



Increasing Access to Care in Small Animal Veterinary Practice

GARY BLOCK DVM, MS, DACVIM
OCEAN STATE VETERINARY SPECIALISTS

Defining the Problem

- u Approximately 29 million pets live in families at or below the poverty line¹
- u Of pet owners who didn't visit a vet in the last year, 29% of dog owners and 21.5% of cat owners said they couldn't afford it²
- u 53% of pet owners reported that costs of vet care are usually much higher than expected³
- u Linear relationship between annual income and likelihood of pet relinquishment⁴
- u "Access-to-care issues may be the most substantial animal welfare crisis affecting pets in the U.S."⁵

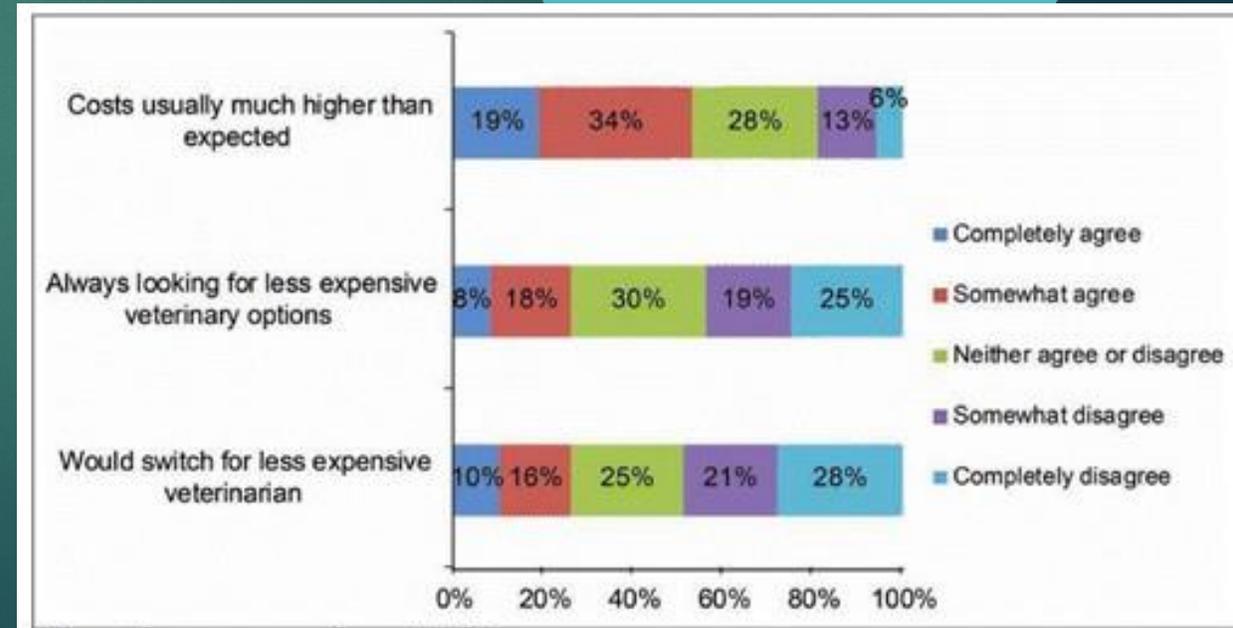
¹ HSVMA Access To Care Coalition

² AVMA data

³ Bayer veterinary usage study

⁴ Journal of Applied Animal Welfare Science

⁵ AVMA Virtual Convention 2020



Barriers to Obtaining Veterinary Care

“The overwhelming barrier for all groups of pet owners and all types of care is financial, with 80% unable to obtain preventative care due to financial constraints, 74% for sick care, and 56% for emergency care.”

Costs of veterinary care increasing faster than rate of inflation

Percentage of pets receiving no health care from a veterinarian is increasing¹

- u Dogs 19%

- u Cats 45%

1 in 4 households have a barrier to obtaining veterinary care for their pets²

- u Veterinary deserts

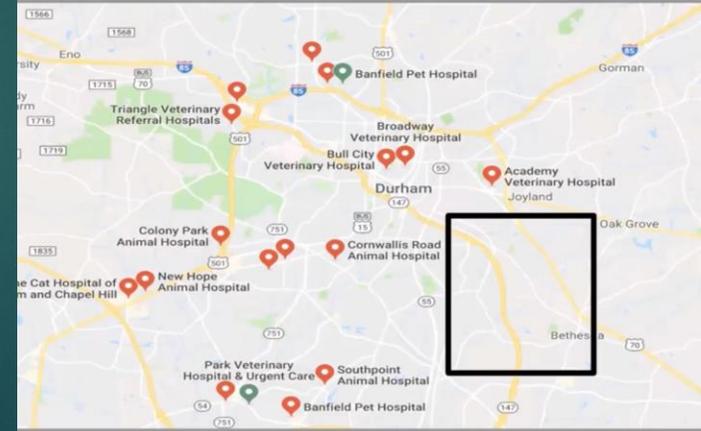
- u Limited transportation

- u Lack of knowledge on where to obtain care

- u Lack of supplies (carriers, leashes)

- u Language barriers

Resource Desert - Veterinarians



¹Access to Veterinary Care: Barriers, Current Practices, and Public Policy; 2018

²Barriers and next steps to providing a spectrum of effective health care to companion animals; JAVMA 2018

The Cost of Pet Ownership

- u 18 billion/year spent on veterinary care¹
- u Spending/year on pets: \$785/dog; \$516/cat¹
- u Lifetime Spending: \$20,895/dog; \$18,461/cat²
- u Only 31% of vets discuss veterinary costs with clients prior to their pet becoming ill³
- u Discourage clients from purchasing breeds known with higher than average health care costs

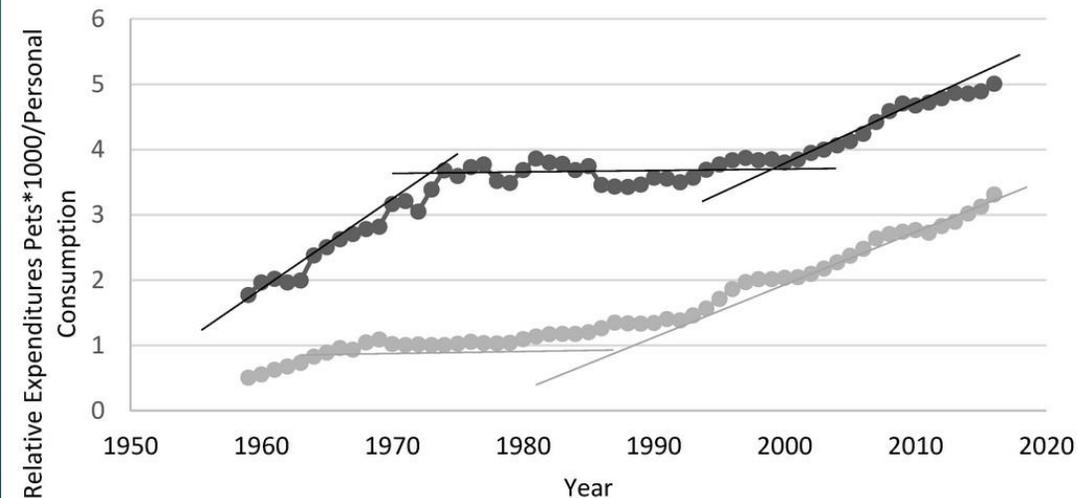
¹American Pet Products Association, 2018

²Ontario Vet Medical Association

³JAVMA 2017



Relative Expenditures on Pet Products and Veterinary Services in the USA, 1959–2016



COVID Aggravates Access To Care

JAVMAnews

July 01, 2020

COVID-19 highlights access-to-care challenges

Unemployment rises, increasing need for low-cost care

By Kaitlyn Mattson

Published on June 10, 2020

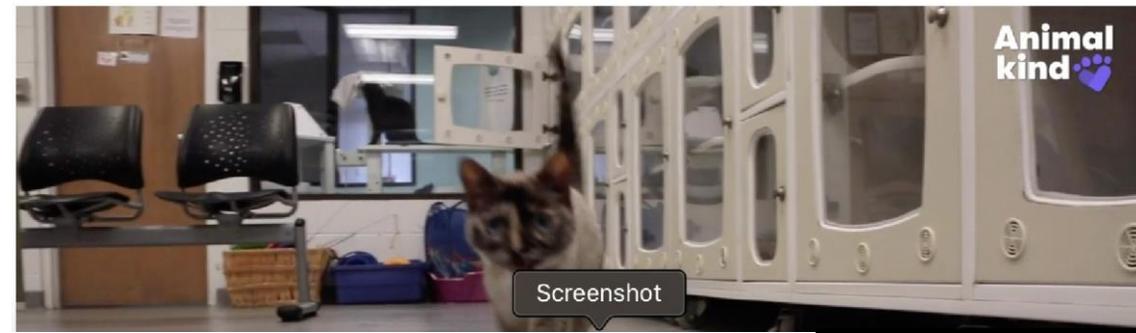
Dr. Jeff Rosenthal, chief executive officer at the Idaho Humane Society, has noticed an increase in the number of clients coming into the hospital who can't afford veterinary care.

