



Veterinary Practice Consultants®

"A COVENANT WITH QUALITY"

VETERINARY PRACTICE CONSULTANTS®

Update!

a publication of Catanzaro & Associates, Inc.

Winter 2005



CONTINUING EDUCATION



FOR THE WHOLE TEAM !

It has always been our mission focus to train teams, to allow doctors to prescribe, diagnose, and do surgery.

We have developed team-based seminars, offered by our consulting team, as well as guest consultants.

In 2006, we will offer three meetings; enclosures explain the details of what is coming your way!

☺ **Shirt Sleeve Seminars©**

- ▶ Two a year - Spring & Fall
- ▶ April - Reno, NV
- ▶ Sept. - Minneapolis, MN
- ▶ 18 hours of team CE
- ▶ Team-based & Interactive
- ▶ 60-day Phone Follow-up

☺ **Seminars At Sea©**

- ▶ Destination - Caribbean
- ▶ June 17th-24th
- ▶ 24 Hours of Leader CE
- ▶ Exotic Ports of Call
- ▶ Luxury Cruise Lines
- ▶ 90-day Phone Follow-up



Tom Cat Tips **Bad Dog - SIT - STAY**

As we sit back and look at what we provide our clients, it is evident that we are not making "behavior management" easy enough for most practices. The Blackwell text, ***Promoting the Human-Animal Bond in Veterinary Practice***, has over 90 pages of behavior management training in the appendices (two appendices specifically for cats), but that does not seem enough to get practices to add the service.

We are in a caring profession, and our feelings are close to the surface. If we can help clients select the proper pet (AVMA brochures are excellent), they are ours for life, unless we fracture the bond. About 90 percent of all dog owners believe they have a behavior problem, yet we do not aggressively try to resolve that problem. Instead, the USA shelters and veterinarians kill over 6 million dogs a year due to behavior problems.

Sure, we were raised in an environment where practices sold "stuff"... we sold vaccines with 'exams'; rather than charging for 'consultations' then scheduling vaccine visits with our nursing staff as short, economical in-n-out procedures (extended DOI vaccines are forcing many practices to finally accept this model). After the AAHA Compliance Study was published (2003), it became very evident that most practices were not even good at selling 'stuff' (AAHA showed practices were losing over \$600,000 per doctor per year in unmet wellness needs). Service money has exceptional net (a practice's staff time already paid for), while product net is limited, and most any practice can usually be undersold. Peter Drucker, in his text, ***Post-Capitalistic Society***, says the only thing we have to sell in America is knowledge, since the third world countries will always produce something for less than we can.

Behavior is pure knowledge sharing. Most pet parents learned pet care from their parents, who were first or second generation away from farm dogs and barn cats; they do not know what they should be doing. Negative reinforcement training techniques (e.g., kneeling the chest of a dog jumping up, nose slap and "no"

(Continued on page 6)



Adult Learning Styles

Susan Stratman, CVPM



When developing team training sessions, variations in adult learning styles need to be addressed because the learning styles of our team players are different. How do you get to them all? How do you need to alter your learning objectives and presentations to meet the diversity in the group?

The adult learning styles are: **Observation**, **Assimilation**, **Application**, and **Accommodation**. If the learning style is Observation, the person observes rather than takes action and prefers working in groups to gather information, listening with an open mind, and receiving personalized feedback. They learn by viewing concrete situations from many different points of view. A person whose learning style is Assimilation, can take in large amounts of information and put it into concise, logical form. They prefer lectures, readings, exploring analytical models, and having time to think things through. These individuals learn by thinking. In the Application learning style the person combines abstract concepts into practical applications and prefers to experiment with new ideas, simulations and practical applications. This style learns by doing. In the adult learning style of Accommodation, the person is learning primarily from “hands-on” experiences – prefers to work with others to get assignments done, to set goals, and to test different approaches to completing a project. They learn by experiencing.

How do you get to all of the different learning styles? Note the learning styles within the group by having members identify which adult learning style pertains to them. Once you have this information then you can go to the second question - how do you need to alter your learning objectives (3-5 outcome/action oriented elements for any session for the trainer, not the participants) and presentations to meet the diversity of these learning styles? Creating diversity in activities and creating diversity in your presentations are going to be the answers.

