



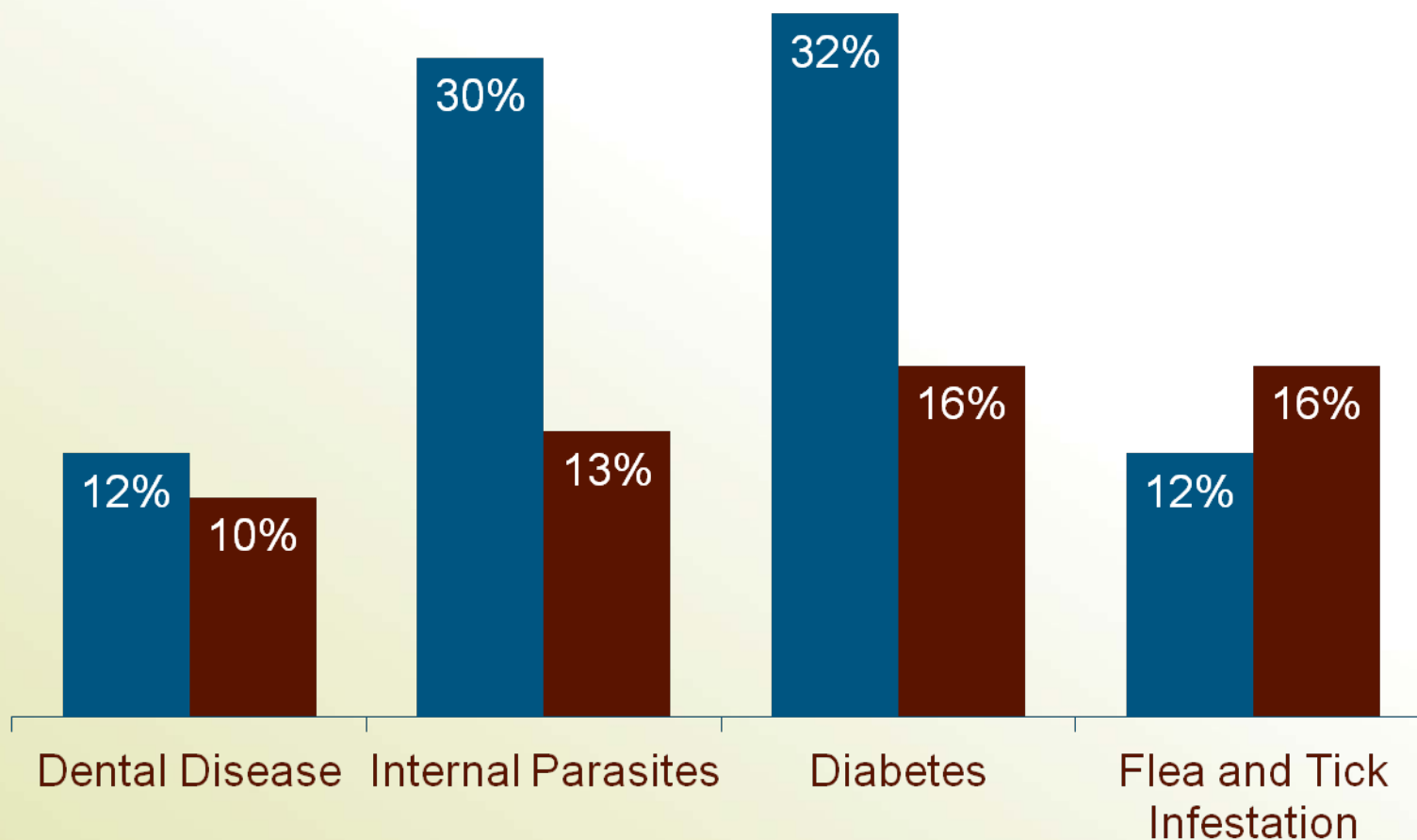
The Partnership for Preventive Pet Healthcare

March 11, 2012



The Health of Our Nation's Pets Is at Risk

Increase in Prevalence Rates 2006-2010





An Important Issue: Veterinary Visits Continue to Decline

**Decline in pet visits
for 8 consecutive
quarters**
- VCA Antech

**13% drop in average
patients per week**
-DVM, 2009

**Negative percent
growth in visits for 9
consecutive months**
- AAHA, 2010

**Dog visits per vet
down 21% since
2001**
- AVMA, 2006



Visits

**Cat visits per
vet down 30%
since 2001**
- AVMA, 2006

**Average number of
active clients per
FTE down 17%**
- AAHA, 2010

**+50% of vets had
fewer patient visits
during 2010 vs. 2009**
- NCVEI, 2010



A Long-term Trend

Started almost a decade ago.