MONEY

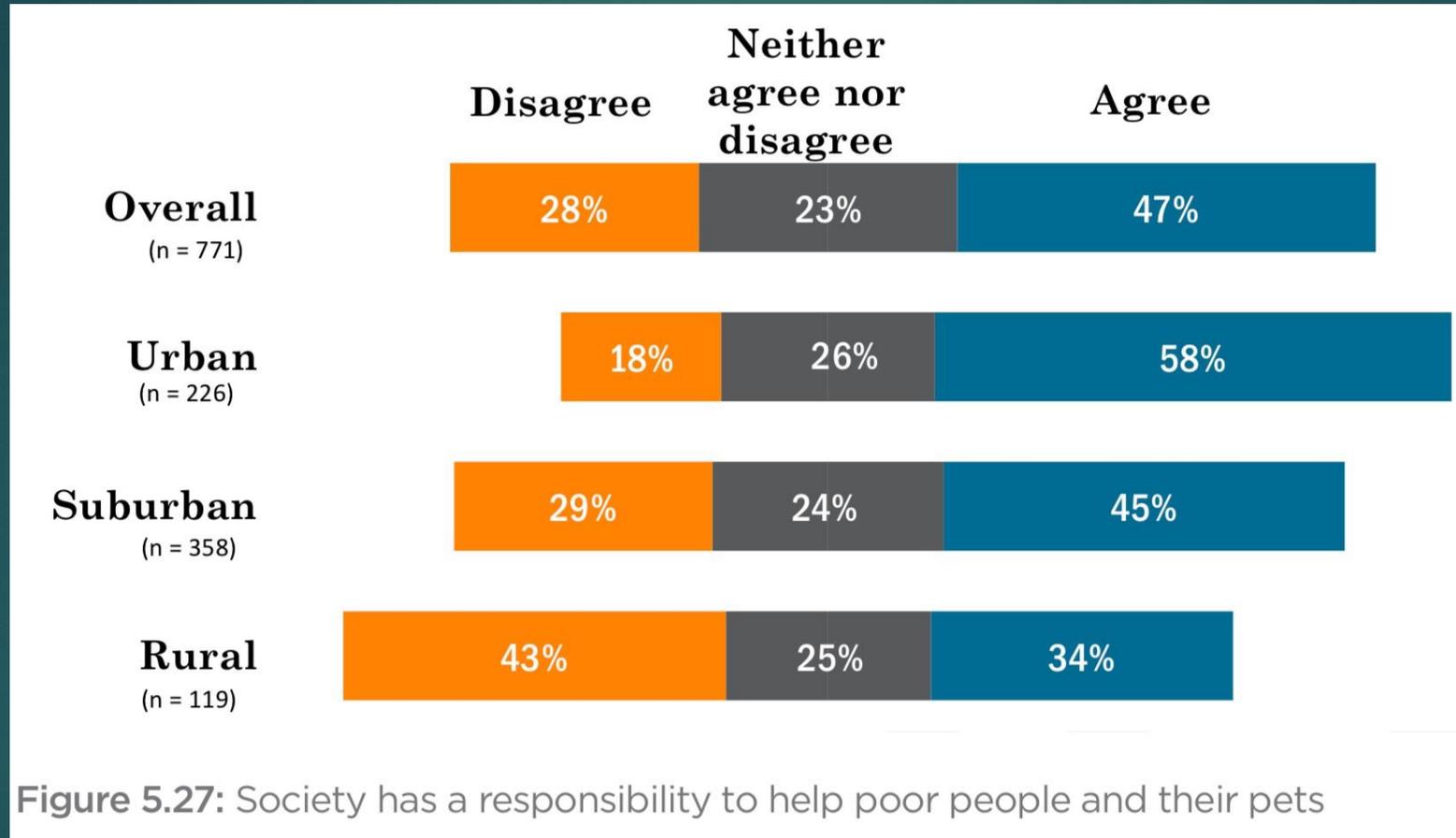
11 don't want these dogs to suffer: Pet surrenders becoming tragic part of pandemic

Brent Schrotenboer USA TODAY

Published 12:01 a.m. ET Oct. 29, 2020 | Updated 8:14 p.m. ET Oct. 30, 2020



“Society has a responsibility to help poor people and their pets”



- u Veterinary Access to Care Coalition Monograph-2018
- u Responses of 700 Veterinarians



in the Room?



- u Is pet ownership a right or a luxury?
- u Knowing that some of the most vulnerable (socially and economically) members of our society are the ones most likely to benefit from the Human-Animal bond, should we ever discourage pet ownership?
- u How heretical is it to say that in the interests of *the animal* certain people shouldn't own pets?
- u In championing the Human-Animal bond, have we done so to the detriment of some animals?
- u Should we have a society that promotes all people getting pets with the assumption that there will be a potentially never-ending safety net for them to subsidize the care their pet receives?
- u Are vets the ones who should be responsible for creating this safety net?
- u As a profession, are we prepared to actively discourage some people from getting pets if there is a high likelihood that they will not be in a position to consistently provide basic needs to that animal?

Why is Access to Care Important?

- u Improved animal quality of life
- u Improved human quality of life in households with pets
- u Improved human health in households with pets
- u Supporting within-family bonds
- u Decreased likelihood of relinquishment/abandonment
- u Decreasing pet overpopulation/unwanted breeding
- u Decreasing infectious diseases, injuries, death from free-roaming animals
- u Decreasing likelihood of zoonotic exposure



Ramifications of Economic Euthanasia¹

- u An opportunity to apply professional skills is denied
- u A human-animal bond is severed
- u A veterinarian-patient bond is severed
- u A patient revenue source is lost

¹Kruse, Today's Veterinary Business 2019



Factors that influence small animal veterinarians' opinions and actions regarding cost of care and effects of economic limitations on patient care and outcome and professional career satisfaction and burnout

Barry S. Kipperman DVM; Philip H. Kass DVM, MPVM, PhD; Mark Rishniw BVSc, PhD

u Clients not being able to afford recommended veterinary care is a major driver of:

u Job stress/dissatisfaction

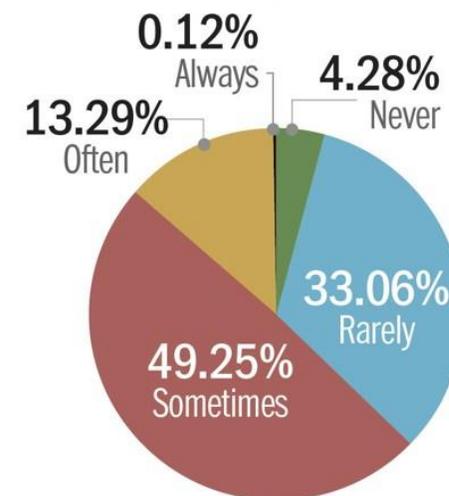
u Compassion fatigue

u Burnout

u Suicide

Help me, Help you!

How often they have cases in which they feel like they can't do the right thing:



SOURCE: "Ethical Conflict and Moral Distress in Veterinary Practice," Journal of Internal Veterinary Medicine, October 2018

Deseret News

Honoring Our Veterinary Oath

- u We *can't protect animal health and welfare* if we don't provide affordable vet care
- u We can't *relieve animal suffering* if pet owners can't afford to treat their pet
- u We can't *prevent animal pain* if pet owner's don't bring their pet to the hospital
- u If the *promotion of public health* includes the mental health of pet owners and veterinarians, then improving access to pet care will also honor our oath

Standard of Care



Standard of Care (SOC)

- u No universally accepted veterinary definition of SOC
- u SOC in veterinary tort law: “Care required of and practiced by the average reasonably prudent, competent veterinarian in the community”.¹
- u “...nor does the legal standard set the threshold for liability at a particularly high level. The average or normal practitioner sets the standard”²
- u Standard of Care ≠ Ideal or “Gold Standard” care

¹ [Dyess v. Caraway](#), (La. 1966)

² [Turner v. Benhart](#), (Al. 1988)



Commentary

A new look at standard of care

Gary Block DVM, MS

From Ocean State Veterinary Specialists, 1480 S County Trail, East Greenwich, RI 02818.

Address correspondence to Dr. Block (GBYLC@aol.com).

