is not possible to leave a zero-star rating.*

 **Mr Bernard Shaw:** *I am very disappointed with the total lack of care for my pet, and a total lack of respect for my pet and myself.*

Now, we will look at three examples of clients who were very satisfied and their comments on the Internet.

 **Mr Oliver Smith:** *I have always received the highest standard of service and genuine, caring attention over the past 18 years. The reception staff, nurses and vets couldn't have been nicer to myself and more importantly to my cats. The separated waiting area for dogs and cats is excellent making the visit much less stressful all round... I have nothing but praise for this practice.*

 **Ms Anne Durrell:** *Andy has looked after our two cats for over ten years. His staff are always friendly and helpful. You only ever see Andy or Lizzie — so you do get continuity of care. We took both cats in for their annual inoculations and Andy thoroughly examined both cats. Rosie was found to have lost weight and a blood sample taken. Andy has diagnosed a thyroid problem. This problem was only detected by his professionalism. I wouldn't go anywhere else.*

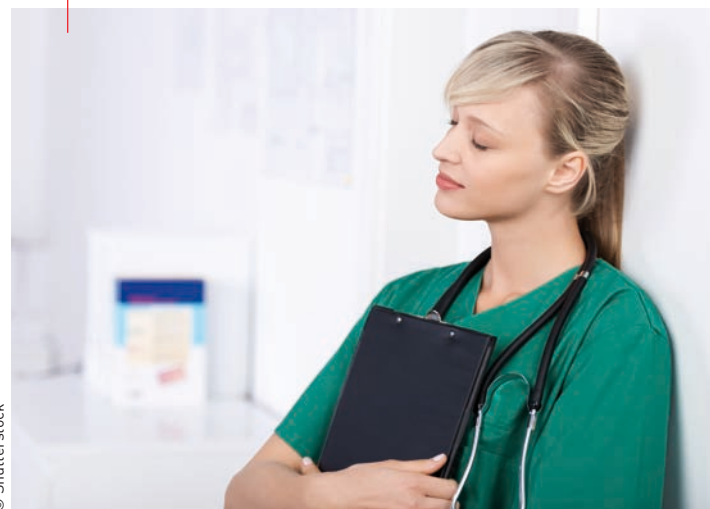
 **Mr Bertram Shakespeare:** *I love this practice for my cats. They always make me feel welcome and put the cats first. I would never use another practice.*

Most vets are aware of the growing impact that these opinions on social networks have on the reputation of their business. There are an increasing number of clients who, before choosing a veterinary centre, browse the Internet and check other pet owners' comments.

B) How client experience impact the staff

However, these opinions also have a significant — and usually less understood — influence on another type of client, the so-called internal client: our own team. The vast majority of our team (both veterinarians and support staff) have a significant vocational component in their work and are emotionally involved in their professional activity. They like to feel that they are doing a good job, that they bring value to their patients and clients and that they work in a veterinary centre that is positively recognised in society. Due to all of this, it is easy to understand that our team is neither immune nor unaffected by permanent public judgement on social networks, etc.

The veterinary team are often emotionally involved in their work. They can be affected by public judgement on social networks.



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Throughout his or her career, a veterinarian may have over 50,000 personal interactions with clients. Various studies carried out with veterinarians show that conflicts with clients (due to money issues, communication issues, difference of opinion with respect to treatments, etc.) are the main source of stress and job dissatisfaction.

If we take a closer look at the client complaints shown at the beginning of this section, we can surely agree that neither the vets nor support staff at those clinics had any intention of disrespecting or misleading their clients or patients, but, for some reason, that was their clients' perception. In a professional service activity such as a veterinary

medicine (heavily based on personal interaction between the client and the professional), it is essential to define quality standards for various processes, in order to achieve the most uniform and satisfactory client experience possible.

Some authors (McKinsey *et al*, 2017) propose that the best strategy to achieve a good external client experience is to ensure that internal clients (our employees) also have a good experience in their daily business. Well-designed processes, functional, pleasant and well-sized facilities, technology designed to support the business processes (and not vice versa), collaborative environment that encourages learning, etc. All these factors would undoubtedly help to make our clinic a good place to work in and would consequently help our teams to transmit these good vibes to our clients. As the saying goes, "Charity begins at home"; the same applies to client service.



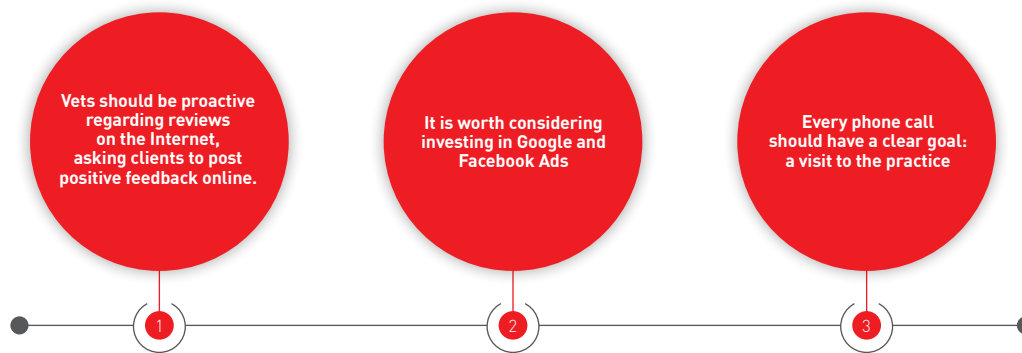
CONCLUSION

Offering pet owners the best experience in your practice will have positive effects. It will induce positive word of mouth recommendations about your practice. It will motivate your team thanks to the enthusiastic feedback from the clients. Finally, it will ensure the economic future of your practice.

HOW TO ATTRACT CLIENTS TO YOUR CLINIC

Internet has changed the “pet owner journey”: before telephoning a vet to ask questions or actually taking an appointment, the client will search the Internet (sometimes just to find a telephone number) and will have first information about your practice through it. Will there be reviews about your practice? Can one easily find practical information on your website? What is the look and feel of your Facebook page? Unlike some years ago, pet owner will start forming an opinion about you long before contacting your staff. This chapter will give you the basics on how to improve your digital presence as well as your telephone skills.

KEY POINTS



●○○ Zero moment of truth

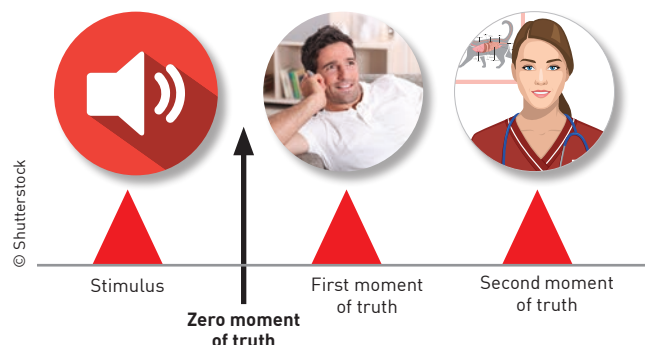
How do pet owners choose a vet? In 2011, Google came up with the term “Zero Moment of Truth [ZMOT]” following research it undertook with Shopper Science to discover more about peoples’ shopping habits (Jim Lecinski, 2011). The traditional marketing model prior to this was a model of a Stimulus, when the shopper saw an advert for a product, the First Moment of Truth when the shopper saw the product on the shelf and decided to purchase it, and the Second Moment of Truth when the product was used and the shopper experienced it. If marketers could get those three stages right

then they would be able to sell their products. The research from Google showed that there is now an extra stage in this model that Google terms “The Zero Moments of Truth” or ZMOT. The ZMOT is when shoppers go online to compare products, look at reviews, watch videos and read blogs; the research showed that this is now a highly relevant and important stage in client decision-making. **Figure 1** shows the illustration of this model in the context of an owner looking for a vet.

Research from VetHelpDirect and Onswitch in 2015 (**Figure 2**) was undertaken to establish if the ZMOT existed for pet owners looking for a vet in

FIGURE 1

The ZMOT model applied to the context of an owner looking for a vet.



the UK, and if it did exactly what online activities it incorporated: 309 pet owners were asked “If you had to choose a vet now which of the following would you do?” They were given the following options: Google, look at online reviews, view the practice website, visit the Facebook page, look at practice leaflets, walk into the vet practice, ring the vet practice up, ask friends and ask Local Pet Experts. The most popular response was “Ask Friends” reflecting the continued importance of word-of-mouth recommendations as a source of referrals of new clients. The next two most popular actions were online, including look at online reviews and visit the practice website. Ask local pet experts came next followed by googling the practice. Walking into the vet practice, telephoning the practice and looking at practice leaflets all ranked below the online activities in importance. This survey provides clear evidence that an online Zero Moment of Truth plays an important role when pet owners are choosing a vet (Figure 3).

The VetHelpDirect, Onswitch survey showed that looking at online reviews was the most commonly undertaken online activity; 49.7% of owners surveyed said that they would look at online reviews prior to choosing a vet. This importance of online reviews is backed up by statistics from Ofcom in the UK who tell us that three-quarters of Internet users (78%) read reviews. Reviews can have a positive impact on business, research from Revoov shows us that reviews typically generate an 18% increase in sales (Revoov, 2012). This research highlights the importance of reviews for veterinary practices and the potential positive effects. It is interesting to note that reviews seem to be more important to pet owners looking for a new vet than either the practice website, Facebook page or leaflets. In the author’s experience veterinary practices tend not to invest time or budget in creating and maintaining current and comprehensive set of online reviews, this is in contrast to the investments made in the website, Facebook page and practice leaflets.

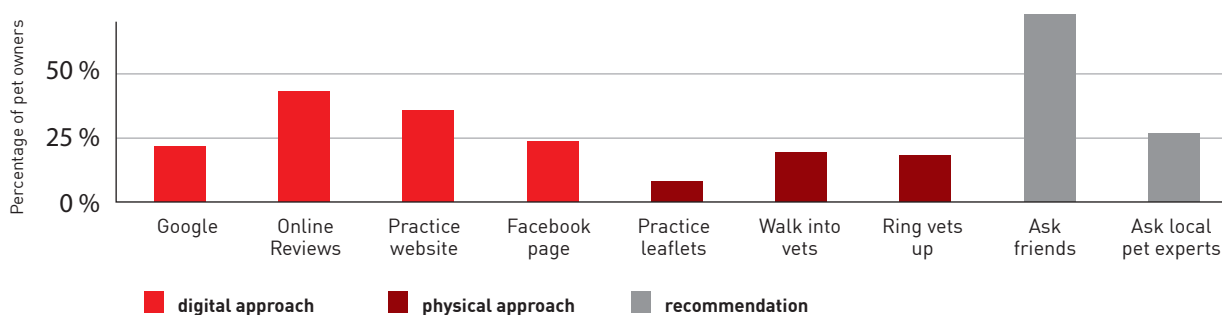
Pet owners access online reviews by googling “[Practice name] review” by searching for a vet in the area, or on the practice website if an appropriate widget is used to display the reviews. By displaying reviews on practice website, veterinary practices can benefit from a larger audience of potential new clients seeing the reviews.

Reviews have also been shown to assist with Search Engine Optimisation (SEO), that is the position of the practice website in the Google search results (Moz, 2017), Moz found that review quantity, velocity and diversity are all factors that govern the position of local businesses in the Google search pack.

It is essential for veterinary practices to be proactive about building up reviews, if practices do nothing they risk a negative and unfair reflection of the veterinary practice reputation appearing online. Unless veterinary practices regularly ask clients

FIGURE 2

Results of the research done by VetHelpDirect and Onswitch in 2015: “If you had to choose a vet now which of the following would you do?”



to leave a review only the very passionate owners will think of doing so. Some of these owners will be passionately positive, perhaps the vet has gone above and beyond what was necessary to look after their pet, but unfortunately the passionately unhappy clients tend to be overrepresented. Angry clients are more likely than those that have had a good, ordinary experience to go to the trouble of finding a review platform to leave a review.

Ofcom tell us that whilst over three quarters of UK Internet users read reviews only four in ten have ever written one (Ofcom, 2016), getting these clients that have had ordinary, happy experiences to leave a review can be a challenge. Sending out regular emails inviting all clients that have been seen

that week or month to leave a review is one of the most effective ways of getting clients to review the practice, training the whole practice team to ask people to leave a review can help, as can having a tablet in reception that allows people to leave an online review whilst they wait. This is also a great opportunity to collect feedback on the client experience in the practice. The client experience, rather than the clinical excellence of the vets tends to determine how good clients will deem the practice to be, so improving this is an essential part of building up a good set of online reviews. Once a practice has a good set of reviews that is regularly updated, negative reviews become far less damaging, viewers can see that these are not the norm and can readily put them into context.