Observation: are sensitive to people's feelings and values, activities: gather information, brainstorming, discussions, role playing, group work, listening and sharing ideas.

Assimilation: enjoy more traditional classroom style, activities: organizing the information, analyze quantitative data, direct instruction, opinions from experts. **Application:** action people, activities: creating new ways of thinking and doing, choosing best solution, set goals, decision makers, get straight to the point, hands on activities, “just-do-it” summaries and bullet points.

Accommodation: make commitments, influence and lead others, activities: seek new opportunities, become personally involved, discover it themselves, self-directed, can deal with people.

The outcome goal of any training session is application to meet evaluation standards. Training sessions will be more successful when adult learning styles are taken into consideration.

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SEMINARS AT SEA

JUNE 17 - 24 2006

"The Team Opportunities"



The **VPC Seminars at Sea '06** will be a Caribbean cruise.

We have searched for affordable itineraries with our cruise director, complete with exotic ports of call, and developing new and exciting professional education experiences for 2006. We like the luxury living and dining accommodations of a cruise ship (it is good rehearsal for retirement) but this year, we also selected a time when the kids are out of school, and before hurricane season, so it could be a family vacation for building common memories. This ship has a climbing wall and skating rink and great "age-specific" activities when we are at sea. Please call Catanzaro & Associates, Inc. (303-277-9800), or e-mail Cat9800@aol.com), about the CE and seminar registration!

With the **Shirt Sleeve Seminars**, and the **Seminars At Sea**, we attempt to provide continuing education that is ABOVE the standard offerings. The true leaders of this profession need a special venue to explore the cutting edge of small business leadership and development. At the **Seminars at Sea**, we offer multiple National consultants, in a relaxed, luxury, social and educational environment. On the cruise ship, a new type of leader will be gathering, those who know that all work and no play make any doctor a grinch! These participants also want to see the future of veterinary medicine and their potentials in this profession (the Blackwell text, ***Veterinary Medicine in Transition*** "Preparing for the 21st Century, plus a couple VPC *Signature Series* monographs, will be the proceedings).

The cruise program offers the cutting edge of continuing education; a combination of a thinking adventure and mind stretching concepts. Each plenary (full group) seminar session is followed by small sized break-out discussion groups, with a skilled veterinary-exclusive consultant as the facilitator. A certificate for 24 CE hours is issued at the end of the cruise, and 90-days of follow-up telephone support is included to ensure assistance during implementation of your new concepts and ideas after you return home.

The **Seminar At Sea '06**, as with all other meeting registration and consulting information, is done through Catanzaro & Associates, Inc. (303-277-9800) VPC

BOOK REVIEW

Raising A Behaviorally

Healthy Puppy-

A Pet Parenting Guide

Suzanne Hetts & Dan Estep

Puppy hood only comes around once. What we do during your puppy's first 4 months of life will have a lasting and sometimes unchangeable impact on the dog's adult behavior. This text was written specifically for veterinary practices wanting to integrate behavior management into their programs and practice culture. It gives your team the critical knowledge needed to make the most out of these formative months.

Inside you'll find Drs. Hetts and Estep unique 5 Step Positive Pro-action Plan for dealing with major puppy issues from housetraining to getting along with other pets. In an easy to read format you'll learn:

- How to evaluate your puppy's behavioral health
- How to best socialize your puppy
- How to meet your puppy's behavioral needs
- Alternatives to "discipline" and saying "NO" over and over
- What's important and what's not when it comes to "dominance"
- A step by step guide to crate training
- And much more

This text is suitable both for puppy parents and for trainers, veterinarians, and shelters to distribute in their puppy classes. Large quantity pricing discounts are available.

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Letters of Intent in Veterinary Transactions

Ed Guiducci, JD

Letters of intent are frequently used to list the basic terms upon which the parties have agreed to consider buying assets or ownership interest before the parties incur the expense of having attorneys prepare the formal transaction documents and begin due diligence investigations. In veterinary transactions, a letter of intent typically comes into play after a round of initial discussions about the proposed transaction.

Reasons to Use Letters of Intent

There are many practical business and legal reasons to use of a Letter of Intent.