The ten "standard of care" (SOC) has been defined many times in case law. In *Vaughn v Menlove*,¹ a case from 1837 and one of the oldest legal references to SOC the court wrote that an individual under a duty of care must have "proceeded with such reasonable caution as a prudent man would have exercised under such circumstances." Similarly, in veterinary tort law, the SOC has been defined as "the standard

by which the SOC is defined, a different SOC might be applied to veterinary practices treating the same theoretical patient on different sides of a state border. Given the increasing emphasis on continuing education in veterinary medicine, the increase in online educational opportunities, and the widespread access to experts through various electronic means of communication, geographic SOC variability may no longer

Spectrum of Care

- u Spectrum of Care acknowledges the care we provide has to ideally be grounded in evidence-based medicine but must take into account circumstances such as the client's expectations and values, living situation and financial means when determining a course of care
- u Spectrum of care sees a continuum of acceptable diagnostic and treatment options
- u There are practical, ethical and legal reasons for making the switch from SOC to Spectrum of Care



The Feline UO-SOC vs Spectrum of Care

Intensive/Expensive Tx Protocol

- Full bloodwork (CBC, Profile)
- Retrovirus testing if indicated
- Urinalysis with sediment
- Urine culture on presentation
- Blood gas
- IVC
- Injectable drugs for hyperkalemia PRN
- EKG
- IVF
- Blood pressure
- Coccygeal epidural nerve block
- Sedation/anesthesia
- Indwelling U-cath using sterile technique
- SPO2 and BP monitoring during procedure
- Placement radiograph for catheter and stones
- Cleaning u-cath multiple times/day to try and prevent ascending infection
- AUS for radiolucent stones, tumors, polyps, kidneys, other
- Bloodwork during hospitalization (lytes, renal values, PCV/TS)
- Drug therapy (prazosin, phenoxybenzamine, antibiotics, pain relievers)
- 48-96 hours hospitalization
- Urine culture after catheter removal for possible nosocomial infection



The Feline UO-SOC vs Spectrum of Care

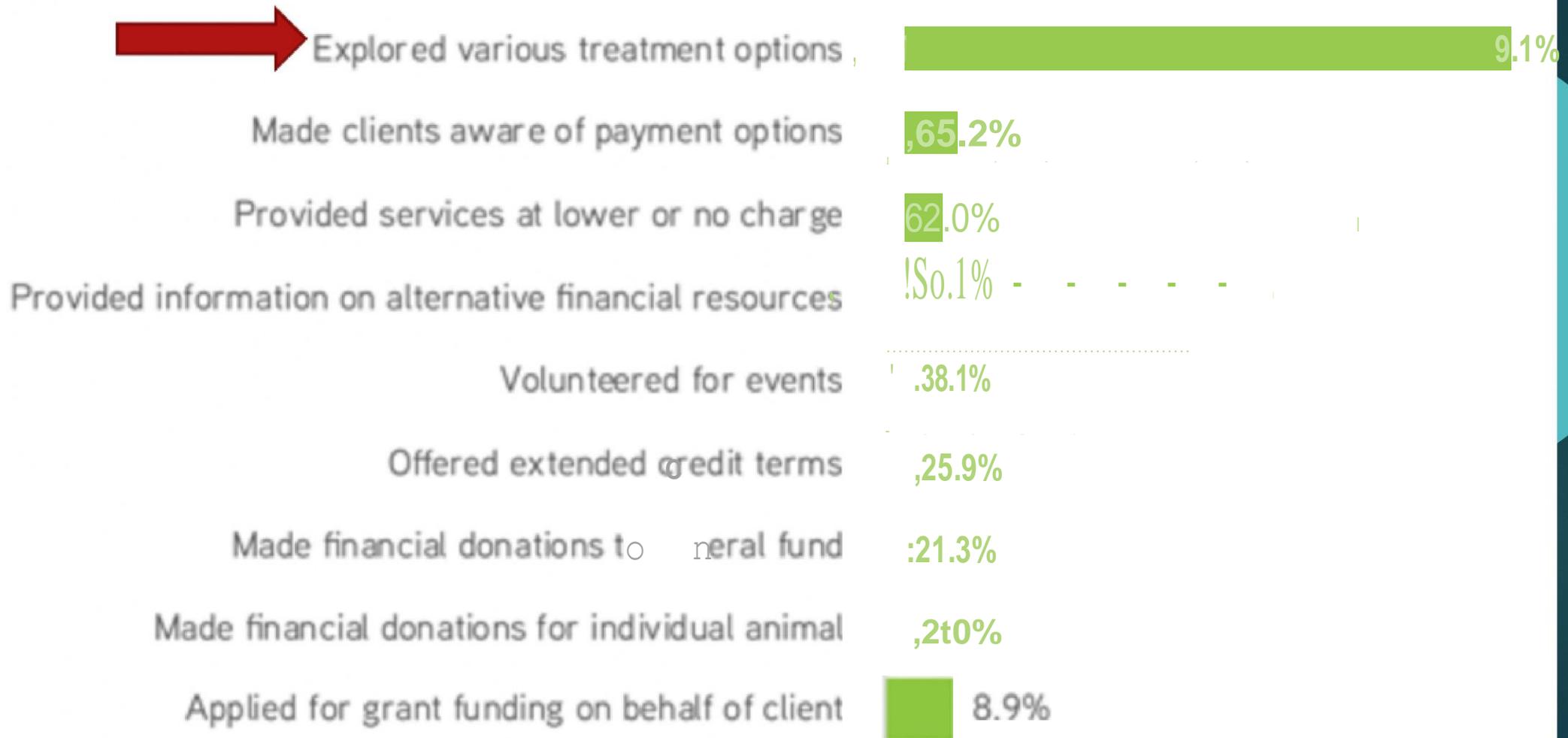
- **Inexpensive protocol**
- Sedation
- U-cath
- SQ fluids
- Send home with open catheter
- Drug therapy (diazepam, prazosin)



What happens if we adopt/accept Spectrum of Care?

- u Legal/issues (State Boards, etc.) will need to be addressed if we adopt SOC
 - u Legally, vets cannot currently knowingly provide “substandard” care
 - u Will simply documenting a client’s financial limitations absolve vets of responsibility?
 - u What will state vet medical boards use to assess complaints of vet malpractice?
- u Vets must understand all of the options available for a particular problem/disease
- u Will veterinary colleagues be unfairly critical of those utilizing spectrum of care medicine?
- u Veterinary schools may need to modify how they educate their students
- u Veterinarians will have more freedom to provide care that meets the medical and financial needs of their patients and clients
- u Vets will practice less “defensive” medicine
- u More pets will, in theory, be able to obtain needed veterinary care

VETERINARIANS EMPLOYED A VARIETY OF STRATEGIES TO ADDRESS NEEDS OF UNDERSERVED PETS (N=470)



Source: "Access to Veterinary Care: Barriers, Current Practices, and Public Policy"

Can't we do better than this?

VETERINARIANS EMPLOY A VARIETY OF STRATEGIES TO ADDRESS NEEDS OF UNDERSERVED PETS (N=470)



Source: "Access to Veterinary Care: Barriers, Current Practices, and Public Policy"

Increasing Payment Options Increases Access to Care

- u Offer a wide range of payment options (cash, check, credit card)
- u Offer financing options (CareCredit, ScratchPay)
- u Consider offering payment plans (in-house; VetBilling.com)
- u Accept post-dated checks
- u Create hospital administered financial assistance funds
- u Consider using an umbrella 501 (c) (3) for charitable donations and disbursement of funds
- u Accept +/-promote pet insurance
- u Barter
- u Crowdfunding options becoming more popular: Waggle.org, GoFundMe®
- u Familiarize yourself with state and national financial assistance programs



Criteria to Consider for In-House Financial Assistance Funds

- u State or federal financial assistance (WIC, SNAP, SSI, Medicaid, etc.)
- u Annual income in relation to state or federal poverty level
- u Client required to pay some % of bill?
- u Required to apply for CareCredit or ScratchPay?
- u Special qualifications (military, senior, disabled, rescue, other)
- u What will it cost to treat pet?
- u Will this be “one and done” or chronic care/treatment (continuing costs)?
- u Has owner taken appropriate preventative care of pet in the past?
- u Is dog spayed/neutered? Vaccinated?
- u Pet's age
- u Prognosis
- u Do you give less money to a lot of pets or more money to fewer pets?



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AVMF Veterinary Care Charitable Fund

- u Enrolled veterinary hospitals can offer low, or no-cost services to clients who might otherwise be forced to surrender or euthanize their pets.
- u AVMA members can enroll for free and get a marketing & fundraising kit
- u Charitable donations collected through the program may be used to provide care to:
 - u Disabled veterans requiring a service dog
 - u Low-income senior citizens
 - u Good Samaritans who rescue domesticated animals
 - u Victims of domestic violence
 - u Pet owners with financial hardships
- u Learn more at vccfund.org