●●○ Website and social media

The VetHelpDirect Onswitch survey of pet owners showed that, after reading word-of-mouth recommendations and online reviews, looking at the practice website and Facebook page were the next most important activities that pet owners would undertake if they were looking for a new vet.

The practice website can provide a “brochure-type” experience, comprehensively covering full details of the practice as well as providing an educational resource for clients or potential new clients. The Facebook page is more informal and allows the practice to profile the warm, caring relationship that they have with their clients, it is also possible to reach out and build relationships with local owners that are not clients.

A) Website

The practice website has several functions; it must entice potential new clients to choose the practice, contain information about the practice, e.g., staff, facilities, provide a relevant and useful educational resource and become a hub making it easy to access the various social media platforms the practice uses. The website may also contain functionality for clients to book appointments, order food, repeat prescriptions etc. Research shows that 55% of website users spend less than 15 seconds on a website before leaving if they consider it is unsuitable for them (Tony Haile, 2014). The challenge for vet practices is to convey the essence of the practice in that very short period of time. Photography, video and excellent copywriting is the key to succeeding with this.

Before building a website it is worth considering the aims, for example do you want potential new clients to call you, or book an appointment online? Once this is established, the website can be set up

FIGURE 3

Google your practice name and check the rating, location, and reviews. Try to improve the content of the Google summary to make it more appealing to your clients.

The screenshot shows a Google search result for 'The Loch Clinic - Inverness'. At the top, there are three images: a stylized 'ANIMAL HOSPITAL' logo, a street view of the clinic building, and the Google Maps logo. Below the images, the text reads 'The Loch Clinic - Inverness' with a 4.8 star rating and 16 Google reviews. There are buttons for 'Website' and 'Directions'. The address is '30 Nessie st, Inverness IV1 1DA' and the hours are 'closed now'. Below this, there are two review sections: 'Reviews from the web' showing a Facebook rating of 4.7/5 with 38 votes and a VetHelpDirect rating of 5/5 with 44 reviews. At the bottom, there is a 'Reviews' section with three user reviews and buttons for 'Write a review' and 'Add a photo'.

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55%
of website users
spend less than
15 seconds on a
website before
leaving.

so that there is a clear “Call to Action” to direct users down this path. Websites should have clear, uncluttered navigation which should be consistent from page to page so that users can find what they are looking for readily. It is essential that all websites are mobile-optimised, on average more people will view the website through a mobile than a desktop so equal weight should be given to the design of the mobile version. Not only is it a better experience for humans looking at the mobile-optimised website, Google will also penalise websites that are not mobile-optimised so that they do not perform so well in the search engine results (Figure 4).

Telephone number and address should be clearly presented on each page, the telephone number

should be “click to call” format so that on mobile phones people can call simply by touching the number.

Many veterinary practices offer online appointment booking so that clients can book an appointment at a time that suits them. Not only is this more convenient for clients, clients who prefer to book appointments online may choose a practice that offers this over one that does not, particularly if it is late at night and they want to complete the task of getting an appointment arranged.

Displaying reviews on the website homepage offers “social proof” to the user, as discussed in the “Zero Moment Of Truth” chapter, reviews have been shown by many studies to increase the conversion rate, by putting these reviews in a highly visible place on the website homepage the number of potential clients seeing those reviews will be increased.

Having prominent links to social media is useful so that clients can find the platforms readily. Facebook “Like boxes” or other feeds are also recommended as they bring some of the life and energy of the Facebook page to the website as well as offering more “social proof” to potential new clients.

FIGURE 4

Example of a non-mobile-optimised website (a) and a mobile-optimised site (b). Today, only smartphone-responsive websites are taken into account in Google optimisation.



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B) Facebook page

Used correctly the Facebook page can be a powerful method of new client acquisition. Every time a client engages with the practice Facebook page some of their friends will see that interaction and in doing so be exposed to the brand of the practice. Not only does this create an indirect word-of-mouth recommendation, through the knowledge that their friend uses this veterinary practice and seeing evidence of a happy relationship with it, it also creates the opportunity for the friend to like the Facebook page thus creating a permanent connection with the practice. Relationships can be built up with local pet owners, giving them an opportunity to get to know the practice over time.

It can be tempting to exclusively write posts that promote the advantages of the practice or offers that are running in practice, however Facebook tends to work far better when practices focus on talking about what the community want to talk. Profiling stories about recent cases seen at the clinic, photos of pets in the waiting room, stories and images of staff at work tend to work well. Social media works best as a two-way conversation so open posts work better than closed statements. As with all conversations it is essential to reply to comments and questions, or at least to “Like” them, tools such as the Facebook Pages app for mobiles are very helpful with this. For optimal results practices should aim to post every 4 hours during the day to reach the maximum number of people. Tools such as Facebook scheduling makes regular posting achievable even for small practices, it means practices can write posts in advance and schedule them for specified days and times; posts can be written when things are quiet and scheduled for regular updates during the month. We recommend using a combination of scheduling and posting on an *ad hoc* basis when suitable moments

“On Facebook, it is essential to reply to comments and questions, or at least to “Like” them.”

arise. Setting up a private group for members of staff to privately share content also helps, this means every member of the team including new or inexperienced

members of staff can share content they come across that they think would work on the page. The administrator then simply works their way through the posts shared to the group and can schedule all appropriate content to the practice page. Using these methods most practices can achieve at least once a day posting with many small practices in the UK managing to post at least 4 times a day, thus maximising the number of people that will see their content. Outsourcing to specialist agencies is increasingly common, giving the Facebook page a lift by bringing in specialist skills as well as assistance with post volume.

Facebook ads are now an essential part of running a successful Facebook page. When a Facebook user logs on to their Facebook feed there are, on average, 1500 posts from their friends, or from pages that they follow that they could see. The Facebook algorithm prioritises content that is most recent and interesting to that user based on their previous behaviour. This Facebook algorithm also prioritises posts from people over pages, which means that to get the most from their Facebook pages businesses must invest in Facebook Ads. Facebook ads can be targeted to be shown to local pet owners, different ads should be made for dog owners and cat owners to make them as relevant as possible. Facebook ads run on a budget, once this budget is used up the adverts stop running.

TYPES OF ADS

Ads for likes	Designed to get more relevant people to like the Facebook page
Ads for engagement	Designed to ensure that more people see the content from the page
Boosts	Can be run on an <i>ad hoc</i> basis to promote individual posts that are important to the practice

It is possible to run a “boost” for an individual post and this can be useful however better results are usually obtained by running an ad campaign from ad manager.

STATISTICS FROM PRACTICES WORKING WITH VETHELPDIRECT

Minimum budget stipulated by Facebook	€34/month
Budget range of independent practices	€34–€136/month
Average number of new page likes/€	2
Average paid reach*/€	140

*Paid Reach = number of people that see posts from the practices due to ads

Other social platforms can be useful for veterinary practices, in particular Instagram is being used very successfully by some UK practices. Twitter, LinkedIn and Google+ are used by some but for most first opinion practices Facebook delivers far better results for the time invested.

C/ Search

For an average page of Google results over 30% of people will click on the first result and less than 2% on the last result. When you consider that for a small town in the UK we would expect approximately 800 searches for the search term “Vets in [town]”, it becomes clear that 240 potential new clients could be missed by not occupying the first position. The Google search engine result is often the first piece of information that a client will see about the practice so it is important that the result is well written and enticing for potential new clients to click on.

Google uses a combination of factors to decide which practices will be displayed top in the search results, by working on improving these factors it is possible to improve the practice’s position in the search results. This approach takes time and is a long-term strategy, however the prize of ranking top in the Google search results has a huge value. A short-term fix is to use Google Adwords to pay to ensure the practice is shown in the top few places. Google Adwords works by setting a budget, when users click on the ad Google is paid from the budget, when the daily budget is used up Google stops showing the ad. As with Facebook Ads, Google ads should be targeted so that they are only shown to users that are looking for a vet in the relevant area.

D) Factors in the Google Local Algorithm and how to improve them

Google My Business

- Claim your listing (Search “Google My Business” for more information)
- Check all information is accurate
- Keep the listing up-to-date with photos and information such as opening times
- Use the new functionality to post updates to the practice Google My Business profile

Website

- Ensure this is mobile-optimised
- Check that a site map is present
- Ensure your telephone number and address is present as text rather than an image

Review volume, velocity and diversity

- Build up reviews on Google as well as a variety of other review platforms
- Ensure that reviews are continually being added to

Citations (mentions of name, address and telephone)

- Build up as many of these as possible on directories around the Internet and on the websites of local partners

Links to your website

- Build up as many of these as possible using directories and asking local businesses to link to your website, in return for a link from you to their website

●●● The phone call — first important contact

The telephone is a wonderful opportunity to make a positive first impression during the initial contact with a client, creating a bonus in terms of service and acting as the first step in creating loyalty — and it comes after several other forms of contact: digital (website, Facebook, Instagram etc.) and word of mouth on the dog runs and among friends and relatives. Since all messages prior to the first contact are a mixture of experience, rumours and subjective points of view, it is so important to be friendly, pleasant and 100% client-oriented in the first call with a pet owner.

A) Set guidelines

At some practices the term “client-oriented” is confused with “I sit and listen to the pet owners for hours”. However, every phone-call needs to have one clear goal in mind: a visit to the practice with a consultation, comprehensive physical exam and additional services, as they form our core business. Free advice (particularly for non-clients) is not just a waste of time, but is also harmful as it takes time away from the pet owners who are in the practice and are already clients.

Having a dedicated phone staff is also important because other team members can remain available for the clients in the waiting room at all times.



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There are many social media available but Facebook is the easiest and most convenient one to use today if you wish to give your practice more visibility.



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“ On the phone, as with all other forms of communication, the tone of the voice is of major importance.”

Thus, a client-oriented, empathetic phone call will strike an optimal balance between the client’s needs and desires and the limits that are in place at the practice (time, staff, etc.).

To create this balance and to ensure every client receives the same level of service, a general structure for all phone calls is advisable!

The basic structure for a professional phone call in the day-to-day practice routine may contain the following points:

- **Greeting:** introduction, obtaining the client’s and the pet’s data (client name, pet name, species, age, gender and breed).
- **Main part:** discovering the clients’ needs and wishes, getting feedback to confirm the needs were understood correctly, offering an appointment.
- **Ending:** repeating and summarising the agreements, taking down notes in the client’s file or in a special folder created for new clients in the practice computer system.

As with all other forms of communication the tone of voice is of major importance! Even though general guidelines are an absolute must for professional phone calls, a structure should act as a subtle safety net for the practice team, unnoticed by the pet owner. A gentle, friendly tone on the phone makes the pet owner feel welcome and at the centre of a special and client-oriented care. This way we can lead the client (with our structure) and welcome them (through our tone). By the way: It’s always a great idea to smile when you are speaking: this makes your voice softer and friendlier!

B) Not too little but not too much either!

Employees should be able to react flexibly to the needs of the clients while avoiding talking too long and gathering too much information, the phone is definitely the wrong tool to collect a detailed medical history. The history taking is a core part of any consultation and needs to take place in the practice face-to-face with the practice team and the vet. On the phone, misunderstandings that can lead to conflicts are more easily created and discussing

EXAMPLE: A NEW CLIENT WITH A KITTEN IS CALLING...

Receptionist: *ABC Veterinary Practice, Anne Roberts speaking, how may I help you?*

Client: *Mrs Green here. I need to come with my cat, the breeder said she needs to be vaccinated.*

We already know the client has a cat that needs a health check with vaccination. We can use this information positively!

Receptionist: *Yes, vaccinations are very important! We would be delighted to offer you an appointment. What is your cat’s name and how old is she?*

We acknowledge the client’s wish, reinforce it and state that we work with appointments. In addition, we have acquired the first important data for our client file and take over the leadership of the phone call.

Client: *My cat is named Kitty and is 10 weeks old. She is very lively and I have so many questions! How often should I worm her and what is the best food to give her?*

Now it is important to gently and sensitively guide the client and not get involved in a (long) telephone

conversation — as the client should come to find out more about the practice, the employees and the services.

Receptionist: *Kitty is a great name and 10 weeks is a perfect time for the first health check and vaccination. For the first consultation and comprehensive exam we always schedule some extra time, because we know that our clients have lots of questions and we want to make sure that nobody’s in a rush. I can offer an appointment tomorrow at 3 or the day after at 5, what suits you best?*

We are referring to what was previously mentioned (vaccination, cat name), strengthen this and use the term “examination” to signal that we offer more than a vaccination and that we are willing to take more time. In addition, we offer 2 appointments that are available in our calendar.

Client: *The day after tomorrow at 5 is great!*

Receptionist: *Please could you give me your telephone number so that I can reach you if necessary.*

Client: XXXXX.

Receptionist: *Thank you so much! I have scheduled the first health check with vaccination for Kitty and you the day after tomorrow at 5. Please bring Kitty’s documents with you. How would you like to receive our brochure with tips for cat transport? Via, email or post?*

This is where you summarise the result of the conversation and repeat the appointment, and introduce yet another special service by offering a transport brochures.