- ▶ **Financial Commitment to the Deal:** Signing a letter of intent, from a business perspective, indicates that each party is comfortable enough with the terms to spend the time and money that will be required to work towards negotiating binding purchase agreements.
- ▶ **Commitment to a Time Line:** A letter of intent will set forth a time line for negotiations to enter into purchase agreements, establish a deadline for completing due diligence investigation and establish a deadline for closing the transaction.
- ▶ **Non-Binding Terms.** Letters of intent for veterinary transaction purposes should be used to clarify the parties' agreement on basic terms and generally are drafted so that they are non-binding. This means that either party can change his or her mind and walk away from the transaction for any reason.

The only important exceptions to this are for confidentiality and no-shop terms, as follows:

- ◆ Confidentiality terms: Letters of intent should provide that all information that is disclosed to a buyer by a seller be kept confidential and returned to the seller.
- ◆ No-Shop terms: No-Shop terms are exclusive negotiation terms of a letter of intent that require a seller to notify all interested parties that he or she has entered into a letter of intent and that he or she will not negotiate to sell to anyone else unless the letter of intent is terminated. This provision is designed to give a certain level of protection to a buyer who is incurring expenses in conducting financial due diligence prior to having a formal purchase agreement.

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Does Your New Year's Resolution Include A Healthier Lifestyle?

Fitness UNLEASHED:

A dog owners guide to losing weight and gaining health together

By Marty Becker, DVM & Robert Kushner, MD

Book to be released the first week of May during *National Pet Week!*

Financial Wellness and the Diagnosis and Treatment of Common Financial Ailments

Terry Hall, DVM, CFP



This article represents the first article in a multi-article series designed to explore financial planning for successful financial outcomes. Future articles will address the following topics individually and in greater depth.

The beginning of a new year marks a good time to review your core financial planning strategies and make the appropriate adjustments to your planning that will enable you to meet your goals and objectives within your specified time frame. The following strategies represent areas of focus that are present in financial plans that create successful financial outcomes.

1. Develop and implement a written financial plan. Review your plan annually or more often, as life changing events occur. Compare your progress against your plan and make adjustments as necessary in order to facilitate the achievement of your financial goals in the necessary time frame.
2. Identify your financial objectives and define them in your financial plan. Create specific goals that pinpoint dollar amounts and time frames. i.e.: To achieve \$200,000 of savings (in today's dollars) in 17 years (Year 2022) to fund a four year private college education.
3. Structure income and expenses to allow for an annual savings of 20% of gross annual personal income. Consider utilizing a formal income and expense plan (budget), and compare actual earning and spending against preset targets on a monthly basis.
4. Ensure that all debt has a corresponding asset value that is equal to or greater than the outstanding debt. For debt that does not have a corresponding asset value that is equal to or greater than the outstanding debt, develop a structured, formal plan for eliminating that debt as quickly as possible.
5. Review all insurance coverage to ensure that earned income is adequately protected in the event of premature death or serious long-term disability. Make certain that your insurance programs are accomplishing the needs identified in your plan.
6. Review all wills, durable power of attorney, and medical directive documents for accuracy and relevance. Update all legal documents to reflect current goals.
7. Develop a formal investment strategy that incorporates all of your securities and real estate holdings. Ensure that your strategy accurately reflects your goals for accumulation, tolerance for volatility, and time horizon. This investment strategy will involve the maximum funding of all qualified retirement plans and supplemental non-qualified accounts as required by your lifetime financial planning model.

(Continued on page 6)



when biting, etc.) have been replaced by 'appropriate behavior' training techniques. For instance, the best socialization time for puppies is 3 to 12 weeks, and kittens are 2 to 7 weeks; these are very sensitive times in the lives of these companion animals, and pet parents need to know what should be done. We are professionals who see them first during this sensitive time, and veterinary practices can provide this service exceptionally well.

We need to be client-centered patient advocates, and we need to demonstrate behavior management from the very first visit. You need to greet a puppy correctly, use a food treat to coax them into a sit position, and then accolade the puppy; this astounds most every client, and makes them want more. The book review this issue discusses the Animal Behavior Associates (ABA) text, ***Raising a Behaviorally Healthy Puppy—A Pet Parenting Guide***, but this is just a starting point. We have worked with Suzanne Hetts and Dan Estep (ABA principals) over the years, and believe they are some of the best "practice founded" behaviorists in the business. ABA provides books, booklets (written for client distribution), video/DVD resources, slide presentations, audio CD's and even teleconference courses (www.AnimalBehaviorAssociates.com). Some practices use www.Dogwise.com for their behavior books, but there is not always a single philosophy or thread when using a distributor, so we prefer to recommend ABA, and the books they recommend on their resource list.