Help Us, Help Animals

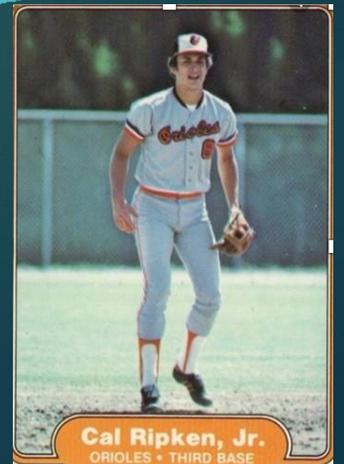


Veterinary Care
Charitable Fund

DONATE TODAY

Increasing Payment Options Increases Access to Care

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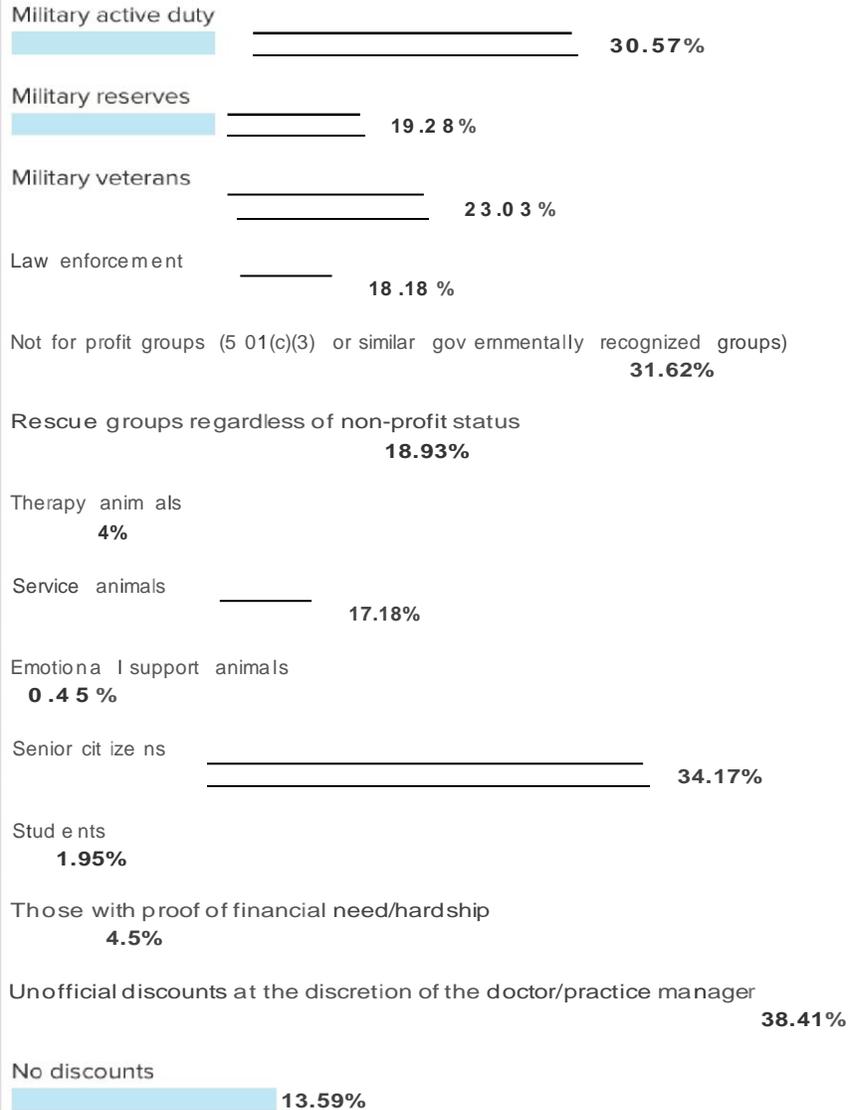


Finding Help

- u For lists of regional, state, federal, disease-specific and breed-specific financial assistance programs
 - u Speaking for Spot (www.speakingforspot.com)
 - u HSUS (www.humanesociety.org/resources/are-you-having-trouble-affording-your-pet)
- u Provide this to clients and have *them* explore options

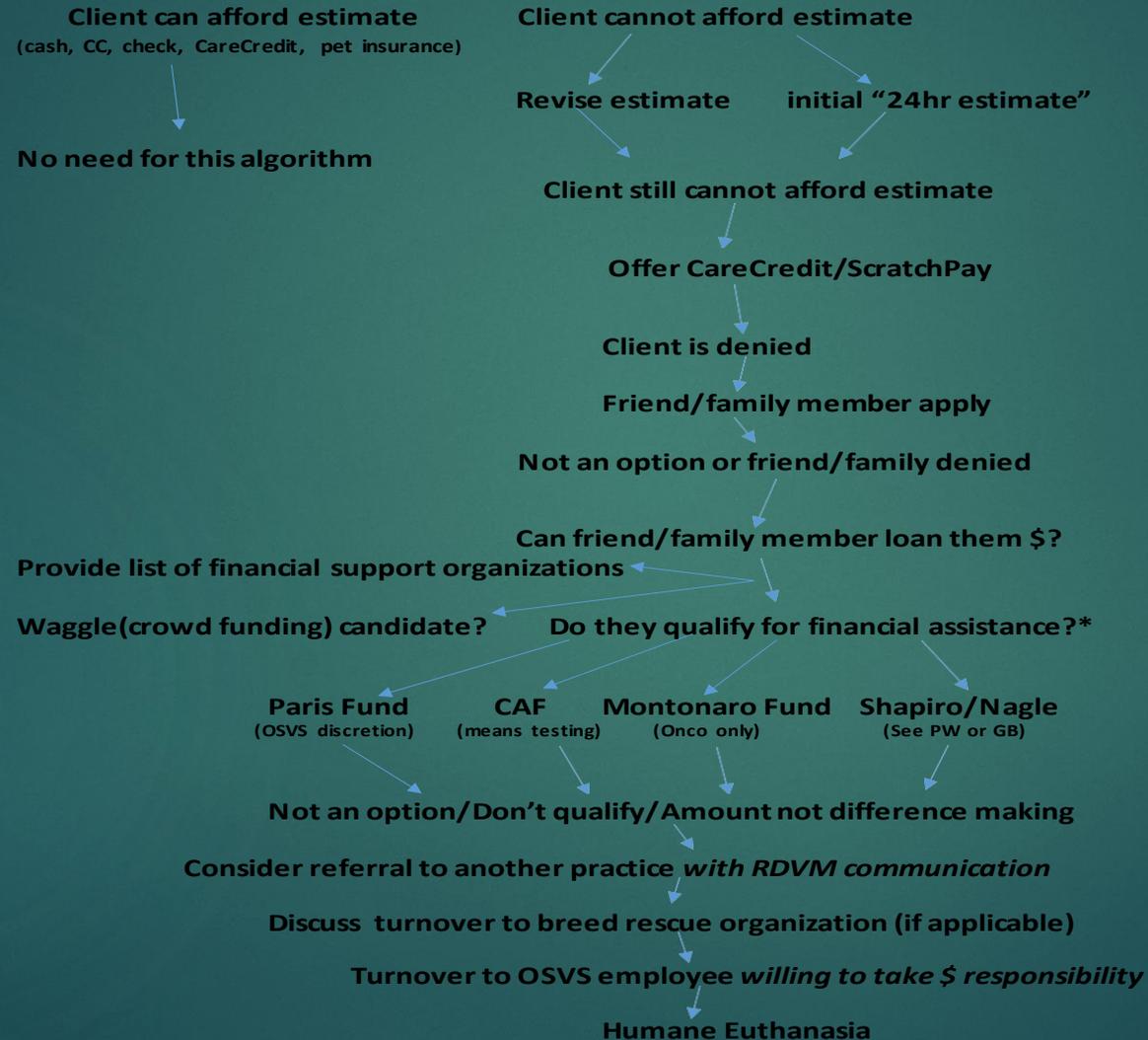
Practice Discounts-Who, When, Why?

Does your practice offer discounts to any particular client groups? CHOOSE ALL THAT APPLY



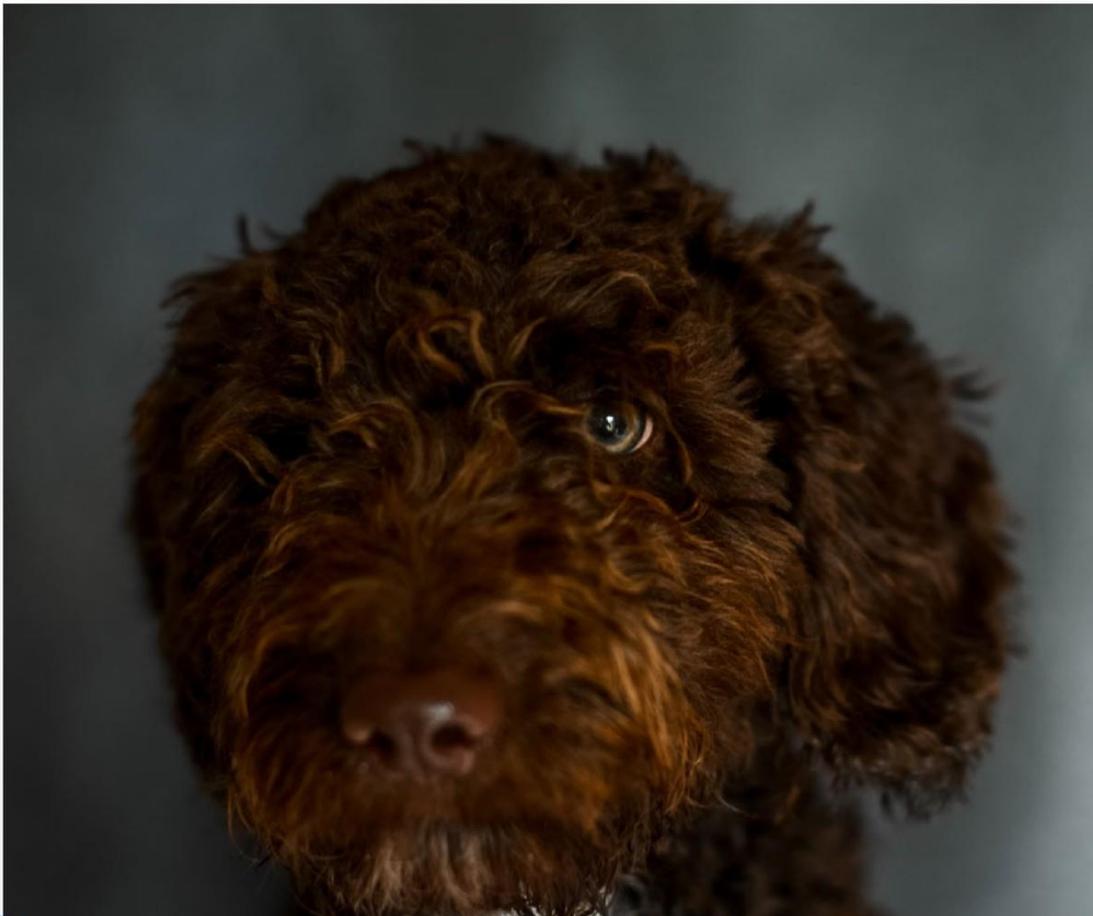
Have a Financial Assistance Plan and Make Sure Everyone Knows About It