Client: *That would be cool, it’s nice of you to think about it! Please email the brochure to: XXXXX.*

Receptionist: *We will send the leaflet today and are looking forward to your visit with Kitty. Please remember to give us a call, if you can’t make it.*

Client: *Goodbye!*

Receptionist: *Goodbye Mrs Green!*

The end of the telephone call is a good time to mention the client’s name once again, as everyone loves to hear their name and it gives the conversation a personal note.



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It is always a great idea to smile when you are speaking on the phone: it makes your voice sound softer and friendlier!



ADDITIONAL TIPS FOR ENSURING GOOD PERFORMANCE AND GOOD SERVICE

- Call your office at least once a day from the outside: this way you will establish if the service is always up to standard
- Hire "mystery shoppers" from time to time to get objective and professional feedback on the quality of your phone service.
- Make sure that your answering machine is also up to par and delivers essential information (opening hours, emergency numbers) in a caring and professional way.



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symptoms with clients takes up too much precious time! On the phone you need to focus on getting the client to come to the office to deliver high-quality medical care:

- Record as much information as needed
- Be empathetic and offer an appointment in the practice

C) Dedicated phone staff

As the phone service plays a key role in the practice's image and client loyalty, you need to make sure qualified staff are working the phones. Those who are on the front line and make the first personal contact with clients need to be uniquely suited to the role and receive special training. Having a client feel the first contact is incompetent or even under stress, short-tempered or unfriendly is bad style. The most common "complaints" from clients about phone service usually focus around perceived unfriendliness.

"The most common "complaints" about phone service usually focus around perceived unfriendliness."

If looked at in greater detail, the unfriendliness is often revealed not to be a real or even intentional unfriendliness but merely as result of the stress from time pressure and a lack of expertise on the part of the reception staff.

Here is what you should keep in mind to facilitate good telephone service:

1. Be careful when hiring employees: slightly extroverted persons who like to communicate with people make good reception staff. Restraining talented communicators who go too far, e.g., spend way too much time on the phone is much easier than dealing with people who generally do not want to be in the spotlight.

2. Train employees: (at first) trainees are unsuited for taking on important telephone responsibilities! New employees should be trained for this important job in several phases. Here written guidelines and role-playing games under the supervision of experienced staff are useful instruments.

3. Optimise the surroundings: even the best phone pro can experience massive stress when they are alone at the reception with two ringing telephones plus managing incoming and outgoing clients!

The idea is to adjust the staff numbers to the daily requirements (keep a check list) and — wherever possible — separate the telephone service from the client reception and waiting areas in larger practices and clinics. The greater ease and sense of calm have an immediate positive impact on employees, which they project when dealing with clients.

D) Champions league on the phone

What does a “top-telephone” call look like, which wins over clients and makes them 100% positive about the upcoming visit? One important factor is

training practice employees properly to be flexible with clients and make suitable suggestions. However, the most important factor is having an employee who can connect immediately with clients, by skilfully and empathetically listening to the client and reading the signals clients send out and using the gathered information in the conversation. The client then feels accepted, respected and validated. After the call the collected data needs to be placed in the practice software, so that all employees have access to the information to be able to greet Mrs Green professionally and immediately establish a connection.



CONCLUSION

A good website requires generally the help of a company specialised in this area. A Facebook page can be easily managed by a nurse providing you establish some rules. Finally, the most critical part in the communication prior to the visit is the phone call. It is where clients can be won or lost. In big practice, the trend is to disconnect the call centre from the front desk for a better quality of service.

TOP 10 TRAVEL TIPS

when bringing your cat to your veterinarian

- 1 Never travel with your cat loose in the car**
- 2 Choose a robust carrier**

that opens from the top and the front, and can also be taken apart in the middle (an easily removable top allows an anxious cat to be examined, whilst remaining in the bottom half). Focus on the practical and functional features and avoid fancy and often expensive carriers. Feel free to ask our receptionist to show you one of our recommended carriers and to demonstrate how to use it.
- 3 Leave the carrier at home in a place where it may be regarded by your cat as “part of furniture”**

allowing it to become a familiar place.
- 4 Make the carrier as comfortable and familiar as possible**

by putting in some clothing with your scent or your cat’s scent (you can gently wipe a soft cloth on your cat’s face to pick up her scent). Spray some synthetic feline facial pheromone (Feliway™) — available at the clinic — on the clothing at least 30 minutes prior to departure. Don’t forget your cat may be sick or may soil the carrier during the journey, so it is a good idea to take some spare bedding for the drive back home.

GOOD TO KNOW

During transportation, it is important to safely place the cat carrier in your car so that it does not move around and your cat does not get stressed.

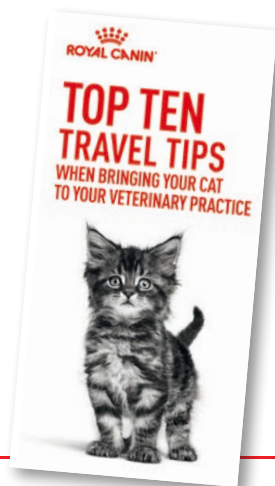


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- 5 To get your cat into the carrier, if she doesn’t enter spontaneously, you should calmly take your cat and lower her into the carrier through the top opening**

Alternatively you could remove the top half of your carrier and replace it after your cat gets into the bottom half. If your cat is really unwilling to get in the carrier, you can wrap her in a thick towel (containing her scent or sprayed pheromone), then lower the cat and the towel into the carrier.

nary practice



To ensure that all goes well at the consultation, it is important to make the journey to the clinic as stress-free as possible.

6 Once in the car, prevent the carrier from being shaken

during the ride either by securing it in the foot well behind the front seat or with the seat-belt. Drive carefully; avoid loud and aggressive music; talk quietly to your cat to reassure her. The quieter the owner, the calmer the cat. Some cats like to see out, but most of them will appreciate it if you keep the carrier covered with a towel during the journey.

7 When you walk from your car to the practice's reception area, try to avoid shaking the carrier or bumping it against your legs

8 Once in the reception area, ask our receptionist to show you where to sit and how to rest the carrier

we have a dedicated reception area for cat owners with specific places where you can put the carrier next to you. We strongly recommend having the front end of the carrier toward you (rather than towards other cats!) and to keep the carrier covered with a towel when in the reception area.

9 You should, of course, follow the same protocol on the journey home

10 If you own several cats you should take a few extra precautions when bringing one of them back home

Leave your returning cat in the carrier for a few minutes and see how the other cats react. If all cats remain calm, you can open the carrier and let your cat join her roommates. If you sense tension between your cats, it is probably because the returning cat bears odours from the practice. Should this happen, keep your returning cat in a separate room (of course, with a litter box, food and fresh water!) for a minimum of 24 hours to regain a more familiar smell.

GOOD TO KNOW

It is important to choose a carrier with a upper half that can be removed.



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HOW TO OFFER A GREAT EXPERIENCE

Based on studies on a human hospital, this chapter will outline the different steps in the pet owner journey in your practice, including the consultation that should be a “golden moment” for your client. The veterinarian and the staff play a crucial role in the “pet owner experience” but process and physical aspects should never be underestimated. Finally, some tips to improve your follow-up strategy will be reviewed.

KEY POINTS



●○○○ The rule of the 3 Ps

A) Lessons from the best human medicine hospital

In 2003, Professor Leonard Berry (Texas A&M), one of the world's top experts in health services management, carried out an in-depth study on the internal operations of the Mayo Clinic at its three main campuses in Arizona, Florida and Minnesota (Harvard Business Review, 2003). The Mayo Clinic is probably the most recognised hospital brand in the world and its prestige is legendary. During his research, L. Berry and his team interviewed over 1,000 doctors, patients, nurses and managers of the group. They attended and were present at over 250 medical appointment interactions between patients and doctors and they analysed the operation of 14 different medical departments (including neurology, oncology, orthopaedics, gastroenterology and urology, among others). In the conclusions of

their study, the authors of this research identified three pillars on which the exceptional level of service provided by the Mayo clinics are based and the resulting exceptional patient experience: the People, the Process and what they call the Physical Evidence. This is the rule of the 3 Ps.

People. The creed of the Mayo Clinic's founder (“the best interest of the patient is the only interest to be considered”) pervades all staff actions. The clients who were interviewed explained how “My doctor calls me personally at home to find out how I am” or “When I had a colonoscopy, the doctor personally explained to me that I had a polyp, as she remembered that my husband had died from cancer of the small intestine and she knew that I was scared that the same was happening to me” or “My oncologist is the kindest person I have ever spoken to. I was much more than a medical problem to him. He talked to me about his personal life. He treated me like a person”.



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An awesome exterior should include easily visible and well-maintained entrance signs and car park with a logo and best possible lighting.

Process. As far back as 1910, Dr. William Mayo said, “for the sick to benefit from scientific advances, it has become necessary to develop medicine as a cooperative science”. This foundational vision translates into an integrative medicine approach to cases: Mayo Clinic patients never feel that they are being passed around among a series of disconnected doctors who exercise their specialities in a standalone manner. Much to the contrary, all of the clinic’s systems and processes promote teamwork among professionals: for example, all doctors receive fixed salaries to prevent personal interests in dealing with specific cases and, therefore, invoicing higher amounts that could result in commissions.

Physical evidence. The Mayo Clinic’s facilities are designed to minimise stress, to provide a welcoming and professional environment, designed for families... This is appreciated not only by patients and their families, but also by workers. And the 2,800 medical staff — unless they are in operating theatre or performing specific medical procedures — dress in business attire, in order to convey competence, respect and professionalism.

Most veterinary clinics worldwide can certainly learn lessons and gain ideas from this example in order to improve their clients’ experience... Below are some ideas in this regard.

●●○○ The first moment of truth

After the client has selected a veterinary practice through various channels, the moment comes when they arrive at the clinic. If pet owners have had a positive experience thanks to a well-designed homepage and a professional telephone reception and are able to find a parking spot without any problem, they tend to be in a good mood on arrival.

An ideal reception area should have a client-friendly design supplemented with a great reception team.



© Royal Canin SAS



HOW TO IMPROVE THE CLIENT EXPERIENCE THROUGH PEOPLE

1. Don't pay income production-related variable incentives, as these can lead to inappropriate behaviour that does not prioritise the interest of the client/patient.
2. Measure client satisfaction and track the results back to the staff who attended to that client. Share the results individually and acknowledge those who obtained the best metrics (*i.e.*, NPS).
3. Train, train, train!
4. Encourage not only technical training, but also client service-related skills. Film/observe young vets during appointments and work with them to identify areas that could be improved.
5. Select staff not only according to their clinical skills and credentials, but also according to their communication and client-focus abilities.
6. Formalise the clothing worn and greeting made by veterinarians during appointments.
7. In the context of complex, life-threatening cases handled in large units where the client interacts with more than one vet, identify a “veterinarian in charge of the case” who can take care of the key interactions with the pet owner.
8. Select veterinarians and support staff who own and like cats or at least are accustomed to handling them.
9. Make sure that clinic owners lead by the example every day: the points above are of no use if the team does not see their bosses practice what they preach.
10. Incorporate client communication skills in veterinarians’ performance appraisals.

Of course, clients are always a bit stressed when visiting a vet, even if they assume that their pet is healthy and that “their” practice will provide the best possible care for their companion. However, if the client had a choice they would most likely not be going to a vet but playing with the pet or taking it for a walk. This is the reason why excellent design is so essential — welcoming the client and relaxing pet and owner.

A) Exterior design

The exterior of the practice makes a major contribution to a client’s sense of wellbeing and transforms their visit into a positive event. As employees tend to gradually become blind to the workplace appearance over the years, staff can sometimes be neglectful to the outward “face” of the practice. Employees are also frequently in a hurry when they enter or leave the practice to get to their workplace in time or they have a fully separate entrance and just don’t get the client’s viewpoint. This important area with such an impact on the pet owner’s impression of the practice needs to have an independent “task force” to check the exterior at least once a day and fix any problems immediately.

An awesome exterior should be designed and maintained as follows:

- Complete cleanliness and maintenance for the practice surroundings, *i.e.*, plants, pavements, entrance, outdoor seating;
- Easily visible and well-maintained entrance signs and car park with a logo and best possible lighting;
- Attractive design of window surfaces, *e.g.*, with adhesive foils highlighting the practice logo and enhancing corporate design;

- Protected (sun/rain) seating, wastebaskets, bags for animal waste and fixtures to temporarily “park” nervous dogs so that the owner can check in at reception quietly.

The exterior is the first part of the practice that the client experiences when they come with their animals to see you. Treat them like a welcome guest and show them your best side — at any time of the day and night!