I believe that at least one person on staff needs to belong to the Society of Veterinary Behavior Technicians (www.svbt.org), just as I believe www.vspn.org should be made available to all staff (Veterinary Support Personnel Network (VSPN) is hosted by VIN, but is free to staff). The CD from Care Credit®, titled "The Veterinarian - the Other Family Doctor", allowed me to put into perspective the human-animal bond, why we need to say "need" and why we MUST become an advocate of the pet as a family member; it is still available from Care Credit® for free. The VPC *Signature Series* monograph, ***Building a Bond Centered Practice***, describes the practice culture needed for nurturing a behavior management program, as well as providing its' own CD as a tool kit for the staff.

We need to remember during these times of stress, "NO ONE CARES HOW MUCH YOU KNOW, UNTIL THEY KNOW HOW MUCH YOU CARE!"

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Financial Wellness... (Continued from page 5)



8. Evaluate your need for long term care insurance. Determine your resources for elderly care and the assistance you will require with your activities of daily living as you grow older.
9. Utilize your team of professional advisors (CFP, Attorney, and CPA) to help you coordinate and confirm your strategies and plans. Share your plans with them and invite their feedback. Give these individuals permission to hold you accountable to your plan.

This article is part of a series of articles from Terry Hall's Financial Briefs for Veterinarians, Practice Owners, Practice Staff and Family Members. For additional information, Terry can be contacted at: terry@terryhallassociates.com or 303.734.9500

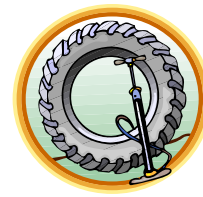
Terry Hall, DVM, CFP is a former small animal clinician/multi-practice owner and one of only a few veterinarians to have ever achieved the CERTIFIED FINANCIAL PLANNER PRACTITIONER™ designation. He has provided telephone and on-site financial management assistance to more than 1600 veterinarians and practice owners. He owns a financial planning practice in Englewood, Colorado that specializes in strategies for financial success for veterinarians, practice owners, practice staff and families.



Good to Great!

(No need to re-invent the wheel)

Steve Amsberry DVM



Last weekend I joined our 13-year-old son in his short course on leadership for Boy Scouts. As I listened to the presenter, I became even more aware that the basic leadership skills needed by any group leader are universal and timeless. Some of these 13-year-olds have already chosen to be leaders as they demonstrated budding leadership skills. The eleven leadership skills taught to Boy Scouts are a subset of the fourteen leadership skills we identify in ***Volume 1 of Building a Successful Veterinary Practice.***

Having experienced the scouting session on leadership on the heels of finishing Jim Collins' book, ***Good to Great***, the common thread of universal and timeless leadership skills was more evident. Take home message to reader: We benefit from incorporating the wisdom available in organizations and businesses outside the veterinary profession as we grow the leadership skills within our ranks. It is encouraging to see the new emphasis highlighting leadership skills in our profession from the stage of admitting students into veterinary school to AAHA standards of practice.

In the business world outside our profession, Collins' book, ***Good to Great***, has been a must read since it was published in 2001. Jim led a research team that put in more than 15,000 hours analyzing the most successful Fortune 500 companies. They identified only 11 companies that had transformed from good to great organizations. Having identified these companies, they then studied the leadership to determine the common threads distinguishing them from the good companies. Some of the findings they were not expecting to uncover included the fact the leaders of these great companies were not the high-profile leaders with big personalities who made headlines and become celebrities. They found the leaders rose from within the companies and possessed a paradoxical blend of personal humility and professional will. They were more like Lincoln and Socrates than Patton or Caesar. They channeled their ego needs away from themselves and ambitiously worked to build the company. Businesses built by ego driven leaders nearly always faltered when the leader departed, businesses led by humble competent leaders continued to thrive after the leader departs. Collins believes there are incredible leaders all around us. If you want to locate them, look for situations where extraordinary results exist, but where no individual is claiming excess credit for the results. I have had the privilege of working with a number of these talented leaders over the years. They seem to quietly get great results with their projects without much fanfare. Initially I misjudged their capabilities and was thankful I was wrong. Keep your eye out for these unexpectedly great results and look for the leader behind them. Reward them with respect, recognition and responsibility.

