# An interview with a DVM who's Clinic Mobilizes RVTs

(Some tips from a vet who has taken the journey before you.)

While researching how to effectively mobilize RVTs, I interviewed a veterinarian whose clinic invested in BS Communication Strategies training and has been mobilizing RVTs for several years now. Here is a summary of the words of advice that were offered in how they took a leap of faith, trusted in something better, and are enjoying a new, rewarding practice model.

**Why did they consider changing their clinic culture?**

1) They started to burn out, were seeing extended wait times, and frustrated clients. They could not find vets to fill the coverage gaps. DVMs had to generate all the significant income themselves, and it was becoming unsustainable.

2) They asked themselves; how can we truly and effectively make change happen?

"Vets all want a solution without paying for it", but they knew this would not generate the change they were looking for. Everything is expensive. They made a mental budget and trusted that a new direction can work; if they didn't commit fully, they knew it would fail. "We all could see how it should happen, but we are scared". So, we trusted that it is doable, that we wanted it, and we went for it.

3) They researched and invested into BS communication strategy programs.

BS Communication Strategies = "Communication Nerds"

- Engaged in training over the next 2 years. Sent the first technologist, their most experienced, to the training and launched their new clinic workflow six months later.

- Integration Services were offered so that after the teaching, instructors came in and worked with staff to get through hurdles and problems. The vet needed no different skill set other than communication. They came and did a full team day.

- The second Technologist who wanted to go was their least experienced tech. Now have 4 technologists on board.

**How to get there? Supporting each other.**

We have to care about our people. Be kind to ourselves, protect out RVT's, and be careful.

You have to look 5 and 10 years out and have several goal and check ins along the way.

You have to want to change. This truly is a financial and emotion commitment.

“The reaction to change is resistance”. Individuals (staff and clients) can be stubborn to engage in change. However, all things to all people we can’t be. How do we expand care?

Through communication and recognition, give clients trust; “this professional is who you will see as you pet is not ill”

These situations work for clients, as technicians are much better at communicating at a level that is more realistic. They get more fulfillment as they are leaders in client care.

**They determined:**

What sort of tasks or appointments are you having RVTs doing?  Wellness oriented. If techs are not comfortable, they have the right to refuse.

Technologists need to trust that when they reach for the vet, they have coverage, and the vet will not throw them under the bus. The vet needs to take the baton to follow up if there is a discrepancy of any sort.

Internally, they defined a specific scope of practice for the technologists, being very conscious to local bylaws. The 1st time an animal is seen, it must be by a doctor who determines a wellness plan.

**The practice owner wrote an RVT handbook.**

- When do they reach for a vet? What prompted the client to call the clinic?
- Mental Wellness matters to the RVT. What appointments are driven by the RVT? When does the team not involve a doctor? When are there plans for a DVM to follow up?

They have Standard operating procedures to guide/follow them during assessments.

Regarding client communications:  they clearly define what topics, updates, or information are meant for RVTs to communicate to clients. Who should disclose what: a technologist, a veterinarian, another team member?

Language in appointments is important.

- They are strict to use “assessment” for a Technologist. Veterinarians can do an “examination”.
- They can make a “recommendation”.

For E.g., A technologist can do an assessment and recommend a dental. During the dental, the DVM will examine and diagnose.

**The Outcome:**

They "Launched the program" within their clinic. The DVMs trusted the training, **let go of the control**, and put their faith towards a new clinic workflow and culture

"It is awesome." They look at their days now, look at their schedule, and know that they have a return on their investment. Bookings are very full for RVTs and there are now openings for DVMS. **"We can practice better medicine"**

**"Really, a giant triage system was created"**

When a senior vet looked at their schedule and noted the full RVT bookings and the openings for the Veterinarians it was asked: "Shouldn't vets be completely filled first? The answer, "No they should be open for ill animals".

**It has become a positive feedback loop.** You will free up time so that you can treat the ill animals, and you will have time to talk to clients, because you have freed up your time.

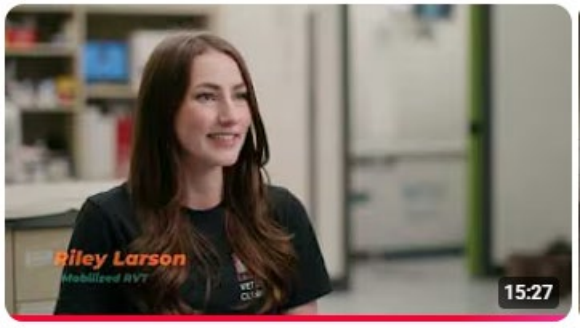
**The DVM job became more fulfilling** as they do more of what they love now!

- As summarized by James Sudhoff, DVM.

**Also:** Check out the documentary about BS Communication Strategies Inc. on YouTube.

**"Mobilizing RVTs ® 2.0 documentary"**

https://www.youtube.com/watch?v=tupd3ZKBKEc




Mobilizing RVTs® 2.0 Documentary

You will be inspired!