OSVS Client Financial Limitation Algorithm (2019-2020)



*Grants for all but Shapiro/Nagle are \$50-200 in most cases

Market your Financial Assistance Efforts

[Home](#)[About](#)[Specialty](#)[Emergency](#)[For Pet Owners](#)[Community](#)[For Vets](#)[Careers](#)[COVID-19](#)[Contact](#)[\(401\) 886-6787](#)

A Safety Net For Pets

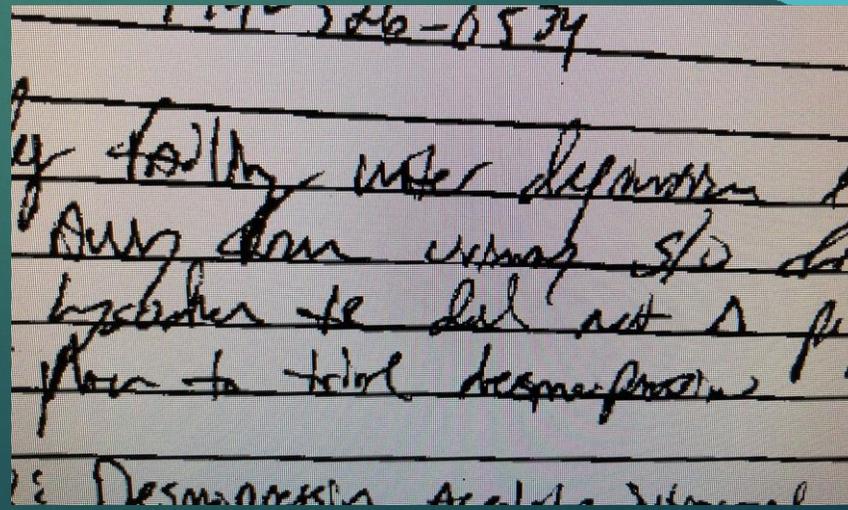
OSVS strives to make veterinary care affordable for every pet owner, but sadly, many pet owners simply cannot afford such care. In an effort to assist some of these owners and help keep these pets as part of their family, OSVS administers a number of assistance funds which are designed to provide financial support to clients in need. OSVS and its staff do not use any of this money for administrative costs; all donated funds go directly toward patient care.

[The Paris Fund](#)[Oncology Fund](#)[CAF](#)[Call to Donate](#)

Practicing Good Medicine is the First Step to Helping Animals

- u Genuinely commit to practicing good medicine
- u Stay on top of the literature since advances and developments in medicine and surgery often reveal less expensive and more efficient ways to treat certain conditions¹
- u Take advantage of continuing education opportunities

¹Doing the Most for Our Patients with the Least: Evidence-Based Veterinary Care on the Cheap; HSVMA webinar



“Cool Hand Luke” Medical Practice

Sometimes doing nothing is the right thing to do

- u Don't do tests if it won't change the way you treat your patient
- u Just because you have expensive equipment, doesn't mean you have to use it
- u Less "injectophilia"
- u Biannual exams are lacking in evidence justifying their use in younger dogs and cats
- u Routine bloodwork in healthy, young animals has low utility



Clinical examples where “Cool-Hand Luke” practice warranted

- **NO** Antibiotics for:
 - Most cats with viral URI's¹
 - Stress leukograms
 - Vomiting (except Helicobacter)
 - Pancreatitis
 - Leukemoid response
 - Chemotherapy “rebound” leukocytosis from recent leukopenia
 - Post-op after after “clean” surgeries²
- Culturing nasal discharge=bad medicine and bad use of \$³
- Don't run fecal if you are going to deworm anyway
- Reconsider met check radiographs in immune mediated disease?⁴



¹JVIM 2017

²Veterinary Surgery Textbook

³Clin Tech Small animal Practice

⁴JVIM 2020

Increasing Access To Care Models

- u AlignCare
- u Stanton Foundation
- u Veterinary School efforts
- u Companion Animal Foundation of Rhode Island
- u Pets in Need(PIN) Clinic
- u Tufts at Tech
- u Pets in Need Clinic of Greater Cincinnati
- u Remote Area Veterinary Services (RAVS)
- u Pets for Life
- u Street Dog coalition
- u Expanding services offered by non-profit veterinary clinics, pounds and shelters
- u Big Box stores expanding into the veterinary market
- u Vaccine only/preventative care clinics (free standing and mobile)
- u AVMF Veterinary Care Charitable Fund (VCCF)



AlignCare

- u **AlignCare™** is a three-year project funded by Maddie's Fund that will provide community-based financial support to families in need of effective pet care.
- u Program now part of the Univ of TN Program for Pet Health Equity
- u The model is more expansive, holistic and ambitious than many other efforts and modelled on the One Health concept
- u The basic idea is that in order to improve health outcomes for humans, you must factor in the animals
- u Families selected for the program receive basic care from enrolled providers
- u Asheville, North Carolina; Knoxville, Tennessee; and Phoenix, Arizona are initial program sites

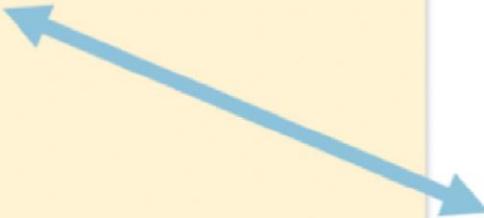
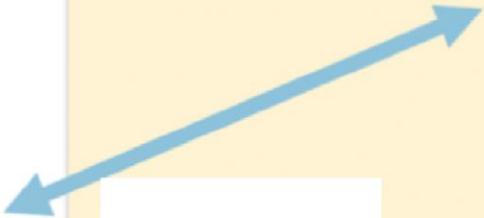


AlignCare®

SUPPORTING FAMILIES THROUGH ACCESS TO VETERINARY CARE

AlignCare-Eligibility Requirements

- u **Bonded Family** – The family views the pet as a family member
- u **Need for assistance** – The family is income eligible as evidenced by current participation in a means-tested public assistance program
- u **Technology-competent** – The family should have a smartphone, be able to interface with apps and have an active email account or have social service agency support and assistance to actively participate in online AlignCare activities.
- u **Willingness to partner** – The family must be willing to work with the Veterinary Social Work Coordinator and the veterinary service provider(VSP)
- u **Willing to Spay or Neuter** - Required except in cases where it is not medically advised by an AlignCare veterinary care partner
- u **Comply with VSP recommendations** –Families must be willing to follow the recommendations of the Veterinary Service Provider



Financing
Education
Tele health



AlignCare[®]

SUPPORTING FAMILIES THROUGH ACCESS TO VETERINARY CARE

Subsidy



Community Support
Mobilizing community resources

Private Citizens



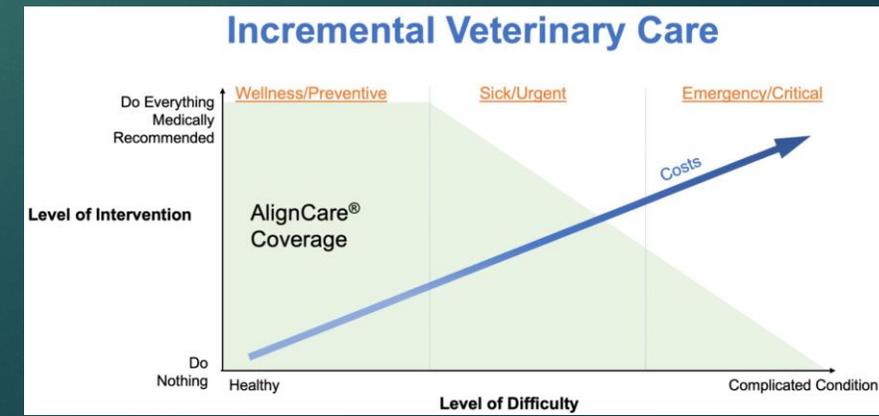
Businesses



Foundations

AlignCare Medical Approach: “Incremental Care”