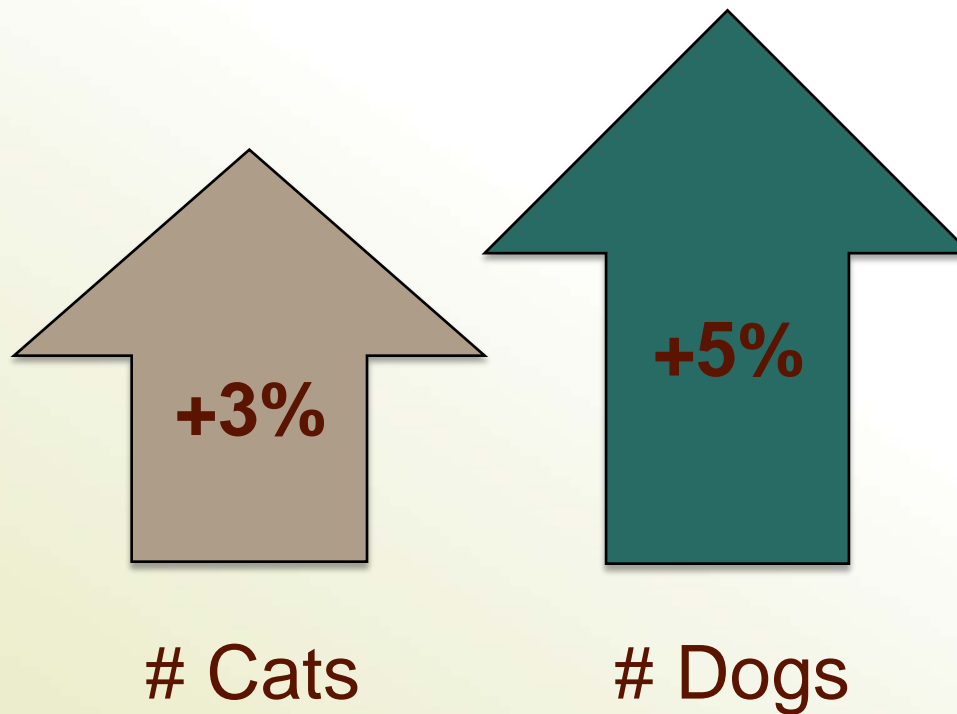
Started before the current economic downturn.





And Yet, Pet Populations Have Risen

2005-2009





Partnership for Preventive Pet Healthcare™



Our mission:

To ensure that pets receive the preventive healthcare they deserve through regular visits to a veterinarian

Our vision:

To improve the overall health of our pets



Composition of The Partnership



TIER 2



TIER 3





Overall Plan of Action

- A multi-year initiative to:
 - Promote, engage, and support the veterinary profession
 - Drive pet owner awareness of the value of preventive healthcare



Partnership Objectives

1. Address the increasing prevalence of preventable diseases and the declining health of our nation's pets
2. Enhance pet owners' perceived value of preventive veterinary care
3. Ensure regular veterinary visits become the norm
4. Increase the understanding of the veterinarian's central role in the health and happiness of pets
5. Make increasing preventive healthcare of cats a priority





Overall Plan of Action





AAHA-AVMA Canine Preventive Healthcare Guidelines

AAHA-AVMA Canine Preventive Healthcare Guidelines



Frequency of Visits

All dogs should have a veterinary examination at least annually. For many dogs, more frequent visits may be appropriate. Decisions regarding specific frequency of visits should be made based on individual needs of the dog.

Health Evaluation

Subjective

History, including evaluation of

- ☐ Life style and life stage
- ☐ Behavior
- ☐ Diet

Objective

Comprehensive physical examination, including

- ☐ Dental assessment
- ☐ Pain assessment
- ☐ Body and muscle condition scoring

Assessment

On the basis of history and physical examination findings, assessments are made for:

- ☐ Medical conditions
- ☐ Infectious and zoonotic diseases
- ☐ Parasite prevention and control
- ☐ Dental care
- ☐ Genetic, breed and age considerations
- ☐ Behavior
- ☐ Nutrition



Development of these guidelines was supported through an educational grant from the Partnership for Preventive Pet Healthcare.