B) Reception

From the carefully designed exterior, we move to the interior of the practice and this area also needs to have a continuous client-friendly design that is supplemented with a great reception team. The combination of a pleasant and interesting ambience and attentive, highly specialized employees trained for this important job are what make a practice unique and impresses clients deeply. This includes greeting clients immediately when they enter the practice — a smile, eye contact and a nod may be sufficient if applied properly (*e.g.*, when the receptionist is on the phone). The next most important factor is having the practice staff take care of the pet owner, listen to their requests, provide them with sufficient information (about waiting time, the upcoming consultation, appropriate offers or innovations for the pet) and accompany them to a seating area. Even if doing so is not possible 100% of the time in a busy practice, the team still needs to be aware that a client’s reception sets the path for the entire relationship and is essential for establishing a good relationship and creating a long-term loyalty. Always remember that the client is the basis for our business — no client, no revenue, no profit and no growth!



HOW TO IMPROVE THE CLIENT EXPERIENCE THROUGH PROCESS

1. Work with scheduled appointments whenever possible. If managed correctly, appointments result in a reduction of waiting times and enable vets to prepare proactively for the consultations, clearly improving client experience.
2. Define telephone standards and measure them regularly (*i.e.*, with a mystery caller service), correcting areas of improvement through training activities.
3. Schedule in feline patients at certain times of the day and with longer time frames. Teaching our clients how to bring their cats to our centre in the least stressful way possible.
4. Regularly call the owners of hospitalised patients to explain any change to the treatment plan and/or estimate.
5. Systematically call all clients the day after patients have undergone surgery (even if they have a follow-up scheduled soon), to show interest and answer any queries.
6. Always provide a written consultation report summarising the most relevant events during the visit.
7. In complex cases involving the work of more than one vet at the centre, appoint a head veterinarian who gathers all key information relating to the case for the owner.
8. Encourage your staff to use the services and products offered by the clinic (such as wellness plans, food, anti-parasitic drugs): what is best known is best sold.
9. Ask your clients for their preferred contact method for vaccination and de-worming reminders (none, email, telephone, SMS, letter) and comply with this.
10. Define a formal discount policy in the clinic: whom you can give a discount to, which clients and under which circumstances. Few things confuse and frustrate a client more than sometimes receiving a discount and other time not, depending on who serves them or without a clear reason.



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WAITING ROOM SET-UP: WHAT YOU SHOULD NEVER DO!

This photo shows an example of a waiting room with a wrong set-up. There are 9 errors. Can you spot them?

The style of reception in the practice has a strong impact on client relations. Upon entering the practice area, the client should be approached as quickly and professionally as possible, helping him feel secure, acknowledged and respected.

C) Interior design

In order to make sure a client feels comfortable (besides an enthusiastic and personal greeting), the facilities must have a convenient and client-oriented ambience — meaning the furniture and design needs to focus on the client's and pet needs. Specific tips for a successful basic design include:

- A bright, pleasant smelling and air-conditioned reception area
- Comfortable seating (recommendation: test your seats by sitting down for ten minutes!)
- Interesting and up-to-date reading material about animal health and related issues
- Racks and small tables for transport containers (cats, small mammals, birds)
- Information about the practice services, *i.e.*, veterinary services and other services such as examination techniques, check-ups and nutritional counselling
- A select range of animal food and sensible accessories (*e.g.*, transport baskets, toys)
- Presentation of the practice team with professional photos, skill sets and special interests

If you want to do something more for your clients' comfort and emphasize your client-friendly image, we recommend the following items:

- Drinks for people and their pets, *i.e.*, water taps and bowls or coffee machines and mineral water
- Information about seasonal topics such as parasite prevention in spring and autumn, joint health in winter, travel prophylaxis (medicine, food) in summer
- A "children's corner" with smaller furniture, animal books, crayons and paper
- Waiting room television with informative videos for various animal species and interesting practice services — always including and presenting the practice team

D) More for cats!

Cats are becoming more and more popular as pets — increasing numbers of them around the globe are evidence for this. The good news is that these cats also need veterinary care. We as service providers need to do more to meet the needs of our feline clients and adapt to these needs in terms of our communication strategy (see "Telephoning" section) and practice design.

Cat owners are particularly sensitive when it comes to practice visits as seen in various studies (*e.g.*, Bayer Veterinary Care Usage Study, 2011) and many cat owners see a visit to the vet as pure stress,



WAITING ROOM SET-UP: WHAT WAS WRONG!

Here are the errors the clinic made:

1. Unpleasant smell
2. Plants in bad shape
3. Messy advertising board
4. Posters on the wall are not related to pets
5. Out-of-date magazines
6. Untidy display racks (bags lying flat, best places are empty, etc.)
7. Unsorted bags lying on the floor
8. Grocery-like promotions
9. Nothing for cats nor cat owners



EXAMPLE OF A PROFESSIONAL-LOOKING WAITING ROOM

All the mistakes above were fixed and the following facilities were added: 1. Separated waiting areas for dogs and cats with cat carrier trees (cats prefer to be in high places) 2. Pheromone dispensers 3. Accessories meeting cats' behavioural needs

causing them to avoid going causing poor levels of veterinary care for cats. However, these clients are extremely thankful for every step the practice team takes to make them feel more comfortable:

1. A designated cat waiting area

Whenever possible the practice should either have a separate cat waiting room or an area specifically designated for cat owners. The area can easily be separated from the dog area and reception through a partition (shelves, coat racks, displays etc.). Hereby a special and secluded space is created, which cats appreciate as they like to hide. The area can also be labelled with (wall/floor) stickers and images, making it easy for clients to find.

2. Special furniture

The cat area needs to have racks or small tables for cat carriers. The colours of the "cat space" should be soft and the lighting mild and indirect, as cats prefer things a bit "cosy". Pleasant photos of cats and the practice's "cat team" on the wall add an extra personal touch.

3. Special service

The cat area is also the ideal place to promote services and products the practice offers for cats, such as special health checks, care programs, nutrition and accessories. Do not go for all you can show at the same time, but rotate the focus using posters and brochures. If you have enough space, a food display with a small, select range of premium cat food, sensible toys and "good" cat transport containers is a big plus. The client can then use the waiting time to find out more about the practice's services in pleasant surroundings.

The reception and waiting area need to make the client feel at home immediately, so that stress and worry about their pet slips away. They need a comfortable seat in interesting surroundings where they can wait to visit the vet — with attentive support from the practice team.

E) The practice team

A practice is only as good as its team! Even though optimum design of the practice space is essential to a good image, without a caring, attentive and client-oriented practice team that actively cares for clients, even the most perfect design will be ineffective. But when an awesome interior design meets extraordinary employees, the combination of these two elements has a tremendous impact on the client.

Defining the difference

What is the difference between an average and an extraordinary practice team? What makes a client so loyal that they will not even consider visiting some other practice, never mind switch vets?

“ Provide the best possible service to owners and their pets.”

The answer is both simple and complicated: communication! Simple because everyone knows communication is important and plays a crucial

role. Difficult, because there is still not enough training and expertise for the implementation of client-oriented communication in veterinary practices. Examples of important characteristics to look for in front desk staff enabling extraordinary client care include:

- Natural friendliness and enjoyment of being around people and animals
- Stress resistance and the ability to maintain a clear head in difficult situations
- Commitment to do more than “just” complete tasks
- Client-focus or the capability to see the world through a client’s eyes and provide the best possible service to owners and their pets
- Being able to communicate, inform and counsel in a clear and simple language, so that the client understands every word

These are the ideal characteristics of a dream team, rarely found in this combination in real life — but they should be kept in mind when searching for a “5-star” reception team.

An exceptional reception team makes all the difference — it bonds clients and keep them coming back again and again. But: it has to be found, trained and maintained every day!

Creating an extraordinary performance

Now, what is the perfect interaction between the reception team and clients? Let’s assume the team meets all the necessary requirements, an optimum interaction involving a new client with a cat and an appointment arranged on the telephone beforehand may appear as follows:

The receptionist greets the client, approaches her, introduces herself and asks what her wishes are:

Receptionist: *Hello, welcome to our practice, my name is Anne Roberts. How can I help you?*

Client: *I have an appointment for Kitty’s vaccination.*

Royal Canin developed a cat carrier tree to avoid putting the cat on the floor.



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The receptionist opens the appointment calendar in the computer and sees that, thanks to an excellent telephone interaction, the appointment for Kitty and other details have already been included in the client’s file.

The receptionist opens the appointment calendar in the computer and sees that, thanks to an excellent telephone interaction, the appointment for Kitty and other details have already been included in the client's file. She can now use this information to address owner and pet by name and thus help immediately create a personal bond, e.g., by asking about transportation — knowing that this is often a problem for cat clients.

Receptionist: *Then you must be Mrs Green, we are happy to meet you. Were our transport tips for Kitty helpful?*

Client: *They were great. It was a huge help.*

The client's positive reaction illustrates that mentioning transport was a good move, and allows the team to highlight once again the special service in the form of transport tips.

Receptionist: *Wonderful! I just need you to fill out this intake form. Would you like to take a seat in our cat waiting area to complete it?*

(In this case with a new client the receptionist waits for the pet owner to complete the intake form to check and update the data in the computer. When serving a regular client the data should actively be checked at least twice a year at reception upon arrival.)

Client: *That's a good idea!*

Receptionist: *Then please follow me, I'll show you around.*

Here the receptionist is combining the necessary bureaucracy with highlighting the special cat waiting space and personally accompanies the client — the client feels like a VIP. With the intake form she also checks the client's data (email and phone), so that the practice has an accurate and updated client database.

Client: *It's nice and comfortable here and I can keep an eye on Kitty.*

Receptionist: *Thank you Mrs Green, I will come right back to you to pick up the form and I am happy to answer all your questions.*

Client: *Wonderful, thank you so much!*

Once the formalities are done, the receptionist collects the form and tells the client about the expected waiting time, offers a drink and asks if the client needs anything else. With this style of interaction the practice creates a positive impression at the first personal contact. The pet owner experiences first hand that they are a VIP and that service and client focus are not just words but are being "lived". This is the best way to gain and keep clients.



The consultation

Meeting the vet should be the highlight of the client's visit to the practice; positive impressions that were created on the phone and at reception can now be reinforced. Clear, structured and client-oriented communication during consultation is absolutely vital to understand and be understood. Studies have shown that doctors often make a great effort to provide patients with suitable diagnostic and therapeutic explanations but that the patients sometimes fail to understand. Misunderstandings between vets and pet owners often occur because the scientific world of vets has very little overlap with the client's world and vets are often poorly trained in client communications. But nowadays a veterinary qualification is not enough to satisfy the client's needs, pet owners want more!

A) Build structure to support communication

If vets and practice teams use a specific structure for their dialogue with clients it helps to establish a good relationship, to create an effective understanding and it even saves time while securing a high quality of communication. The structure we propose can't be applied to every situation, but in general, helps forming a strong bond with your clients:



THE 7 RULES FOR AN EFFECTIVE FOOD DISPLAY

1. Prefer a display rather than a showcase. The pet owner enjoys being able to take the bag in hand.
2. Don't leave it empty. Especially at eye level (notion of "golden diamond" — see picture).
3. Put bags on their facing, not on the side or lying down (except big bags).
4. Put the wet formula next to the dry, as it will remind the pet owner and the nurse about it.
5. Put the price and — even better — the cost per day.
6. Fill the shelves according to space and in relation to the turn over of each product.
7. Of course, keep it clean and respect the "first-in, first-out" concept.





© Shutterstock

A quick client file review before the appointment is highly advisable because it slows down the hectic pace of certain days, helps the vet prepare for the consultation and allows for better communication.

90% of the investments of a vet practice are in the back office (surgery, X-rays, ultrasound, lab) and only 10% in the waiting room, where the pet owner spends most of the time. It is important to show the back-office to the client through a slideshow or a video for instance.



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1. Preparation: Preparation is vital to a consultation! A vet should review the client’s file and make a quick update about the last 2-3 visits before the client is invited into the consultation room: What were the reasons for the last visits? What were the examination results and therapy, which products were prescribed and purchased? What notes did the vet make about the consultation, such as pet owner and animal preferences, circumstances etc.? Using this information, the doctor can prepare individually for a client before he enters the examination room. This process has 2 advantages:

- The client realizes he is not merely just any customer but he and his animal have the vet’s full attention.
- Prior to the consultation, the vet can think about how he can make a link to the previous visit with (further) diagnostics, products, recommendations or information, which were not applied in the previous visit.

2. Opening the consultation: Once the client has entered the room and is fully concentrating on the vet, the consultation can start. The vet should initially keep the cat in the basket and the dog on the floor to ensure the client’s full concentration. Having a vet multi-task by asking about the medical history and examining the animal at the same time is not ideal. The client deserves full attention, because this is what they are paying for. If we as vets attempt to perform multiple tasks at the same time, we miss important signs clients give us and — even worse — we create the impression that we are doing something completely mundane because we can do it “on the side”, hereby dramatically reducing the value of our services. How can we expect the pet owner to pay a suitable price at the end of

the consultation if we act as if the task is nothing special?