We have often said leaders in our field have a vision and a passion to see the vision become reality. Collins' researchers discovered the greatest business leaders "got the right people on their bus and the wrong people off their bus before they figured out where to drive the bus." The vision came to the forefront after the right people were on the team. Once the businesses had the right team together they became self aware in knowing what they were truly passionate about, what they could be best at and finally what would produce the cash flow to feed their passionate work performance.

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In other words they identified their strengths and focused on them.

What would this look like in your practice today? Are you passionate and great with retail, grooming, behavior, dentistry, diagnostics, surgery, preventative medicine, senior care, wellness care, avian/exotics, boarding, acupuncture, physical rehab, nutrition, ultrasound, endoscopy...? (Those of you in mixed or large animal practice substitute the services you provide here.) Identify and focus on your strengths. If you have the wrong team, we wish you courage to do the right thing. If you have the right team and have not clarified your vision, we wish you clarity and determination.

The leadership skills are easy to learn about (whether it is Boy Scouts, AAHA or other professional resources—books, tapes, DDS etc). We will benefit by going outside our profession as we take this "leadership thing" more seriously in our profession. The biggest challenge is to walk our talk as we transition from good to great. Stay focused on your core values and enjoy the journey.

Carpe' Diem

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Due Diligence: After signing a letter of intent and frequently before the finalization of formal purchase agreements, buyers will begin financial due diligence for the transaction. A buyer should be hesitant to spend too much money on negotiating formal purchase agreements until he or she is comfortable that the parties are close on the basic terms of the transaction. The financial due diligence should be started prior to entering into formal purchase agreements in order for the buyer to be comfortable that he or she is receiving value for the agreed upon purchase price. Sometimes buyers will start their financial due diligence investigation before a letter of intent is signed because they are uncomfortable agreeing to a purchase price until after they have had a consultant analyze the financials of the veterinary practice. This is a reasonable approach, but a buyer needs to be cautious about spending too much money before the seller enters into a formal purchase agreement. Buyers need to understand that the formal purchase agreements will provide time for the buyer to complete due diligence to make sure that he or she is getting adequate value of the purchase price. If a buyer decides that he or she is not receiving value for the purchase price then he or she will be able to back out of the transaction.

Closing Advice: Letters of intent can save a veterinarian a lot of money by clarifying in writing the "basic" terms of an agreement before hiring a lawyer to prepare the purchase agreements. However, it is important to not sign a letter of intent until you have had discussions with your attorney and tax advisor and a review of the document by your attorney.

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Veterinary Practice Consultants presents

Shirt Sleeve Seminars®

Reno, Nevada

April 6-8, 2006

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Session Topics:

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How To Zone Your Hospital
How To Implement Multi-tasking Schedules
How To Develop Standards of Care
How To Use Meeting Tools
How To Empower Your Team
How To Integrate Diagnostic Intensity
How To Managing Your Boss
How To Share "Needs" with Pet Parents
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Registration Fees:

\$995 Hospital Team (up to 4)
\$125 each Team Member > 4
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The seminar is being held at:

Circus Circus Reno
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Reno, NV 89503

775-329-0711 / 800-648-5010



- ☐ Friday night there is a special Owner's Dinner sponsored by Rx Works.
- ☐ We offer you a mix of personalities from our VPC team and invite other industry notables to join us as guest facilitators so you have unbelievable resources upon which to draw!
- ☐ Registration does not include travel or hotel accommodations. Make your hotel and travel arrangements with your own travel agent, but be sure to tell the hotel you are attending the Veterinary Practice Consultants® seminar and request a room from the reserved block at the hotel; they are at a preferred rate! VPC rooms held only until March 14th - so make your reservations early.



ARE EMPLOYEE'S PETS AN OCCUPATIONAL HAZARD?