These guidelines were developed jointly by the American Animal Hospital Association (AAHA) and the American Veterinary Medical Association (AVMA) to provide information for practitioners regarding the care and treatment of their canine and feline patients. The information contained in these guidelines should not be construed as dictating an exclusive protocol, course of treatment or procedure. These guidelines are not intended to be an AAHA or AVMA standard of care. AAHA and AVMA hope that you find these guidelines useful.

Copyright © 2011 American Animal Hospital Association (aaahanet.org) and American Veterinary Medical Association (avma.org). Reprinted with permission. All rights reserved.

Plan

Client communication and education plan to include:

Diagnostic plan:

Every dog should have:

- ☐ Annual heartworm testing in accordance with existing guidelines
- ☐ At least annual internal parasite testing

Customized plan based on assessment:

- ☐ Other diagnostic tests (including dental radiographs)
- ☐ Early disease screening tests
- ☐ Genetic screening tests

Therapeutic plan:

Every dog should receive:

- ☐ Year-round broad-spectrum parasite control with efficacy against heartworms, intestinal parasites and fleas

Customized plan based on assessment:

- ☐ Tick control as indicated by risk assessment
- ☐ Therapeutic recommendations
- ☐ Dental recommendations
- ☐ Behavioral recommendations
- ☐ Dietary recommendations

Prevention plan:

Every dog should have or receive:

- ☐ Immunization with core vaccines in accordance with existing guidelines
 - Rabies virus
 - Canine distemper virus
 - Canine parvovirus
 - Canine adenovirus-2
- ☐ Appropriate identification including microchipping
- ☐ Reproductive and genetic counseling and spaying or neutering unless specifically intended for breeding purposes

Customized plan based on assessment:

- ☐ Immunization with non-core vaccines in accordance with existing guidelines
- ☐ Other preventive recommendations and counseling regarding zoonotic diseases

Follow-up plan:

- ☐ Establish a plan for follow-up based on assessment and future care recommendations
- ☐ Set expectations for next visit

Documentation:

- ☐ Thorough documentation of the patient visit



AAHA-AVMA Feline Preventive Healthcare Guidelines

AAHA-AVMA Feline Preventive Healthcare Guidelines



Frequency of Visits

All cats should have a veterinary examination at least annually. For many cats, more frequent visits may be appropriate. Decisions regarding specific frequency of visits should be made based on individual needs of the cat.

Health Evaluation

Subjective

History, including evaluation of

- ☐ Life style and life stage
- ☐ Behavior
- ☐ Diet

Objective

Comprehensive physical examination, including

- ☐ Dental assessment
- ☐ Pain assessment
- ☐ Body and muscle condition scoring

Assessment

On the basis of history and physical examination findings, assessments are made for:

- ☐ Medical conditions
- ☐ Infectious and zoonotic diseases
- ☐ Parasite prevention and control
- ☐ Dental care
- ☐ Genetic, breed and age considerations
- ☐ Behavior
- ☐ Nutrition



Development of these guidelines was supported through an educational grant from the Partnership for Preventive Pet Healthcare.

These guidelines were developed jointly by the American Animal Hospital Association (AAHA) and the American Veterinary Medical Association (AVMA) to provide information for practitioners regarding the care and treatment of their canine and feline patients. The information contained in these guidelines should not be construed as dictating an exclusive protocol, course of treatment or procedure. These guidelines are not intended to be an AAHA or AVMA standard of care. AAHA and AVMA hope that you find these guidelines useful.

Copyright © 2011 American Animal Hospital Association (aaahanet.org) and American Veterinary Medical Association (avma.org). Reprinted with permission. All rights reserved.