To start the consultation after greeting client and pet the following phrases are ideal:

- How can I help you today? This question works if the vet does not have enough information, e.g., with new clients, or to check on details obtained from a phone call (discrepancies often occur).
- How has Max been since the last treatment?
- How does Toby like the new diet?
- How was your holiday in Spain with Milo?

These questions link to consultations and information from the past and signal interest in the pet’s health and client needs — they send the message, “I want to provide the best possible service for you!” They also connect to the consultations that have already taken place and refresh the client’s memory.

3. Listening: It is important to really listen to the client, only ask questions, when something is not clear and to take notes to make sure that no information is lost. Once the client has finished with his description, the vet can and should ask targeted questions about the symptoms shown by the pet and if there are other things that the pet owner has recognized which are important to the overall picture. This way the vet usually gets much more information on the pet’s actual health status than if they simply start by examining the pet — this information often leads to further consultation and diagnostics.

4. Sorting and prioritising: During the next part of the consultation vet and client should collaboratively decide, which symptoms or diseases need to be

addressed immediately and which findings can sensibly be postponed to another appointment. Doing so helps to use the assigned and available time in the best possible way rather than adding pressure by exceeding the allocated timeframe and keeping other clients waiting.

5. Comprehensive physical examination with comments, summary, prescriptions and agreements regarding therapy and diagnostics:

Vets should always first perform an examination starting at the tip of the nose and working to the tip of the tail and then move on to special examinations of individual organs. While doing so the vet should take the client on a journey in which they explain the findings on individual body regions and organs to the client, so the pet owner always knows what the vet is doing. At the end of the examination the vet should summarise the findings, present a diagnosis and explain the planned therapy and/or further diagnostic procedures to the client. When explaining it's vital to use media such as leaflets, posters and models to create a picture in the client's mind that will help them to understand the facts. In the event of further diagnostics and complex therapy, it makes sense to talk clearly with the pet owner about the price and the possible outcomes. In this case, agreement from the client for suggested therapy and diagnostics should be obtained by asking: "What do you think? Can I schedule an appointment for the X-ray?" Should the pet owner hesitate or have objections, a Plan B can be worked out with options better suited to the client



HOW TO IMPROVE THE CLIENT EXPERIENCE THROUGH PREMISES AND PHYSICAL EVIDENCE

1. Parking (own or agreement with a nearby parking area)
2. The toilets should be kept clean at all times.
3. Consultation rooms should always be cleaned after every visit
4. Whenever possible, the switchboard should be separated from the reception desk, to enable undivided client attention
5. Clear- and professional-looking signage in all areas of the clinic
6. Directory of practice services and staff placed in a visible location in the reception area
7. Presence of furniture and relaxing decoration in non-medical areas of the clinic (sofas, coffee maker, relaxing images of happy pets)
8. Dedicated consultation room for cats
9. Separate reception (or, at least, a dedicated area) for cats, with spaces and furnishings designed for them
10. Separate hospitalisation (or, at least, a dedicated area) for cats

6. Linking one consultation to the next consultation (or contact):

If vet and pet owner agree and therapy or diagnostics are to be carried out, it is a good idea to end the consultation by linking the "now" to the next contact. Possibilities include a follow-up consultation, the appointment for the next check-up or noting the next endoparasitic or ectoparasitic treatment. Maintaining contact with the client is vital, reminders for specific consultations can be sent per email, text message or via post. Regular reminders for checks on chronic diseases such as atopy, renal, cardiac or joint disorders help assure compliance and illustrate to the client that the practice takes care of both client and pet!

7. Check out: The final stage in a consultation involves repeating the arrangements briefly, bidding the client farewell and then directing him to the reception for billing and scheduling the next appointment.

B) Working with appointments

As everybody today has less and less time and life moves quickly, working a practice by appointments only has clear advantages over an "open hours" set-up:

- The client's time is valuable and by giving and keeping an appointment the practice shows respect for the pet owner's situation. Nobody likes to wait and sit around not knowing, when (or if) something is going to happen.
- The vet's time can be planned more precisely so that the calendar is never too full and never too empty.
- Vets can prepare for the client's visit — they know who is coming and when. This way, they can already think about the best possible offers for pet and owner before they are in the consultation room.
- Appointments keep the stress of daily vet practice at bay, because there are not so many pets and clients waiting, moving in and out, and the noise level is reduced greatly.

●●●● Settling the bill

In every transaction, the moment where the client pays is a very important step. This is especially true for services, as the price is often less predictable for the client than when it comes to purchasing a product. This is even truer in a veterinary clinic, because most clients pay for a service that includes several elements (e.g., consultation, ultrasound, blood tests, biochemical analysis, injection) and products (for example, an injected drug and a treatment delivered), the details of which is often decided during the course of the consultation. This uncertainty results in anxiety for the client and often for the clinic team, especially vets. Managing

"Conventional" dialogue	
Vet	<i>Mrs Brown, you're here for a vaccination. How is Toby doing?</i>
Client	<i>Yes, everything is fine.</i>
Vet	<i>That 's good, so I can vaccinate him now.</i> (Vet examines Toby briefly and gives him a vaccination)
Client	<i>Oh, one more thing.... could you look at his nails?</i>
Vet	<i>OK. Yes, they are long. I'll cut them back quickly.</i> (Vet is already under time pressure)
Client	<i>Thanks! And now to the ears. Toby shakes them a lot and then rubs them on the floor.</i>
Vet	<i>I did not see anything in my examination — but I will have another look with the otoscope. Aha, looks like otitis in both ears, we need to treat it! [25 minutes have already passed].</i> <i>I will prescribe a very powerful medicine, please apply it once daily into both ears and come back again in three days, OK?</i>
Client	<i>OK, in three days then.</i>

Structured dialogue	
Vet	<i>How can I help you today Mrs Brown? Full attention, notebook and pen ready.</i>
Client	<i>Toby is actually here to get a vaccination and then I was hoping you could take a look at his ears.</i> Vet gets more information!
Vet	<i>OK, vaccination and ear examination — is there anything else I should take care of?</i>
Client	<i>I think the claws are maybe a little too long.</i>
Vet	<i>I noted: Annual health check with vaccination, ear examination and nail clipping. By the way Ms Brown, we prefer to call it health check because it 's so much more than "just" a shot, as you will see!</i>
Client	<i>Exactly!</i>
Vet	Examines Toby from head to foot including the ears and comments on his examination in the process allowing Mrs Brown to feel involved. <i>Mrs Brown, Toby is generally in pretty good shape but you are right: the ears are sore and need to be treated. My suggestion: I will take a swab from both ears and then have the lab look at them. We need to do this to be sure we give him the right medication for a successful treatment (creating benefit for client and pet).</i> <i>My assistant will gently clean the ears and I will show you how to properly apply the ear medication. In order to have enough time for the ears, I would like to postpone vaccination and the nails to the follow-up examination of the ears in three days. What do think?</i>
Client	<i>Good idea, Toby is already stressed.</i>
Vet	<i>I will take a swab now and my assistant will clean the ears with you to prepare them for the medication. I'll be back when the lab results come in — it takes about 5-10 minutes.</i> (About 15 minutes have passed, the doctor goes to the next patient and then spends another 5-10 minutes with Ms Brown and Toby explaining the therapy. In the meantime, the swabs have been examined and the ears cleaned — these are tasks performed by the vet nurse in this practice)

Example of a routine dialogue in the practice, where Ms. Brown has made a vaccination appointment with Toby via phone (20 min have been routinely scheduled): The vet uses the structured dialogue to guide his client; Mrs Brown, asks about her needs at the start of the consultation and can then use the available time effectively. He also follows the best possible practice by starting therapy only after a correct diagnosis has been made and he also presents this as benefit to the client. Decide for yourself: Who is more professional and convincing?

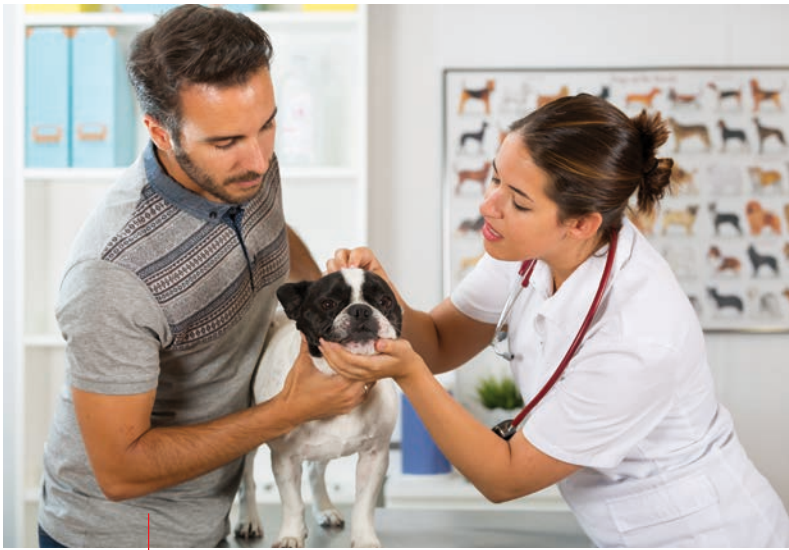
this anxiety is done partly during the collection of payment, but also and especially prior to the delivery of the service or during it.

A) Clear pricing and transparency

The moment between stating the price and settling the invoice allows the client to mentally calculate — consciously or not — the balance between what they have received from the service and the price. Indeed, the notions of "expensive" or "cheap" are never absolute but relative. At the restaurant, everyone understands that they will pay more for a starter, a main course a dessert, two glasses of wine and a coffee than for just a main course and a pitcher of water. It is therefore important to present an invoice that is sufficiently detailed to remind the owner of all the services delivered and products purchased for the amount that he will have to pay: the list of services invoiced, medicines administered, medicines issued after the service and other potential products. If the prices are displayed and

advertised including all taxes, it is recommended that you present the invoice with and without tax. Indeed, the taxes are only collected by the clinic on behalf of the State or the local authorities that have established them.

The invoice is not only given to the client, but also explained by the person in charge of collecting the payment, usually a receptionist. There is no need to use a vet's time for this task. On the other hand, the receptionist may call upon the vet if a difficulty arises and cannot be resolved. Some clinics offer to issue the invoice for clients and only do so for those who request it. We strongly recommend issuing the invoice automatically. The annotated invoice makes it possible to explain the services provided and prices and to quickly raise a possible issue (billing difficulties have the tendency to fester if not resolved quickly). In addition, the detailed invoice may also be useful, once the client returns home, to understand and justify the amount paid, during a conversation with his or her spouse, friend or other person.



Comprehensive examination will include comments, summary prescriptions and agreements regarding therapy and diagnostics. It should always be performed starting at the tip of the nose and working to the tip of the tail and the move on to special examinations of individual organ.

Payment practicality contributes to the client experience. This means accepting the main popular payment modalities in your countries.



The vet should always explain diagnosis and treatment carefully and, whenever possible, use a visual aid to demonstrate a point.

“The informed consent of the owner is an ethical and legal requirement.”

At the time of payment, practicality contributes to the client experience, which means accepting the main popular payment modalities in the country and keeping up-to-date innovations in this area, such as e-wallet payments or payments from the client’s mobile phone (the stage of development of these technologies depends on the countries and banking partners of the clinic. Here the idea is not to be an absolute pioneer, but rather not to fall behind.)

Special attention should be paid to insured pets to ensure that the clinic makes its client’s life as easy as possible in terms of paperwork and administration of claims.

Mr Ben Jones: *My cat is insured so, before leaving, I had handed my completed insurance claim form to the receptionist. I had ticked the box for my insurer to pay me and even provided a stamped addressed envelope. All the practice had to do was add their information and send it off. However, they sent it to my insurance company electronically with instructions to pay them and not me. My insurer duly obliged. I lodged a complaint with the practise manager.*

I received a verbal apology and, a few days later, a refund of their incorrect claim. However, I will not be returning.

B) Informed consent

Whatever efforts are made at the time of payment, it is often difficult to remedy errors or omissions made earlier in the process. The situation that everyone wants to have is one where the payment does not pose a problem because the owner already knows how much they will pay or at least has a good idea about it. For this, it is helpful to focus on two points: informed consent and the detailing the service rendered.

- The informed consent of the owner is an ethical and legal requirement from a medical perspective, it is also an essential part of ensuring client satisfaction. We will not consider the technical details of this but it is important to be clear that consent cannot be fully informed unless the owner knows the price of the service.
- Services are sometimes difficult to explain fully to the owner. It is important to explain diagnosis and treatment carefully, especially where the outcome is uncertain. Keep up a running commentary (for example, explaining

what is happening during clinical examination and, wherever possible use a document or visual aid to demonstrate a point, for example an examination or surgical report, the explanation of the results of an additional examination on an image, etc.).