- u Experience-based
- u Utilizes intuitive judgment of veterinarian
- u Focuses on the most clinically pressing problem(s) the pet may be experiencing
- u Involves a a tiered diagnostic and dynamic therapeutic approach, modified over time
- u Non-critical procedures are avoided to help control costs
- u Utilizes home care provided by the client whenever possible
- u May utilize more telemedicine to provide care/communication
- u Designed to maintain and ideally, strengthen, the human-animal bond



Incremental Care-Criticisms

- u Minimal emphasis on evidence-based medicine
- u Quality of care would seem to be a function of experience
- u Younger vets less likely to be able to provide incremental care
- u Not likely to allow for critical evaluation of diagnostic/treatment decisions
- u What actually is a “non-critical problem”?
- u No evidence that such an approach is actually more cost effective
- u May be more time consuming for client and veterinarian
- u May require more rechecks/trips to the veterinarian for the client and pet
- u May over-rely on telemedicine
- u State licensing boards and professional liability insurance companies may not accept incremental veterinary care as appropriate medical care
- u Isn't a “tiered diagnostic and dynamic therapeutic options over time approach” what most veterinarians already do with financially limited clients?

How do Vet Service Providers get Payed?

- u AlignCare pays 80% of the veterinary charges for initial examinations and ongoing treatment, including prescriptions.
- u Families are expected to pay 20% of the charges, including state mandated vaccinations.
- u The total amount paid for services rendered is based on comparable rates charged by low-cost VSPs in the area, or a maximum of 80% of the VSP's usual charges.
- u Pricing varies amongst communities and will be negotiated on an individual basis.
- u VSPs must submit invoices to The University of Tennessee for payment for services, which will be via electronic transfer of funds.
- u Too time consuming and onerous for some vets/vet practices?
- u Will vets enroll knowing that they will be providing care for at least 20% less than their normal fees?

AlignCare-Status Update

- u The design of AlignCare is largely completed, with the IT system being completed by the end 2020.
- u A total of 8-10 cities were to be part of the first phase.
- u Due to the COVID-19 pandemic, they are in the process of trying to scale up early
- u Any community can now implement AlignCare, pending funding to subsidize the veterinary care.
- u For those interested in more information, check out pphe.utk.edu



Community Manual

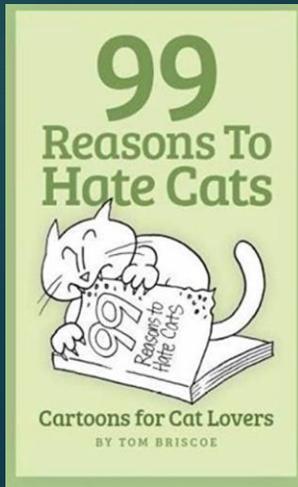
(version 2.5)

1618 Cumberland Ave. 201 Henson Hall, Knoxville, TN 37996
<https://pphe.utk.edu/aligncare>
ppheweb@utk.edu



Stanton Foundation

- u Founded by Dr. Frank Stanton; Psychiatrist and past-president of CBS
- u Supports research and grant programs to promote the welfare of dogs(not cats) and strengthen the human/dog bond.
- u Funding up to 5 million dollars in clinical research grants to promote the concept of “Spectrum of Care” and implementing this in veterinary practices www.thestantonfoundation.org
- u Research geared towards empowering general practitioners to provide quality, evidence-based care at multiple price points
- u Funding veterinary schools to revamp their curricula to include greater emphasis on creating “practice ready” students familiar with the concept of standard of care



Ohio State Opens Frank Stanton Veterinary Spectrum of Care Clinic

- ▶ First primary care clinic operated by a veterinary school to embrace the SOC model to educate and train students
- ▶ These new veterinarians “will have knowledge and mastery of a wider range of diagnostic, therapeutic, business, and communication skills.”



Other Veterinary Schools Embracing the Access to Care Challenge

- u University of Prince Edward Island Atlantic Veterinary College is developing a course that will teach veterinary students to identify and define the spectrum of care and give them the tools they need to address the issue
- u PEI course will use local veterinarians in private practice to help teach and evaluate course
- u Ontario Veterinary College at Guelph “will work with community partners to ensure its veterinary students graduate with the skills and knowledge to support and lead programs that expand animal health care for underserved populations, including identifying and removing barriers to access.”
- u OVC: “The plight of vulnerable animal populations is inextricably entwined with the societal inequities of vulnerable human communities”

Companion Animal Foundation

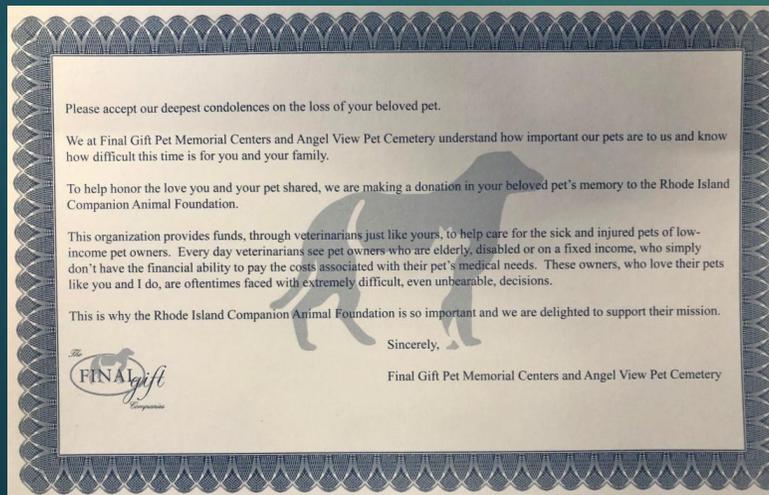
- u Companion Animal Foundation(www.companionanimalfoundation.org)
 - u Founded by 4 Past-Presidents of the RIVMA
 - u IRS 501(c)(3) charity
 - u Provides financial assistance for low-income clients of dues-paying RIVMA members
 - u Provides \$100 voucher for initial exam for low-income pet owners w/out a regular vet
 - u \$700,000 Endowment at the RI Foundation
 - u Approximately \$1,000,000 distributed since inception
 - u User friendly
 - u Veterinarian determines who they want to use funds for
 - u No delay in approving grants for clients in need



Cremation Donation Program

- Two local pet crematorium companies agreed to donate \$5/private cremation to the Rhode Island Companion Animal Foundation (CAF)
- Ashes of every returned pet includes a medal acknowledging that a donation was made to the CAF in that pet's name
- Generates tens of thousands annually for the CAF

To help honor the love you and your pet shared, we are making a donation in your beloved pet's memory to the Rhode Island Companion Animal Foundation.



Pets in Need(PIN) Clinic

- u Partnership between RI SPCA and the Companion Animal Foundation
- u Full-service general practice staffed by paid and volunteer veterinarians
- u Uses strict means testing for low-income pet owners to obtain reduced cost veterinary care
- u Veterinary fees approximately 50% lower than local GPs
- u Donations from food, pharmaceutical and vet distributor companies
- u Provides care for thousands of pets annually
- u Interns from OSVS rotate through the PIN clinic



PETS IN NEED



**VETERINARY
CLINIC**

Tufts at Tech

- u Full service, low cost primary care practice staffed by 4th year Tufts vet students and students from a regional technical high school in their tech assistant program
- u Students supervised by veterinarians and CVTs
- u Clients must pre-qualify for care via strict financial means testing



TUFTS at TECH
Community Veterinary Clinic

Pets In Need of Greater Cincinnati

- u Founded in 2013
- u 8 (part-time) veterinarians on staff
- u Serves pet families whose household income is at or below 200% of the federal poverty level
- u No geographic restrictions
- u After qualifying, an enrollment card is provided, good for one year from date of issue
- u The first appointment copay is \$40.00 with subsequent appt copays of \$20.00 per visit.
- u The copay charge includes the exam by a veterinarian, basic vaccinations, and most prescriptions
- u There is an additional cost for some services
- u After the initial exam, clients are eligible to purchase for a \$7.00 monthly co-pay (per pet) flea/tick and heartworm prevention
- u Payment (cash or debit/credit card) is due at the time of service.
- u Pets must be spayed or neutered in order to maintain enrollment (A voucher is provided that allows spay/neuter for a minimal co-pay)



Pets In Need
OF GREATER CINCINNATI
NONPROFIT VETERINARY CLINIC

Rural Area Veterinary Services(RAVS)

- u Brings free veterinary services to underserved rural communities where poverty and geographic isolation make regular veterinary care inaccessible.
- u Often take place on Native American reservation land
- u Non-profit veterinary outreach combining community service and veterinary mentorship
- u Many animals die from preventable problems (Parvo, Distemper, endoparasitism, other)
- u RAVS is part of the Fund for Animals which oversees the direct care programs of the HSUS