Plan

Client communication and education plan to include:

Diagnostic plan:

Every cat should have:

- ☐ Heartworm testing in accordance with existing guidelines
- ☐ Retrovirus testing in accordance with existing guidelines
- ☐ At least annual internal parasite testing

Customized plan based on assessment:

- ☐ Other diagnostic tests (including dental radiographs)
- ☐ Early disease screening tests
- ☐ Genetic screening tests

Therapeutic plan:

Every cat should receive:

- ☐ Year-round broad-spectrum parasite control with efficacy against heartworms, intestinal parasites and fleas

Customized plan based on assessment:

- ☐ Tick control as indicated by risk assessment
- ☐ Therapeutic recommendations
- ☐ Dental recommendations
- ☐ Behavioral recommendations
- ☐ Environmental enrichment recommendations
- ☐ Dietary and feeding recommendations

Prevention plan:

Every cat should have or receive:

- ☐ Immunization with core vaccines in accordance with existing guidelines
 - Rabies virus
 - Feline panleukopenia virus
 - Feline herpesvirus-1
 - Calicivirus
- For kittens, feline leukemia virus*
- ☐ Appropriate identification including microchipping
- ☐ Reproductive and genetic counseling and spaying or neutering unless specifically intended for breeding purposes

Customized plan based on assessment:

- ☐ Immunization with non-core vaccines in accordance with existing guidelines
- ☐ Other preventive recommendations and counseling regarding zoonotic diseases

*Feline leukemia virus vaccine is considered a non-core vaccine but is highly recommended for kittens, according to AAHP Feline Vaccine guidelines.

Follow-up plan:

- ☐ Establish a plan for follow-up based on assessment and future care recommendations
- ☐ Set expectations for next visit

Documentation:

- ☐ Thorough documentation of the patient visit



2011 Key Research

- Research centered on identifying insights into the opinions of veterinary professionals **and** pet owners
- Three key research tracks completed
 - Benchmarking Study
 - Psych Probes In-depth Interviews
 - Behavior Change Task Force
 - “Burning” Message Platform testing (in progress)
- The research findings:
 - The foundation for communication messages



Benchmarking Research

Key Learnings:

- Veterinarians recognize that there is a problem with the profession!
 - Self-positivity bias – it is a problem for “the profession” and not as much with “my” practice
 - Most believe that the causes are beyond their control
- Veterinarians see room to improve communicating the importance of preventive pet healthcare to clients
- They feel preventive pet healthcare is very important but are not sure pet owners feel the same
- The Partnership is perceived as valuable and veterinarians are supportive of it