In real terms, it is a question of acting at three key moments:

1. Whenever possible and appropriate, it is helpful to produce a written, commented estimate to the client. Unlike what we saw for the invoice, the commentary on an estimate is most often the work of a vet, who is both more competent and legitimate to explain his technical options and their financial impact. This allows the vet to lay out the service in detail, shows competency, and assists with obtaining true informed consent.

“The estimate is essential and always necessary for surgery.”

– The estimate is essential and always necessary for surgery. For surgical cases we recommend an estimate with a set and exact price, and not a “range”. Where uncertainty exists, we recommend that the clinic handles this risk by adding a specified amount above the average onto the estimate. By limiting price “ranges” to exceptional cases, we gain clarity and efficiency. In this case, the invoice will be identical to the estimate as a rule. If the person who made the quote forgot an item, it is not the owner’s fault.

– The estimate is of great help in internal medicine, but it is not always technically possible to determine the amount of care required until the end of the problem encountered, especially for the most serious cases, such as hospitalisation of the animal. In this case, estimates can be recommended that present the budget for the first part of treatment, allowing for initial informed consent. When the initial care is at 80% of the original estimate, the vet in charge will re-examine the case and, if it is likely that the budget will exceed the planned amount, he will draw up a new estimate and contact the owner for renewed consent.

2. If, during the consultation, another element of service appears necessary in order to clarify the clinical examination or diagnosis (radiography, ultrasound, sampling and analysis etc.), it is necessary to explain this, the results expected and the price to obtain informed consent. It takes a little

time, but avoids a lot of misunderstandings and even subsequent conflicts. Obviously, the detail will be proportional to the price of the service: it will take a little longer to present the details of an MRI and obtain the consent of the client than for an x-ray. Any additional service accepted by the client should be explained in full. For example, “the result of the Complete Blood Count we have done shows normal values for leukocytes, which allows us to rule out the hypothesis of an infection.”

3. Finally, at the end of the consult and before showing the client back to the reception desk where a member of the team will take care of the bill, we recommend that the vet summarises the actions he has taken and their price and states the total amount which, logically, is just the total of all the items to which the owner has previously agreed.



Communication afterwards

Once the client has left the building with their pet the challenge is to ensure that the excellent client experience continues and that the client remains an “Active Client” and does not become a “Lapsed Client”.

A) Education

Better-educated pet owners are better clients and have animals with higher welfare levels. It is in everyone’s interest to educate owners. It is essential that veterinary practices take on this role of “Educator”; whilst most veterinary practices instinctively fulfil this role offline, many do not seek to occupy the role of “educator” online, not only is this missing a chance to get important messages across to owners but it also leaves a void which will be filled by other, less qualified people.

The website should have a resource that owners can turn to for more information about disease and management, it can be very time-consuming for practices to keep this up-to-date so it is worth considering commercially available plug-in options; some of these are very comprehensive and always kept up-to-date. Interactive symptom guides are useful so that if clients are worried about their pet they can discover how quickly they need to seek veterinary attention, giving peace of mind if it can wait until the morning and ensuring that animals that need urgent veterinary care receive it in timely fashion. Blogs are helpful for profiling current

events within the practice and seasonal issues, case studies work particularly well here, owners tend to be more interested in the human, animal and emotional side of the story than the clinical details and it is still possible to get across any important educational messages in this way.

The Facebook page is a fantastic way to slowly educate owners and to highlight any local or seasonal issues. Posts should be written in a more informal way than on the website and should be designed to prompt a conversation rather than being a one-way broadcast.

“Posts with images usually get more engagement than straight copy.”

Posts with images usually get more engagement than straight copy, consider adding using photo-editing software to add the post to an image, the practice logo can be added

so that when shared the practice logo gets more exposure for instance.

Videos work well on Facebook, they do not have to be high quality, directed or long, very short videos of patients or staff work brilliantly and are easy to produce. Experimenting with taking a short video instead of a photo can produce interesting results.

Quizzes can be built in-house using software such as Quizrr or with the help of an external agency. Quizzes can coach the person taking the quiz, so that they learn as they go, they can then share the results of their quiz on their own social profile, increasing the audience and thus the exposure of the quiz. Quizzes can be serious or lighthearted ranging from “Poisons Quiz” to “What’s your Dog Personality — which breed of dog are you most like?” In designing the quiz it is important to consider what the audience are interested in and tailor it to their interests.

B) Avoiding the price checking

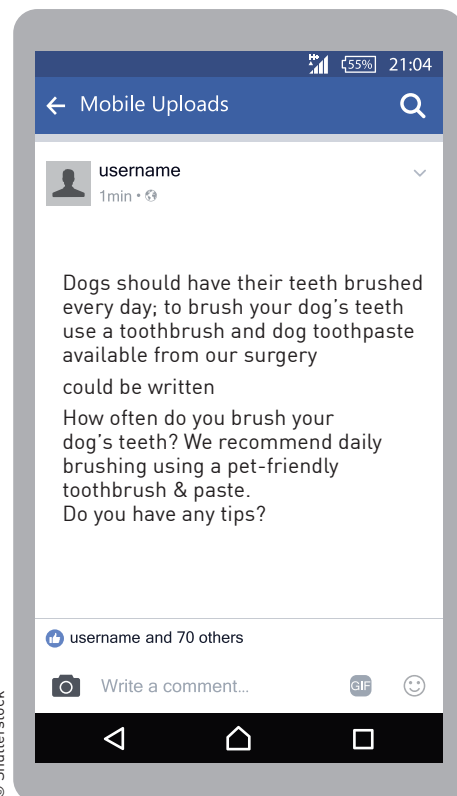
Clients with healthy pets can go for a year between annual health checks without visiting the vet practice. This can be dangerous as loyalty can wane over the course of a year and the owner may be tempted to price check or look at alternatives when the next annual health check or vaccination is due. Keeping in regular contact with clients helps reduce the risk of this happening and may mean clients come in more frequently.

Facebook can assist here; by posting regular stories about staff activities in the practice including news and events owners can feel more up-to-date with the practice. If clients can be enticed to join in with activity on the Facebook page the practice can become part of the daily life of the client. Posting details of staff leaving, new arrivals, locums and

staff on maternity leave means that when the client arrives at the practice after a long break all the faces they see are familiar even if they haven’t ever met them before. Knowing about events that have happened in the practice, for example staff getting involved with charitable events, unusual cases or new equipment can give clients something to talk about when they go into the practice and make them feel more relaxed and like they are amongst friends.

Email marketing is an effective way of communicating with clients. The limiting factor for many practices is the number of client emails on the Practice Management System (PMS), the whole team must understand the importance of collecting the email addresses and feel comfortable asking the client. When sending emails use an email marketing platform, these produce professional looking emails and provide statistics. Email programs such as MailChimp and Campaign Monitor are relatively low

Example of an informal Facebook post.



cost and easy to use. It is worth authenticating your server, so that the receiving account recognises that the sender is legitimate, this is a process called DKIM and makes it less likely that emails are filtered out into the SPAM folder.

These email platforms will also provide detailed statistics on how many people are opening your emails, and how many are not delivered. Statistics you may want to monitor include:

- “Bounce” — non-delivery of the email
- “Soft Bounce” — non-delivery because of problems with the recipient’s email, *e.g.*, Mailbox full. There is no way to control this, most email platforms will keep trying for 72 hours and then give up.
- “Hard Bounce” — non-delivery due to the email address not being valid. A high hard bounce rate may reflect a problem with the accuracy of the email addresses on your system.
- “Open Rate” — the percentage of people opening the email, this will be affected by how appealing the subject line is as well as how people feel about your brand
- “Click through Rate” — the percentage of people clicking on links within the email. A high click through rate is a good sign that the content is interesting and engaging to the users

It is good practice to segment the database, that is send the email only to relevant people, for example an email about a promotion on cat food should only be sent to cat owners. Email can be used in a more overtly commercial way than Facebook; offers and promotions are usually better received via email. Consider combining updates and news from the practice with offers and promotions to entice owners back into the practice as frequently as possible.



Example of a Facebook post with image and logo.

Email is a highly effective tool for building up online reviews, use the PMS to download email addresses of clients who have seen a vet in the last month, filter out those who have already been asked for a review and email a simple link to a prefilled review form. For the purposes of collecting reviews many practices choose to filter out those that have had pets euthanized, instead sending these owners hand written cards.



CONCLUSION

Veterinary practices are judged by clients on the quality of the contact with the vet and the staff. In large practices, it is advisable to define processes to ensure a consistency in the pet owner experience. For instance, the consultation should follow a clear structure to make sure the client is “on board”. Finally, the physical aspects of the clinic help a lot and require investment.

STRATEGY AND TOOLS

This chapter will give you practical tips (what to do, what not to do, main pitfalls, etc.) on blogs, websites and social media and how to encourage clients to leave positive reviews on the web, with the goal of creating synergy between the different tools. We will also outline general considerations about communication including branding and consistency.

KEY POINTS



Webmarketing strategy

The first step in developing an Internet marketing strategy is to understand the audience, How old are they? What Gender? Are they professionals? Do they have families or are they retired? Which types of pets do they own? How old are those pets? Some of this data can be found in the Practice Management System (PMS) however information such as owner age and status is unlikely to be available, Facebook provides detailed demographic information about the page's audience but often it is worth running a client survey to find out more details about the likes, dislikes, and demographics of your clients. Bear in mind that the demographic of people you wish to target to become new clients may be different to your existing client base. "Personas" are a useful tool used in Internet marketing to visualise these statistics. They are fictional people chosen to represent a large section of the client base, this is not a scientific process and not everyone will be represented however they are a very useful tool.

"Personas" can be used across the Internet marketing strategy, for example, to test a website. "Would Maxime be looking at the website on

his mobile?", they can also be used to design promotions, e.g., "How could we reach Maureen to explain the importance of a dental check for her cat?" See examples on following page.

Establishing the aims of the Internet marketing strategy and the Key Performance Indicators (KPIs) to measure performance is the next step. The beauty of Internet marketing is that it can be measured; success can be quantified and rapid feedback can be provided as to what is working and what is not. High level KPIs such as New Client Acquisition are affected by too many other factors to be useful as the sole measure for the success of an Internet marketing campaign, these top level KPIs can be translated into a series of more focused KPIs which are more useful for day-to-day management of digital marketing. If these low level KPIs improve the top level ones will improve alongside this.

Examples of Top Level KPIs (New Client Acquisition) translated into Digital KPIs

- New Visitors to website (Google Analytics)
- Number of Likes on Facebook Page (Facebook Insights)
- Reach of Facebook Page (Facebook Insights)

- Google My Business Insights Views (Google My Business)
- Number of online reviews generated/month
- Online client experience
- Time on Site (Google Analytics)
- Facebook Page Engagement (Facebook Insights)
- Open Rate of Emails (Email Marketing Platform)
- Click through Rate Emails (Email Marketing Platform)

Brand

The “Brand” is the designs, communication style, vision and values that identifies the practice and differentiates it from others. The brand should be consistent in all communications and across all platforms.

Brand — areas to define


- Mission statement — a short statement summarising the practice’s purpose and the service it hopes to achieve
- Strapline — a short slogan that encapsulates the practice’s values
- Logo
- Font
- Colours and shapes
- Tone of voice — e.g., Friendly, Professional, Informal etc.

Communications calendar

The messages that you communicate via Internet marketing will be more effective if they are used across all platforms, a communications calendar will help to achieve this. This level of planning also makes it easier to keep your Internet marketing strategy running when the practice is experiencing busy times or there are staff changes. The communications calendar should have themes or promotion headings for each month and then details of how this will be executed differently across each platform.