Philip J. Seibert, Jr., CVT



In some cases, one of the benefits of working in the veterinary profession is the ability to bring one's pet to work. Likewise, many practices have hospital mascots. In itself, these situations are not dangerous or hazardous to the staff and OSHA does not have a regulation prohibiting such activities. However, this issue is far from "black and white." If the hospital mascots or employees' pets are allowed to roam freely in the building, there may be a problem in the making.

Animals that roam freely in the facility can cause several safety problems for the staff. On the basic level, just having an animal laying in the wrong place at the wrong time is a hazard. If someone is walking and doesn't see the animal laying on the floor, they can trip and injure themselves and the animal. OSHA does have a requirement for the business to maintain aisle ways and passages free and clear of obstructions - this would include the furry types!

Unrestrained animals in the practice have been known to show up in the wrong places and make difficult situations worse. For instance, if the hospital cat isn't afraid of dogs, he or she is not likely to be concerned with a large dog in the waiting room or exam room. However, the dog may view "getting the kitty" as a game inalienably endowed to canines and as such would do just about anything to win. If a staff member were restraining the dog for say, venipuncture at the time, you can see the situation getting out of hand quickly. Likewise, an employee's dog may scare a cat undergoing treatment to the point of the cat biting or scratching the staff member in an attempt to get away.

In today's society (and certainly in our profession), we live with animals integrated into our homes and lives very intimately. That is a good thing. However, the workplace is different and the veterinary hospital is not someone's home. The veterinary hospital is a place where exceptionally large numbers of animals from all environments converge. The different pathogens that are introduced into the veterinary practice on a given day are one of the reasons we practice hand washing and other personal hygiene measures so diligently. By introducing one's own pet to these pathogens, we may be increasing our risk of exposure to these pathogens when we interact with our pets or the hospital mascot. The old saying, "Familiarity breeds contempt" may need to be "Familiarity breeds carelessness." - We rarely wash our hands often enough and less so when we are dealing with our own pets.

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No matter how well behaved the animal, simply their presence in some areas could be a potential violation of OSHA standards. Since OSHA requires the business to provide an area free from biological or chemical hazards if employees are allowed to eat or drink on the premises, logic holds that a cat or dog in the break room could be construed as introducing unwanted organisms. - Again, remember the veterinary practice is not a home. Some activities at one's home would not be appropriate in public or at work with coworkers present.

Finally, there is the appearance aspect of allowing animals to roam freely in the building. Some clients are reluctant to patronize a place where their animal feels "threatened" or treated differently. It's hard to explain to clients that they must restrain their pets in the waiting room to prevent fights, aggression, marked walls and the transmission of disease, when they witness the staff's pets or hospital mascot allowed to run free.



All in all, if staff members are allowed to bring their pets to work, it would be best for all concerned if the pets were treated like any other, restrained or caged.

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Chicken Soup for the...

c'attitudes

Leg Rubbing



Wet Kisses

Tag Wagging

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Signature Series Monograph Highlight



Standards of Patient Care in the Bond-Centered Veterinary Practice

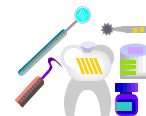


A major problem in a multi-doctor practice is the absence of lack of "Standards of Care". Each doctor is usually allowed to "do their own thing".

Baseline of minimum issues need to be address for continuity of care and more effective staff utilization.

What will be your Standards of Care in 2006?

Blood Pressures?



Dental Grading?

Blood Screens?



Body Condition Scores?



IV Fluids?

Medical Records?



ECG's?

Genetic Predispositions?