UNITED STATES RESIDENTS LIVING IN POVERTY (BY RACE/ETHNICITY)



Source: U.S. Census Bureau

THE HUMANE SOCIETY OF THE UNITED STATES



RAVS

- u Each year six RAVS staff members and more than 350 volunteers provide veterinary care for more than 7,000 animals,
- u Valuable training and experience for vet tech and vet students
- u Typical RAVS Team
 - u 10-15 vets and vet techs
 - u 25-35 vet students
- u Typical RAVS Clinic
 - u Lasts 1-2 weeks
 - u Performs 30-50 surgeries/day
 - u Sees 300-500 patients/week
- u Volunteer with RAVS www.ruralareavet.org/



Pets for Life Program

- u Takes a comprehensive, long-term approach to addressing the inequity in and lack of access to pet resources people experience in underserved communities
- u Utilizes door-to-door community outreach and pet owner support services
- u Builds trust and positive relationships within the communities that are served
- u Focuses on effective outreach strategies and long-term sustainability
- u “No one should be denied the opportunity to experience the benefits, joy and comfort that come from the human-animal bond”
- u Considers access to veterinary care a social justice issue
- u An affiliate organization of The HSUS



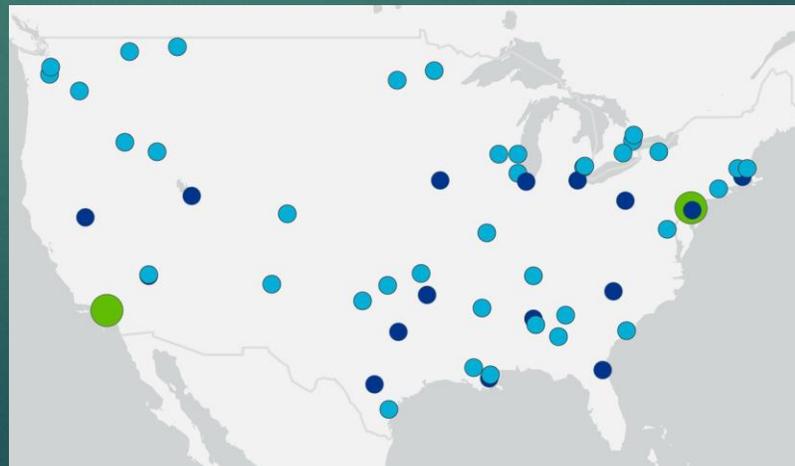
Pets for Life

- u Provides free veterinary care, supplies, services and information to pet owners
- u PFL focuses on three distinct but intersecting areas: direct care, training and mentorship, and policy reform
- u Supplies mentorship and in-depth guidance to local organizations interested in starting a PFL program in their community
- u Current program hubs include Los Angeles and Philadelphia
- u Pets for Life. <https://www.animalsheltering.org/programs/pets-for-life>



Tools to bring Pets for Life to your community

Start a community outreach program



SUSTAINABILITY GUIDE



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Street Dog Coalition

- u A 501(c)(3) charity founded by Colorado vet and HSVMA member, Dr. Jon Geller in 2015
- u Mission: to provide free veterinary care and related services to pets of people affected by homelessness.
- u Teams include volunteer veterinarians, vet students, vet-techs, social workers, doctors, dentists, allies, and advocates including students in One Health fields of study.
- u Some teams work in collaboration with street medicine programs provided by hospitals and medical schools.
- u Students from many veterinary schools have participated in street clinics providing them an opportunity to serve their community and improve their history-taking and physical exam skills.



Street Dog Coalition

- u Basic preventive care
- u Treatment of minor medical problems
- u Provision of flea/tick control and Heartworm prevention products
- u Vouchers for reduced cost or free spay/neuter surgeries
- u “We are committed to protecting the human-animal bond and caring for the lives on both ends of the leash.”
- u Currently active in over forty cities across the U.S.



Street Dog Coalition "Vets for Vets"

- u Cares for the pets of homeless veterans through street clinics
- u There are still around 30,000 homeless veterans in the United States
- u 22 commit suicide every day
- u For many, their pets give them a reason to live
- u "Sometimes for these homeless Veterans, they can have thoughts of suicide, so in a case like this often their dogs are the only thing between them and ending their lives."
- u Get involved: www.thestreetdogcoalition.org/



#SpayTogether

- u A stimulus fund administered by The Humane Society of the United States that provides surgery support grants, on-ground assistance and training in high-quality/high-volume spay and neuter procedures
- u Provides discounted veterinary supplies and services to shelters and clinics affected by COVID-19.



Non-Profits Expanding Veterinary Services

- u More non-profits (adoption facilities, shelters, rescue organizations) are increasing access to care by adding veterinary services, vaccinations and product sales to their offerings
- u Veterinarians have generally opposed these as competitively unfair
- u Should veterinarians support efforts to expand these offerings but require means testing?
- u In 2019 Washington state passed a bill allowing non-profits to offer expanded veterinary care to the public's animals. Proof of income and need must be demonstrated.

Alabama veterinarians take sides on nonprofit spay-neuter clinics

April 8, 2013

Julie Scheidegger



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LIVE ▾



9 ways to get cheap or free vet care for your pet

SEPTEMBER 9, 2016 / 2:12 PM / MONEYTALKSNEWS



General Practice Chains Focused on Affordability

u VetIQ (located in WalMart)

- u Wellness Centers provide **transparent, up-front pricing with no office visit fees**
- u Walmart aims to have **100** VetIQ clinics open in its stores within the next 12 months, growing from the 21 it has today
- u Walmart also launching an online pet pharmacy

u Vitality Vet

- u Mission: offer high quality, affordable, and convenient veterinary care to pets across the United States. By offering **more cost-effective** diagnostic, wellness, and surgery pricing to clients, Vitality improves the level of care for ALL pets.

PetIQ to open veterinary services clinics in Walmart stores

The company projects more than 1,000 additional veterinary services clinics in retail-partner locations through 2023

March 20, 2018



PetIQ announced it is opening 20 veterinary services clinics in Walmart locations. This marks the beginning of PetIQ's plan to expand veterinary services to leading retailers following the acquisition of **VIP Petcare in January of this year**, according to the pet medication and wellness company.



It's Easy!

We take care of everything!

No embarrassing calls to vets begging for prescriptions transfers.

Affordable, Integrated Pet Wellness

The vertical integration of our veterinary services, manufacturing and distribution segments makes PetIQ well-positioned to lead the industry by better serving our partners and pet parents across the country.



Veterinary Clinics

- 41 States
- 250 Retail Partners
- 3,400 Clinic Locations
- 70,000+ Mobile Clinics
- 100+ Wellness Centers
- 12M+ Pets Served in 2019



Manufacturing

- 1,200+ Items Manufactured
 - Flea & Tick
 - Health & Wellness
 - Prescription Drug
 - Treats
- 780,000+ Sq. Ft. of Our Dedicated Manufacturing Space
- EPA/FDA Licensed
- SQE Certified

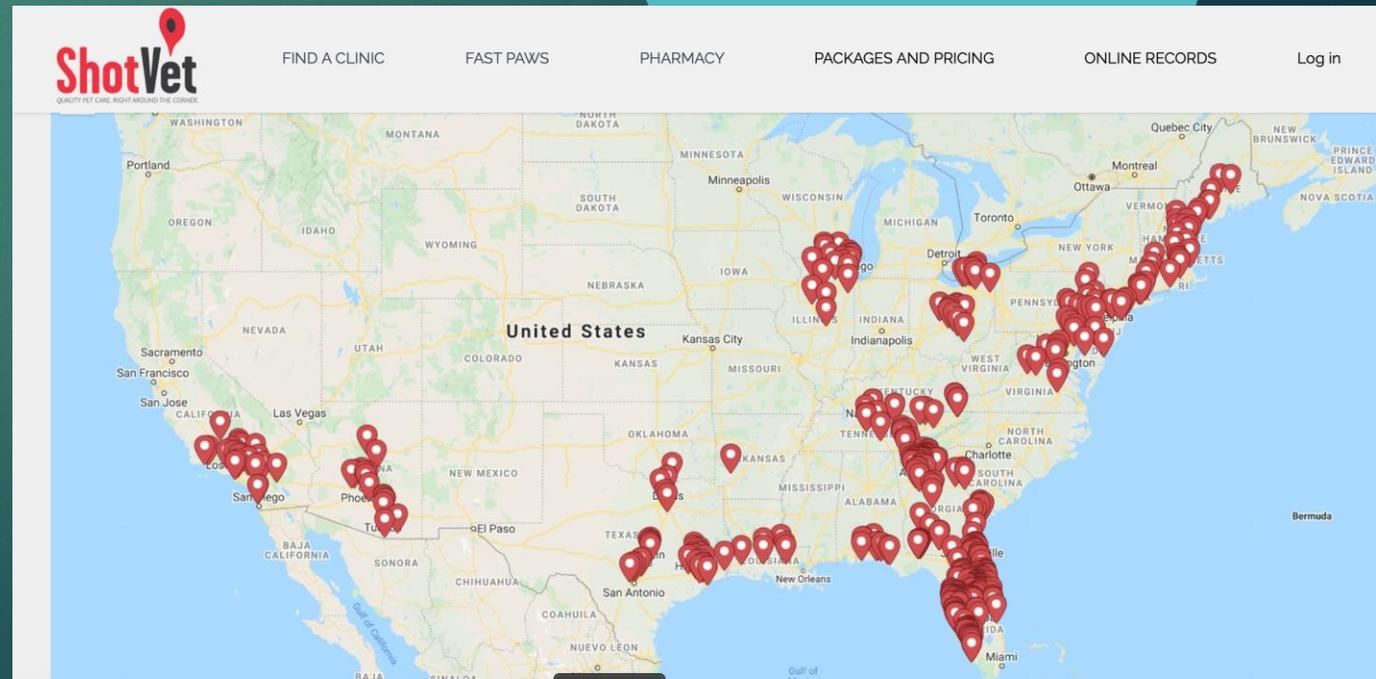


Distribution

- 500+ Distributed Medications
- Prescription and OTC
- Leading Animal Health Partner to Retailers
- 24-Hour Delivery to Any Pharmacy