TYPICAL MONTHLY CALENDAR

	July
Call to action	Come in for dental check
Key messages	Signs of dental disease, how to brush
Blog	Dental, what’s involved Before after comparison
Facebook	Blog, stimulate conversation in community about tooth brushing, signs of dental problems
Email	Free dental check
Video	Video showing how to check dog’s mouth for signs of dental problems




Maureen

- 65–75
- Client
- Retired
- Lives alone
- Cat is only pet
- Cat is regularly vaccinated but not treated for fleas or worms regularly
- Does not own smartphone
- Has Facebook profile to keep in touch with grandchildren
- Email user




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Maxime

- 25–40
- Just married
- Cat is insured
- Vaccinations current
- Just moved to the area
- Only pet is Maine Coon
- 3-year-old with hip dysplasia
- Smartphone



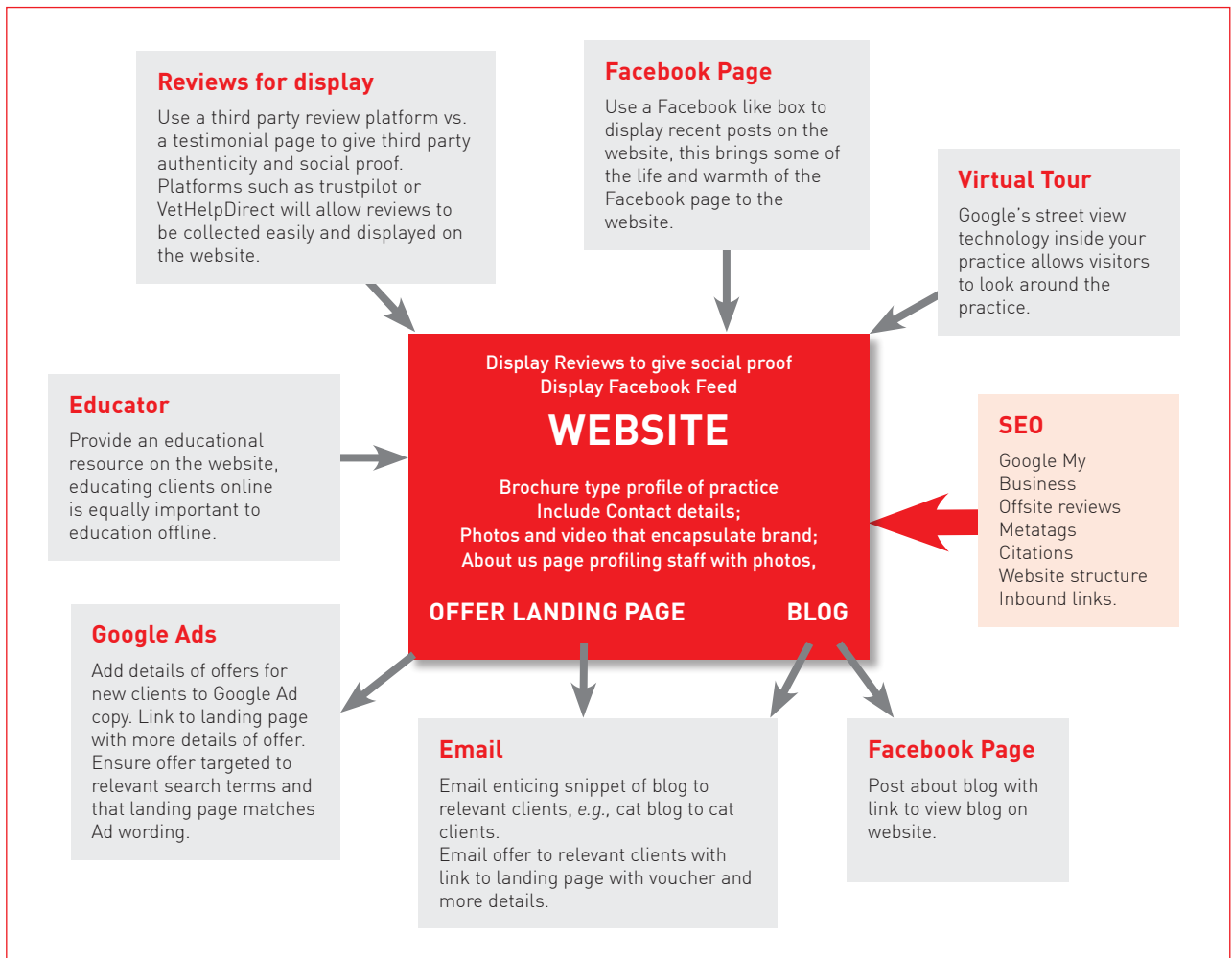
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Example of “personas”.

Multichannel marketing

The website, social media, search and paid ads work most effectively together, this is known as “Multichannel Marketing”. The brand and the communications calendar are the tools to achieve this and the website is an essential part of this as it acts as the hub of the multichannel marketing strategy. Content can be posted either on the blog of the website, or an especially designed landing page, this can then be linked to via social media, email and paid ads.

For example, a promotion around free dental checks for cats could centre around a blog on dental issues in cats, discussing the difficulty of knowing if a cat was in pain; a case story and photos might give this a more engaging edge. A post could then be written on Facebook with a key message from the blog and linking to the blog on the website for more information. A photo from the blog could be



Infographics showing the role of a website.

posted on Instagram with appropriate hashtags, an email could be sent out to cat owners only with an engaging title and a link to the blog. A landing page would be created on the website with a downloadable voucher for a free dental check for owners to take in to the vets or share with a friend. A post about the offer could be made on Facebook with a link to the landing page; further posts could be written throughout the month profiling cats that have been in for the free dental check. Paid ads could be used on Facebook to ensure that the maximum number of people see the voucher and Google paid ads could be amended to profile the free dental check, these would be set up to show if anyone searches for information on cats teeth or "cat vet". The blog and voucher should also assist with Search Engine Optimisation as websites may link to the page if they perceive the content to be valuable.



The brand and the branding

When vets practised alone, they did not need a brand, or more precisely, their only brand was their own name. Now that they practise mostly in teams and increasingly often in large teams, the brand of the clinic and its various attributes constitute a major tool. The brand, often associated with a logo, whose conditions of use are defined in a graphic chart, creates an identity under which clients will know the clinic and recognise it from others. With the development of large groups of clinics and intense marketing, the level of exposure to brands has grown in the veterinary sector and it is important that independent clinics or local clusters are not left behind.

This is not the place to detail the recommendations for choosing a brand and an identity, but it is clear that the client experience is optimised by systematic and consistent use of that brand and identity, called

“branding”. The objective here is to maximise the exposure of the client to the brand, within a consistent framework and in accordance with the charter that the clinic has established. Specifically:

- Developing a brand and an identity has a value. For example, if it is important for clients to identify the name of the vet, nurse or receptionist they have previously dealt with, this identification should not be at the expense of the clinic. All the communication media (badges, prescriptions, signatures, etc.) will therefore indicate the name of the person whilst recalling the identity of the clinic.
- In general, the name of the clinic and its logo will be consistently present on all the communication tools, but also on signs used by the clinics: outside the premises (signage, plaque, insignia, etc.), to inside the premises (on a wall, on the furniture, on the elements of interior signage, etc.), on all the documents (leaflets, prescriptions, estimates, invoices, etc.), badges, uniform and vehicles (especially if the vets conduct outpatient care). Each of these appearances of the graphic and the logo will of course conform to the brand guidelines (hence the importance of providing a colour version and a black and white version).
- Branding extends to different media: website, Facebook page, email signatures. This includes telephone communications, whether an incoming call (which will ensure that all people answering a call correctly mention the name of the clinic), or pre-recorded messages, such as call-waiting messages or answering machine messages. If the clinic posts messages in the reception or waiting area, in a paper or video format, a format that integrates the visual identity of the clinic is always preferable to another that has only that of a third party, for example a partner supplier.

As is often the case, a systematic, discreet, consistent and tasteful presence is better than disparate, inconsistent and/or ostentatious elements.

●●● How to better use your PMS



Most veterinary practices do not get everything they can out of their management programmes. The most used feature among clinics is the “point-of-sale terminal”, *i.e.*, recording transactions for both services and products made with clients, for both payment and cash control purposes as well as for calculating tax obligations. Another part of the PMS that veterinarians are accustomed to using on a regular basis is that of client and patient records, where they record the key medical and administrative information. It is also common for



A SPECIFIC CASE THE “3-R” TECHNIQUE

American consultant Tom Catanzaro popularised the so-called “3-R” rule. The central idea is that the clinic must always take the initiative in client relationships and pro-actively propose the next contact.

Recall — Recheck — Reminder

Catanzaro argued that, if at one given point we were to analyse all client records at a clinic, those for which none of these three actions are scheduled (recall, recheck, reminder) are likely to be lost... That is, if we as veterinarians do not decide when we want to contact a client again (to tell them something by telephone, to review their pet or to remind them of the need to follow a preventive treatment), the client will likely forget to do so.

clinics to use the vaccination reminder function, automating personalised notifications to clients, reminding them that they need to bring their pets in for revaccination.

However, there is another whole set of other “good practices” related to the usage of PMS that is not commonly present in many veterinary practices. Some examples are:

- Periodically recording patients’ body condition and dental condition. Unless we do this, how can we know whether or not we have already discussed these issues with our clients?



- Systematically recording in the patients' clinical records or file whenever a recommended treatment is refused or postponed. Failure to do so makes us lose future sales opportunities and can cause frustration and a perception of disinterest in clients, by repeatedly offering them things that we have already discussed with them in the past.
- Identifying all transactions made with clients and patients. Sometimes in over-the-counter transactions (in the area of product sales), with the intention of speeding up the process, a fictitious client is created. This client is named "various clients" or "over-the-counter sales", and most over the counter sales are indiscriminately attributed to him/her. The result of this habit is that we lose valuable information about our clients' buying behaviour (when they came, what they purchased). Also, it can distort important KPI's such as active patient count or annual spending per patient.
- Consistently filling in the diagnostic fields associated with visits/cases, ideally with a standardised list of terms. Without this, we lose the opportunity to ascertain the prevalence of various diseases and conditions at our centre (per 1,000 visits) in order to detect possible diagnostic gaps. We also lose the opportunity to generate patient lists classified by diagnostic groups, which can be very useful in creating segmented communications, offering them specific services or products, etc.
- Producing task lists, such as vaccination or deworming reminder calls, specialist appointment reminder calls, post-surgery calls, etc. Most management programmes allow for automated reminders to be customised and associated

with specific task lists. Many veterinarians have the misconception that the "reminder" feature of their PMS is only useful for generating vaccination reminders... this severely limits the use of reminders. Reminders are useful for every preventive care service (including neutering or dental cleaning) as well as products (flea and tick, wormer...) and with chronic disease follow-up (osteoarthritis, atopy, cardiology...)



Is there an optimal ratio?

The proportion between vets and support staff (assistants, receptionists, administrative staff) varies considerably in various countries around the world.

In countries where there is a relative undersupply of veterinarians, it is common to find high support staff to vet ratios (3:1, 4:1). This is a result of the economic logic of optimising the company's most costly resource: if a veterinarian costs 3-4 times more than an assistant, it makes sense for the veterinarian to focus on tasks that generate his/her centre's most financial and professional value: diagnosis, complex clinical procedures and treatments offered to clients. Meanwhile, support staff focus on related tasks, freeing up time for the veterinarian: welcoming clients, taking medical histories, simple tests, returning telephone calls, etc.

In contrast, in countries where there is an oversupply of vets, the opposite occurs. As it is just as costly (or, unfortunately, sometimes even



As it is just as costly (and sometimes even less costly) to hire a young vet than a well-trained assistant, ratios of support staff to vets substantially decline or are sometimes even reversed.

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less costly) to hire a young vet than a well-trained assistant, ratios of support staff to vets substantially decline or are sometimes even reversed (it is not uncommon to come across clinics with 4-5 vets, 1 assistant and 1 receptionist). Obviously, in these countries, the vets end up doing practically all tasks at the centre (both clinical and non-clinical tasks).

That said, there is no empirical evidence that one model necessarily results in a better or worse client experience over another. In all these countries, we come across clinics that love their clients, as well as clinics that drive them away, regardless of their ratios between various staff profiles. The type of model is more a result of the economic structure of these markets than a planned decision made by the owner of the veterinary practice. What is clear is that both models present very different management challenges:

- In the “undersupply of vets model” (few veterinarians very well supported), the key is that the client does not perceive the vet as a distant, overly busy professional, who is very task-focused (case-focused) but not so relationship-focused (client- and patient-focused).
- High value client interactions that should be managed by the vet, no matter how costly is her/his time:
 - Presenting estimates for complex (expensive) procedures
 - Communicating the findings of important tests
 - Asking the owner for permission to change a previously agreed treatment plan
 - Recommending to the owner referral to a specialist
 - Communicating a negative unexpected outcome of a medical procedure
- In the “oversupply of vets”, (multipurpose veterinarian who interacts intensely with the client as he/she personally deals with almost all tasks) the challenge involves getting the client to maintain their professional respect for and give credibility to the vet. It is not easy to convince a client that the same vet who opens the door, answers the telephone, charges you at the desk and collects your cat’s excrement is, at the same time, a reputable surgeon within the industry.

“Preventive medicine offers an opportunity to integrate the health care of the animal over time.”

