

Consultation Style: Are You Following Best Practices?



Veterinary schools have shifted consult emphasis toward a client-communication model (ie, Calgary-Cambridge model). In this study, 48 private practice consultation video recordings were reviewed for content and timing and then coded to create structural consult models. There were 3 appointment types; new appointment or presentation,

recheck, and routine. Appointments largely involved dogs and cats (66%), female owners (71%), and female veterinarians (60%). Mean appointment length was 11.45 minutes (range, 4–28 minutes), with problem and recheck appointments requiring 14 and 13 minutes, respectively. Most appointments took an iterative approach that led to 71% exceeding necessary history-taking. An increase in time budgeting is needed, so that the client has informed consent and cost estimate. In addition, history and physical examination were often interwoven as the patient's history was developed. Although veterinarians adapt to iterative methods of consultation, it is not clear

that this improves appointment outcomes related to client perception and appropriate diagnoses.

COMMENTARY

This study evaluated how closely appointments adhere to the client-communication consult model taught to students. Similar to a previous study of consults, general practitioners overlap portions of history-taking and physical examination to create a flow to the appointment that does not follow a standard template. Although these consults frequently ran several minutes longer than the time allotted, the study design could not evaluate clinical outcomes of this approach. It did, however, note that some appointments involved nonpertinent discussion and others were punctuated by veterinarian absence; in these cases, client-communication strategies might have been beneficial. When considering the components of appointments, it is extremely cost-effective to record or film the team and perform self-evaluations of appointments. Examination styles are highly personal, but good communication has similar underpinnings, regardless of how one practices. -Ewan Wolff, DVM, PhD

SOURCE: The structure of the small animal consultation. Everitt S, Pilnick A, Waring J, Cobb M. *J Small Anim Pract* 54:453-458, 2013.

Practice Managers—Ask Yourself!

Six questions were used to provide guidelines for practice managers to create or modify an ideal training model: 1) Is the cost of training higher than the investment return? Training continues to provide a positive return, even in a hard economy. 2) Does training benefit only new employees? Advanced training for established team members allows them to increase efficiency and shoulder additional responsibilities, including those of a supervisory nature. 3) Should team members be allowed to decide which talks to attend at conferences? Mutually selecting topics and asking attendees to provide short summaries for other team members allows the whole practice to get the most out of a conference or symposium. 4) When deciding how much to allocate for training, is it best to work flexibly or to stick to a yearly budget? A yearly training budget should be established in advance, focusing on amount to be spent and actionable returns to be expected, considering practice-wide and individual training needs. 5) Is shadowing the most effective way to train? Generally, no. Consider other interactive approaches and how each individual may best learn

the material. 6) Should we update training materials yearly or stick to tried-and-tested resources? Although there is no reason to replace relevant successful materials, new ones should be created and promoted whenever there is an update in policy or equipment.

COMMENTARY

A thorough understanding of the importance of a proper, consistent training protocol is essential to maintaining engaged, long-term team members. Despite this, many practices still train by the *sink-or-swim* method (isn't that how we were trained?). By illuminating the how and why of effective training for both new and existing team members, this study leaves us with no excuses as to why we should not either implement or improve our training programs *now*. —*Katie Newbold*. *LVT*, *CVPM*

SOURCE: Six questions about training that every practice manager should ask. Grosdidier S. *In Pract* 35:535-537, 2013.