The complete list of our *Signature Series* Monographs can be seen at

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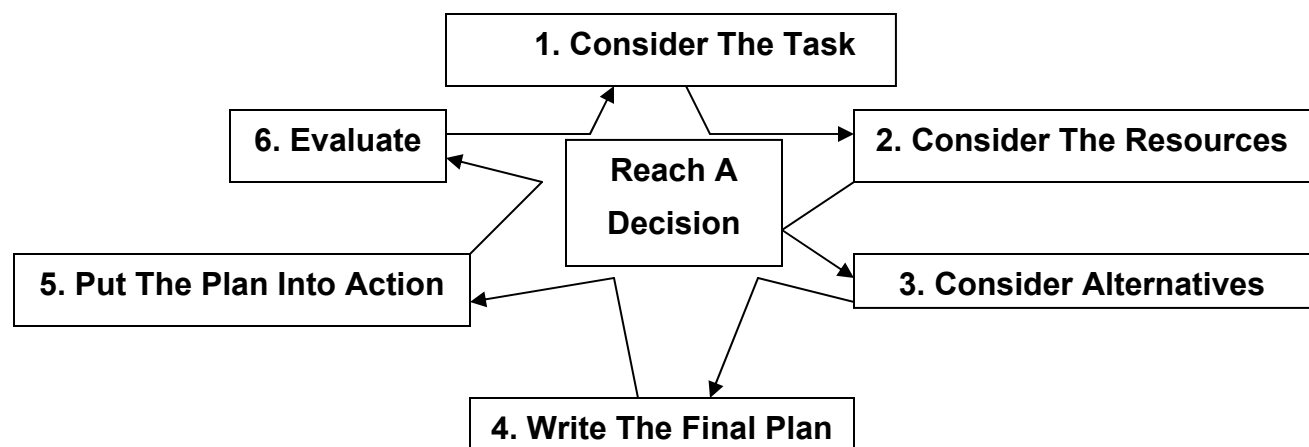
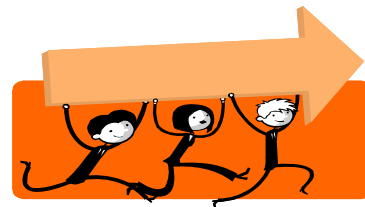
Julie Singer, RVT, CVPM

It has been shown time after time, for every fifteen minutes of dedicated planning, the user usually gains at least an hour back during the implementation process. The core of a successful practice is effective planning. As the leader, you must do it with them when no one else can, but don't do it for the team for very long. As soon as possible, train your team to do the planning. When the staff assumes the responsibility for the planning process, they also assume the operational activities of daily practice.

The first question most practice team members will ask is "Who is responsible?" The answer is always, "The leader is responsible." Making no decision is, in fact, a decision, and that is a leader's choice. A poor decision is better than no decision if the leader allows other people the freedom to change the process to meet the desired outcomes.

What can we do within this group to ensure their efforts are directed in the right direction? First, a good leader will teach them how to play well with others in the sandbox (most doctors get a "D-" in sandbox, unless they have worked on these skills). Second, the leader must share the "why" in the initial phases of planning, along with What-When-Where-Who-and How to gain staff buy-in. Third, always remember that the roots of planning begin with:

- ▶ Patient Advocacy
- ▶ Client-centered Service
- ▶ Practice Philosophy and Core Values
- ▶ Continuous Quality Improvement (CQI)
- ▶ The Power of the Entire Healthcare Delivery Team



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Task: What – When – Where – Why – Who – How

Determine the activity, set the objective, clearly define the issues

What is the purpose? Why do it? What is gained?

Resources: Time – Skills – Equipment – People – Community – Money – References

What are the available resources to the practice team?

Are the resources readily available? Are there restrictions in their use?

Alternatives: Emergencies – Weather – Economy – Fun – Pride – Client Access

Based on the available resources, what alternatives are available?

There are multiple ways to accomplish every task; brainstorm them.

Specifics: Date – Time – Place – Assignments – Success Measurements

The activity must be planned for the details, so write it down in detail.

Every Plan A must have a Plan B as backup.

Implementation: Just do it!

Initiate the plan; stay centered on desired outcomes, not process.

Follow the plan, but be ready to make changes in the process to get to the outcome.

Evaluation: Recognition of special efforts – reward appropriate behavior and effort.

How did the activity go? Were the objectives met? How was success measured?

Should we do it again? What could we improve?

As a group, nothing energizes a team more than feeling that *everyone* is involved and working together. Staff knowing that their individual contributions to the practice's success, by applying their unique talent and knowledge to the planning process, is an important factor and deserves recognition by the leader. Because of their commitment to the goals that they helped established, they feel a sense of ownership of their jobs. The bottom line of planning is exciting for most teams. When the team is doing its job, healthcare delivery becomes fun again!

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Congratulations Desert Veterinary Clinic!