●●●● Take the long view in client relations

General veterinary clinics cannot grow based solely on occasional relationships: a client takes his pet to the clinic, the clinic looks after it, the client leaves



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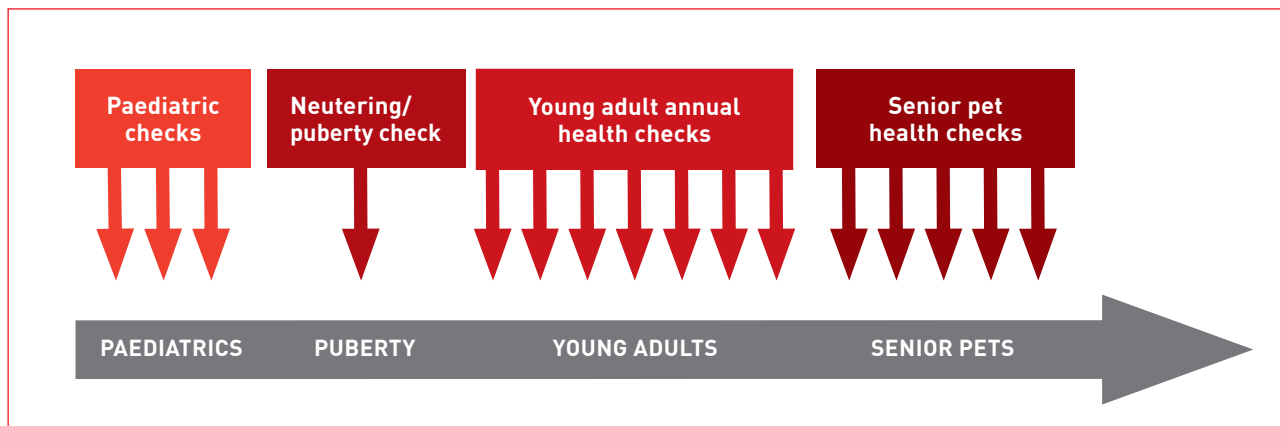
The follow-up of the cases in progress is important to ensure the success of the work of the clinic’s team. For instance, “we recommended a dental cleaning last year, have you thought the matter over?”

satisfied after a superb experience. It is best that the first opinion veterinary surgeon is active over the long term, throughout the lifetime of the animal. To achieve this objective, the task of managing the client’s experience cannot be limited to optimising each contact; it is also important to give the client perspective over time and a proven benefit so that he returns to the same clinic for all the needs relating to the health of his or her animal.

It is possible to separate a pet owner’s experience of veterinary care into three categories: preventive medicine, general medicine and surgery, and specialised services, in which we include emergencies.

Preventive medicine offers an opportunity to integrate the health care of the animal over time. It consists of a succession of sequentially programmed services which make up a chain of care adapted to the different stages of life of the animal: paediatrics, puberty, young adult, senior animal and geriatrics. The process of preventive medicine is by nature very loyalty-inducing and allows the vet to create a positive experience for the client by describing the preventive care offering of the clinic and by organising the sequence of the various services. Two methods can be used to improve the client’s experience in prevention.

- The traditional approach is to sell services one after the other, with a relatively short-term perspective. The clinic’s job is thus to ensure that each service is well prescribed at the end of the previous one, in the form of a “presentation of the next step, its objectives and its content” and



Providing a lifelong perspective of preventive medical follow-through represent an important dimension of client experience improvement.

then a reminder of this next step two to three weeks before the deadline by post (less and less frequently), e-mail or SMS. For example, at the end of the final paediatric consultation of a puppy, the vet will prescribe, depending on his preventive medicine offer, pubertal consultation or neutering or the first annual health examination. In each of these three cases, the vet will offer the client a reminder to help them avoid missing the deadline, which would be detrimental to his pet. Even, in this traditional approach, veterinary clinics should offer a global view on the course of prevention throughout the pet's life, for instance a leaflet given to pet owners the first time they come to the practice. Furthermore, the practice's team should also follow up on the message of the same leaflet at every point in the prevention pathway: *e.g.*, during the first young adult annual health check or the first senior pet annual health check.

- The development of prevention plans consists of commercialising service packages (and some products, in particular parasite control products), covering the animal's prevention needs over a period of time, generally one year, paid most often by monthly bank withdrawals. This technique allows clinics whose preventive medicine services are at a high level to increase client loyalty by providing their animals with an optimal level of prevention for a predictable, monthly budget. This method of marketing preventive medicine also creates a positive client experience by demonstrating that the clinic is making every effort to improve the health of the animal. Nevertheless, there's still a need to offer a broader perspective of prevention throughout the pet's life, for instance by introducing the different wellness plans offered in the clinic according to pet's life stage (junior, young adult, senior).

Diseases or accidents are one-time and unpredictable events and it is difficult to optimise the client experience by translating it to a long-term basis. However, it is possible to do this in two ways: when a case needs not only a one-shot consultation but also a consultation and one or several re-checks, and simply by keeping the animal's health history thus positioning oneself as a family vet who actually knows this animal.

- The follow-up of the cases in progress is of great operational importance to ensure the success of the work of the clinic's team. It is based on the continuity of care, either with the same practitioner or with several vets of the team, but always through an exhaustive sharing of the relevant information, using the medical record on the practice management system (PMS). All PMS systems offer programmes that include this feature, but all team members must be trained in its use and instructed on the information to be included in the animal's record. If it is up to the owner to relay between two vets by explaining to the second what was said or done first, the clinic runs a great risk of damaging the client's experience and creates the impression there would have been no more difficulty if they had gone to two different clinics. On the other hand, if the animal's information is efficiently distributed to the team and each vet can understand the history, then the owner will see the advantage in deepening his relationship with the clinic.
- This observation can be generalised to all contact between the clinic, from a preventive medicine service to when the animal is sick or injured, consider a simple purchase at the counter, pet food for example. It is vital that the client reflects on every time he is well not just in any veterinary clinic but in his clinic, that is to say the one that knows his animal. This is achieved by consulting

the animal's record before each consultation in order to bring up a point in the animal's medical history with the owner: "How did the bronchitis in February resolve?" Or "We recommended a dental cleaning last year, have you thought about the matter?" Or "I see that Fluffy has put on two kilos since last year..." Similarly, at the end of the consultation, summarising the main points and logging them in the medical file in a very obvious way shows the client the benefits of follow-up over time.

Finally, specialised services are most often referred to a clinic or hospital that will provide them directly, so it is difficult to see how the general practice could enhance the client experience at that time. However, even though it does not provide these specialised services itself, there are opportunities to strengthen its relationship with its clients. Specifically, if the referral process is conducted by the first opinion clinic — good choice of specialist, transmission of medical information, management of the follow-up coordinated with the specialist, etc. — it is to the first opinion vet that the owner will show satisfaction and gratitude! This also applies emergencies requiring critical care or simple services but to be provided outside the normal opening hours of the first opinion clinic. Once again, if the solution suggested by the clinic is of high quality and the coordination between the general practitioner and the emergency centre goes well, it is the former who will benefit from the recognition from the client.

On the balance sheet, we can see that the first opinion clinic can provide its clients with all their health care needs, most of which are treated internally and some are referred to specialists, but always at the initiative and under the auspices of the "family vet". Providing a lifelong perspective of medical follow-through represent an important dimension of customer experience improvement.



Managing complaints

A) Face-to-face management

Even if you are a magician in communicating with your clients, there will always be somebody, that feels unfairly treated, misunderstood, disrespected or in any other way not happy. Don't worry — that's human, there just isn't a "one size fits all" way of communicating that prevents negative emotions.

Here is a standard procedure on how to address difficult situations with clients:

- Hear your client out and focus on listening, don't interrupt till the end (you may take notes).
- Express understanding by saying: "I can

understand that you are angry (disappointed, unhappy etc.). If that would have happened to me, I would also be angry!"

- Take control: "I suggest, we sit down and sort out what has happened and find a solution, OK?"
 - If the client is on the phone, try to get him to the office to talk eye-to-eye, that's always better than on the phone.
- Move the client to a separate room without audience to analyse the situation.
- Take time, sit down and investigate the matter and find out what went wrong.
 - If the client has been angry without reason, the matter is already resolved.
 - If it turns out to be the practice's fault: apologise and give a little present.

"Never take complaints personally!"

Never take complaints personally! Think: "It's not about me. Something went wrong and now I get the chance to set it right."

Most of the difficult situations that occur in every day practice are based on misunderstandings because of unclear communications. If you feel you have a lot of "events" with unhappy clients, maybe it's time to take a closer look at how your client communication is set up and how to improve it.

B) Dealing with negative comments online

If you run a veterinary practice you will at some point in time become the victim of negative comments online. This can be very upsetting for staff and owners alike and it is essential to have a policy in place before this happens so that staff are ready to deal with the problem in a calm and non-emotional way.

If an unhappy client is on the phone, try to get him to the clinic to talk face-to-face.



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is said to be the number of people one unhappy client will share his dissatisfaction with.



Useful feedback can be garnered from some negative reviews, and where the negative comment is reasonable and not offensive it's worth handling as openly and transparently as possible. Often a negative situation can be transformed into a positive one by showing that you care enough to respond and take action.

Straightforward problems

- Deal with the problem as quickly as possible.
- Respond publicly where appropriate.

Constructive criticism

- Remember to thank the client for the suggestion.
- Listen to the perceived problem.
- Act if appropriate and keep the client updated on the page.
- If it is not appropriate to act or change your procedure explain why.

Reasonable complaint

- Remember to thank them for bringing the issue to your attention.
- Be positive, avoid linking negative words and comments to your name.
- Describe steps being taken to rectify the problem.
- You may find that loyal clients leap to your defence, after all within social networking pages, these are your "fans" and "followers"

Unreasonable complaints, unconstructive criticism or spam postings

- If possible contact the client privately.
- If the comment is on your Facebook fan page delete it as quickly as possible.
- Do not respond publicly on Twitter. Use a private "Direct Message" or contact the client through traditional media.
- Ask the client not to post any similar comments.

If you need to take further action you can

- Ban people from posting on your practice's

Facebook fan page (instructions below).

- "Report" them on Facebook pages outside your control.
- Click "Report" under their post.
- Block them from following you on Twitter, although they can still mention you they can't read your tweets.
- If you believe that a comment on an external website is defamatory you can complain to the website containing the comment.
- If you are not satisfied with the response from an external website you can complain to their Internet Service Provider (ISP). Find out who this is using WhoIS register <http://www.whois.net>. ISPs will often close sites down or ask them to remove information to avoid legal action against themselves.

Managing comments/banning users

- If you want to delete a comment that has been left on a post on your page, hover over the comment and click the "x" (hide). From there a small menu will appear, you can delete the post, report the post or ban the user from your page.
- If somebody has posted a comment on your wall (which can be found in the "visitor posts" box on the right of your page below the cover photo) that you wish to remove, hover over the post and click "x" and then click "delete" or "report/mark as spam."

●●●● The importance of consistency

As we have seen, in order to improve the client experience, the clinic will undertake a large number of actions in different areas, edit documents, use different media and introduce many procedures or protocols. In real life, it is important not to lose sight of the importance of the consistency between all these elements and the actual behaviour of the different members of the team.

To put it simply, one of the effects of communication is to strengthen the expectations of clients. However, satisfaction is a feeling that results from the perceived gap between expectations and

“When something is promised, that promise must be kept.”

the actual delivery. In other words, whenever the client’s experience is improved, the expectations are reinforced for the next time. Obviously, this is not to conclude that we must

be satisfied with mediocre performance so as not to risk disappointment next time!

The main take away from this requirement of consistency is that when something is promised, that promise must be kept. So it is a question of promising only what one is able to deliver in the long term, while aiming for a high standard. It is useful to keep some common errors in mind:

- When a clinic has just opened and its activity is still limited, or if the load is reduced on a given day, the team may tend to devote a lot of time to each client. This may improve the experience of clients who come at this time, but if one is unable to maintain this level of performance when the activity increases or is simply “normal”, the initial benefit can quickly change into dissatisfaction.

- Likewise, statements that aim high about the company’s vision, mission or values are helpful only if they are effectively verified in everyday life, otherwise they can backfire. It is therefore important to pay particular attention to the on-boarding of new employees — whether a receptionist, nurse or vet — through initial training and close coaching when they join the team to ensure that they meet the requirements that the clinic has set.

- Generally speaking, one communicates much more than one believes, through behaviour (punctuality, order, clarity, etc.), through day-to-day documentation (an estimate or an invoice can have much more impact than a professionally produced leaflet), by the state of maintenance, cleanliness of the premises or the absence of bad odour.

Finally, the most serious inconsistencies are those that affect the messages of different team members to the same client: such as a receptionist who explains the price to pay for several minutes before a vet, or even the owner of the clinic, grants a “one-time” discount; a vet who prescribes quarterly deworming to an animal while his partner explains that “twice a year”, that should be enough...



CONCLUSION

It is suggested that an agency specialized in veterinary digital communication is used to assist your website and social media. Practice Management Software (PMS) offer more and more options for communicating with your clients. Finally, the two most important points are to be consistent in your communication with the clients, and for owners of kitten or puppy, to give them a long-term view of the veterinary services they will benefit from during their life.

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