Preventative Care/Vaccine Clinics

- u VIP • petcare
- u ShotVet
- u VetIQ Community Clinics
 - u more than 3,000 locations in 41 states
- u VetCo clinics at Petco
- u Pop-Up Clinics
- u Mobile vaccine clinics



Some vet care with your UberEats?

- u Multiple startup companies such as KwikVet, VetPronto, and Vetted are trying to create an Uber-type model for house call vet care
- u Vets and vet techs are considered independent contractors
- u Pet owners go to an online app to summon a local veterinarian
- u Apart from increased convenience and decreased pet stress, most offer cost savings compared to traditional B&M practices

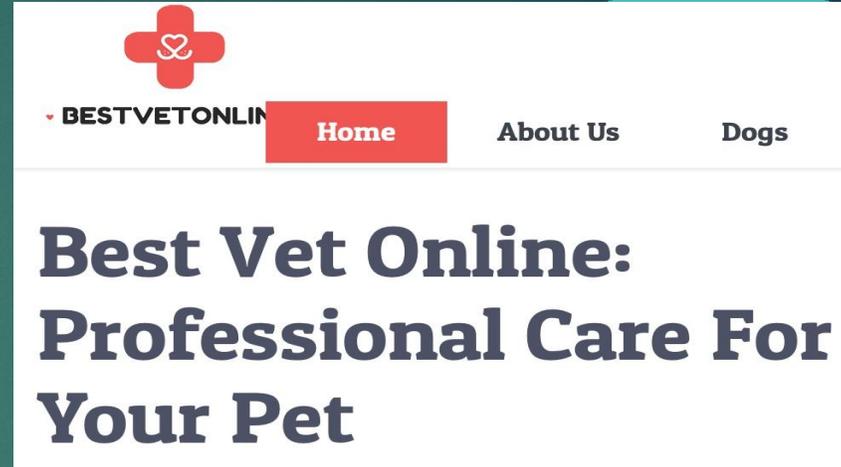


Free (or almost free) Online Veterinary Advice

Free Veterinary Advice – Ask an Online Vet for Free

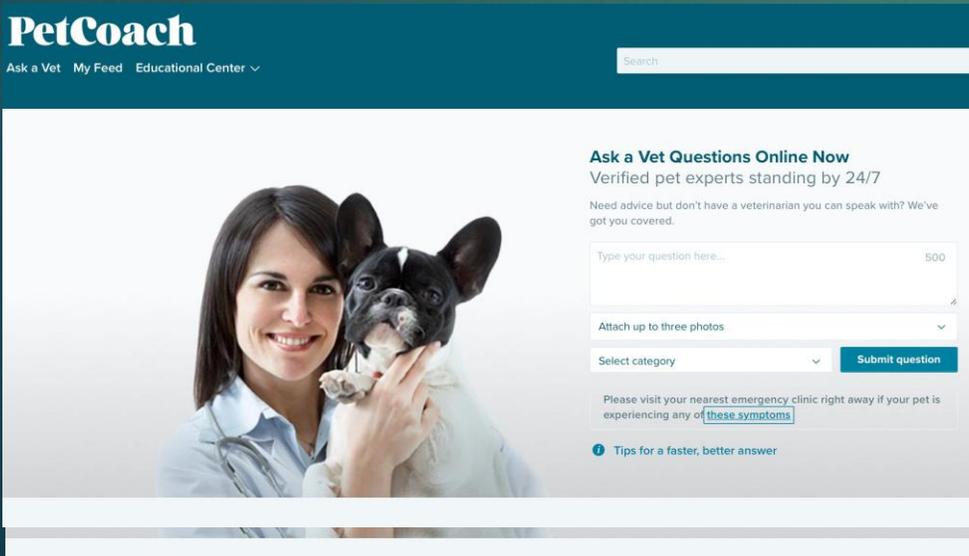
Finding sources of online vet advice can be quite difficult. There is always a balance between wanting the best service from knowledgeable veterinarians and wanting to pay the least amount. VetLive.com is not a free service but we offer premium concierge online vet advice. Here is what differentiates us:

- Chat back and forth with a veterinarian. Our consults are a dialogue where you are not charged until you are satisfied
- If we need to get a second opinion from a specialist, we can and will do so (ophthalmologist, internist, surgeon, endocrinologist, exotics, etc. etc.)



The screenshot shows the top navigation bar of the Best Vet Online website. It features a red cross logo with a white heart inside. To the right of the logo is the text "BESTVETONLINE". Below this, there are three navigation buttons: "Home" (highlighted in red), "About Us", and "Dogs". Below the navigation bar is a large white box with the heading "Best Vet Online: Professional Care For Your Pet" in a bold, dark blue font.

Chewy customers can get advice in real time from a licensed veterinarian about their dogs or cats. The service, "Connect-with-a-Vet," is free for customers who are part of Autoship, the company's subscription program that automatically ships deliveries of food or other pet goods.



The screenshot shows the PetCoach website interface. At the top left is the "PetCoach" logo. Below it are navigation links: "Ask a Vet", "My Feed", and "Educational Center". A search bar is located at the top right. The main content area features a large image of a smiling female veterinarian holding a small black and white dog. To the right of the image is a form titled "Ask a Vet Questions Online Now" with the subtext "Verified pet experts standing by 24/7". Below this, there is a text input field for the question, a "Submit question" button, and a dropdown menu for "Attach up to three photos". At the bottom of the form, there is a link to "these symptoms" and a "Tips for a faster, better answer" link.

A Modest Proposal?

- u Costs of University and tertiary care referral facilities are often cost prohibitive
- u Vaccine and preventative care revenue is going to continually decline for many GPs
- u For GPs, performing more diagnostics/procedures “in-house” may be the best way to increase access to care
- u Despite some fledgling efforts, universities are not/cannot adequately prepare students to “hit the ground running” with their first job
- u Students graduate with too much “referofilia”
- u Too many GPs do not have the comfort level needed to work up and manage certain common conditions
 - u Endocrine disease (Cushing’s, diabetes, Addisons, other)
 - u Chronic respiratory disease (tracheal wash, BAL)
 - u Complicated anesthesia protocols
 - u Common emergency surgeries (splenectomy, cystotomy, enterotomy, dystocia, etc.)
 - u Blood dyscrasias (blood smear evaluation, bone marrow aspirate, other)
 - u Many others
- u **The answer: 3-yrs of vet school followed by mandatory 1 year internships after graduation**

What can you do in *your* clinic?

- u Budget funds annually to help pets/clients in need
- u Determine criteria for which these funds will be distributed
- u Increase payment options available in your practice
- u Sign up for AVMF Veterinary Care Charitable fund
- u Put a donation box on your reception desk
- u Become an AlignCare clinic site
- u Approach crematory companies about a donation program
- u Clinical research proposal for the Stanton Foundation
- u Reach out to local non-profit animal groups to see what they need
 - u Free post-adoption exams
 - u Discounted services for shelterpets
 - u Consider offering discounts to rescue organizations/allow them to run a tab
- u Be aware of outside funding options available in your area
- u Consider having your state VMA introduce legislation to help increase access to care
 - u License plate initiative
 - u CE credit for providing pro-bono services to non-profits



Think Outside Your Practice Walls¹

- u Consider providing off-site S/N services for non-profits and the shelter community
- u Donate time to local shelters and rescues for pre-adoption exams
- u Donate time or reduced cost veterinary care for shelter animals
- u Join a Pets for Life program
- u Start or join an existing Street Dog Coalition chapter
- u Go on a RAVS trip
- u Be a "bridge" between the shelter community and your state VMA
- u Consider plagiarizing one of the Access to Care models you heard about today
- u Be aware of low-cost and non-profit clinics in your area
- u Get involved. A little bit of something is better than a whole lot of nothing!

¹Win-Win: The Value of Shelter/Private Veterinary Practitioner Collaboration; HSVMA Webinar



The End



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