This past November, Desert Veterinary Clinic, was selected as the overall winner for the best place to work in Yuma for 2005 and won first place in the Medium Business category. Cheryl Haugo, DVM responded, *"It is such an honor to be given recognition... It's the whole team that's earned this award."*

Spoken like a true leader - congrats!

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Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____ E-mail: _____

Team Leader/Primary Participant : _____

Additional Team Members/Registrants: _____

Shirt Sleeve Seminars

- ▶ 18 hours of CE plus
- ▶ 60 days of follow up support!

- ☐ Reno, NV April 6-8, 2006
- ☐ Minneapolis, MN Sep. 7-9, 2006
- ☐ \$995.00 Team Registration (Up to 4 attendees)
- ☐ \$125.00 for each member over four

Seminars at Sea

- ▶ 24 hours of CE plus
- ▶ 90 days of follow up support!

Eastern Caribbean June 17-24, 2006

- ☐ \$995.00 Primary Participant
- ☐ \$175.00 for each additional attendee

VPC Update! Newsletter

☐ FREE modified version, emailed monthly. Print email address LEGIBLY: _____

☐ Please send me your Management Aids & Services Catalog. **FREE!**

☐ Check Enclosed **OR** ☐ Visa ☐ MC ☐ Discover ☐ American Express

Total Amount of Payment: \$_____USD

Name as it appears on card: _____

Card Number: _____ Last 3 digits on back of card: _____

Expiration : _____ Signature: _____

Address Card is billed to if different than above: _____

Mail, fax, email or call our office today!

18301 West Colfax Ave Bldg R101 Golden, CO 80401 ♦ 303.277.9888 ♦ cat9800@aol.com ♦ 303.277.9800

On the Move.....Where are They?



*Would you like to meet a VPC associate face to face?
Their next quarter's travels are outlined below; meet
the team who makes Veterinary Practice Consultants
exist or perhaps schedule an eye-to-eye consult!*



Tom Cat (DrTomCat@aol.com)

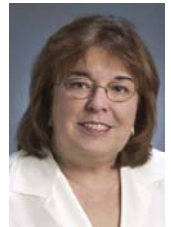


Oct - Dec '05	Consulting	Australia/New Zealand
January 7-11	North American Vet Conference	Orlando, FL
February 19 -23	Western Veterinary Conference	Las Vegas, NV
April 6-8	Shirt Sleeve Seminars	Reno, NV

Susan Strattman (SStrattman@aol.com)



January 7-11	North American Vet Conference	Orlando, FL
February 19 -23	Western Veterinary Conference	Las Vegas, NV
April 6-8	Shirt Sleeve Seminars	Reno, NV



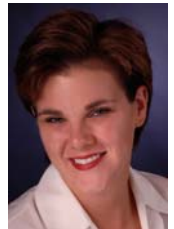
Michael Hargrove (DrHarg@cpinternet.com)



April 6-8	Shirt Sleeve Seminars	Reno, NV
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Jennifer Inbody (J.Inbody@sbcglobal.net)

April 6-8	Shirt Sleeve Seminars	Reno, NV
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Sam Morris (DrSamHere@aol.com)



April 6-8	Shirt Sleeve Seminars	Reno, NV
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Julie Singer (JSinger@consolidated.net)

April 6-8	Shirt Sleeve Seminars	Reno, NV
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The Veterinary Practice Consultants Booth (Cat9800@aol.com)

January 7-11	North American Vet Conference	Orlando, FL
February 19 -23	Western Veterinary Conference	Las Vegas, NV
March 18-22	AAHA Annual Conference	Long Beach, CA





Veterinary Practice Consultants®

Catanzaro & Associates Inc

18301 West Colfax Ave Bldg R101

Golden Colorado 80401

Website: www.v-p-c.com, email: cat9800@aol.com

Tel: 303.277.9800; Fax: 303.277.9888



Shirt Sleeve Seminars **“HOW TO INCREASE PRODUCTIVITY”**

Reno, NV April 6-8, 2006

Minneapolis, MN Sep. 7-9, 2006

18 hours of Team CE

**** Plus - Special Zone Workshops!***

Seminars at Sea **“EMERGING OPPORTUNITIES”** ***Cruising the Eastern Caribbean!***

June 17-24, 2006

24 hours of Leadership CE