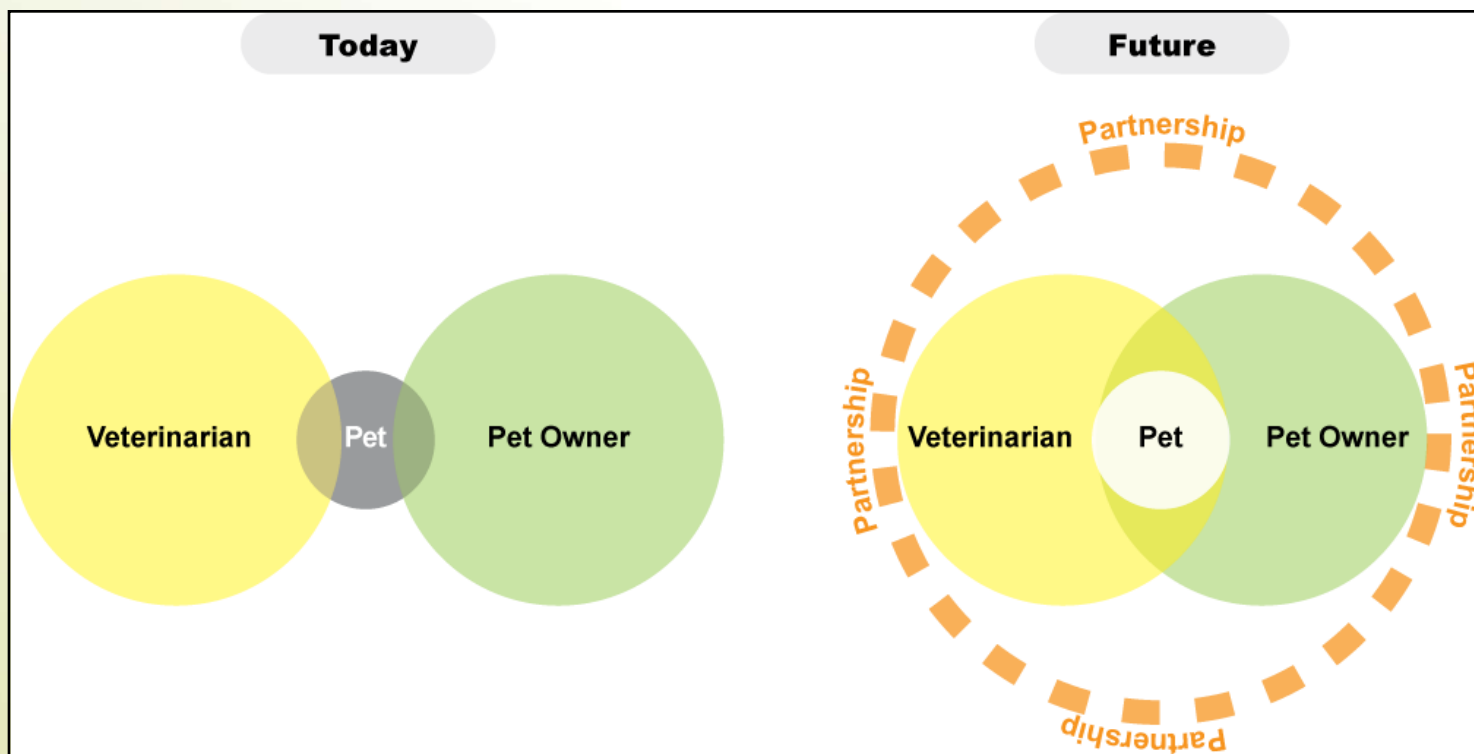
Psych Probes Research

Key Learnings:

- Veterinarians have a strong need for relationships with animals
- The relationship between pet owner and veterinarian is most often **based on transactions**
 - More about vaccines, heartworm, and acute care
 - Less about communications, relationships, and “lifetime” plan
- Veterinarians have trouble conveying the “ask”
 - They fall short in clearly explaining what preventive care means
 - A difficult economy has made this even more challenging
- Veterinarians fear loss of control

Psych Probes Research

The Partnership is seen as a collaborative ally to strengthen the bond between veterinary healthcare team and pet owner





Behavior Change Task Force

Key Learnings:

- Decision to change requires self-actualization (acknowledgement that there is a problem)
- Behavior change occurs *gradually* along a continuum:
 1. **Pre-Contemplative:** Aware of a problem but not even thinking about making a change
 2. **Contemplative:** Conclusion that change should be made; may act within 6 months
 3. **Readiness:** Commit to take action in the next 30 days



2012 Plans: **Awareness**

Primary Tactics

- Speakers Bureau and Key Opinion Leaders (KOLs)
 - Speakers at national & regional meetings and state VMA meetings
 - Public relations opportunities utilizing KOLs
- Monthly newsletter pieces for state and allied veterinary organizations
 - Distributions through ASVMAE and other Partnership Members
- Involve state and allied association leadership
 - “Meeting in a Box”
- Utilization of Member sales forces
 - Opportunities to be developed in concert with the Marketing Committee
- CVM Strategy Meeting (March 28)

2012 Plans: Engagement

The Opportunity

Hypothesis: Behavior change requires self identification and acceptance of areas that need to be addressed.





The Opportunity: Sample Question

Pet Owner Survey

1. How often do you take your pet to the veterinarian for routine checkups/preventive care (i.e., OTHER THAN when your pet is sick)?

- ☐ Every 6 months
- ☐ At least once a year
- ☐ At least every 2 years
- ☐ At least once every 3-4 years
- ☐ Never; I only take my pet to see the vet when my pet is sick

Veterinarian and Staff Survey

1. On average, how often do you think pet owners bring their pets to your practice for routine checkups/preventive care (i.e., OTHER THAN when the pet is sick)?

- ☐ Every 6 months
- ☐ At least once a year
- ☐ At least every 2 years
- ☐ At least once every 3-4 years
- ☐ Never; pet owners bring in their pets only when sick



Diagnostic Tool, Ratings and Gap Analysis

Diagnostic Tool	Pet Owner Rating of Vet	Vet Self-Rating	The Opportunity
Preventive Care	2	4	-2
Communication	3	3	0
Price/Value	1	4	-3
The Visit Experience	4	3	+1



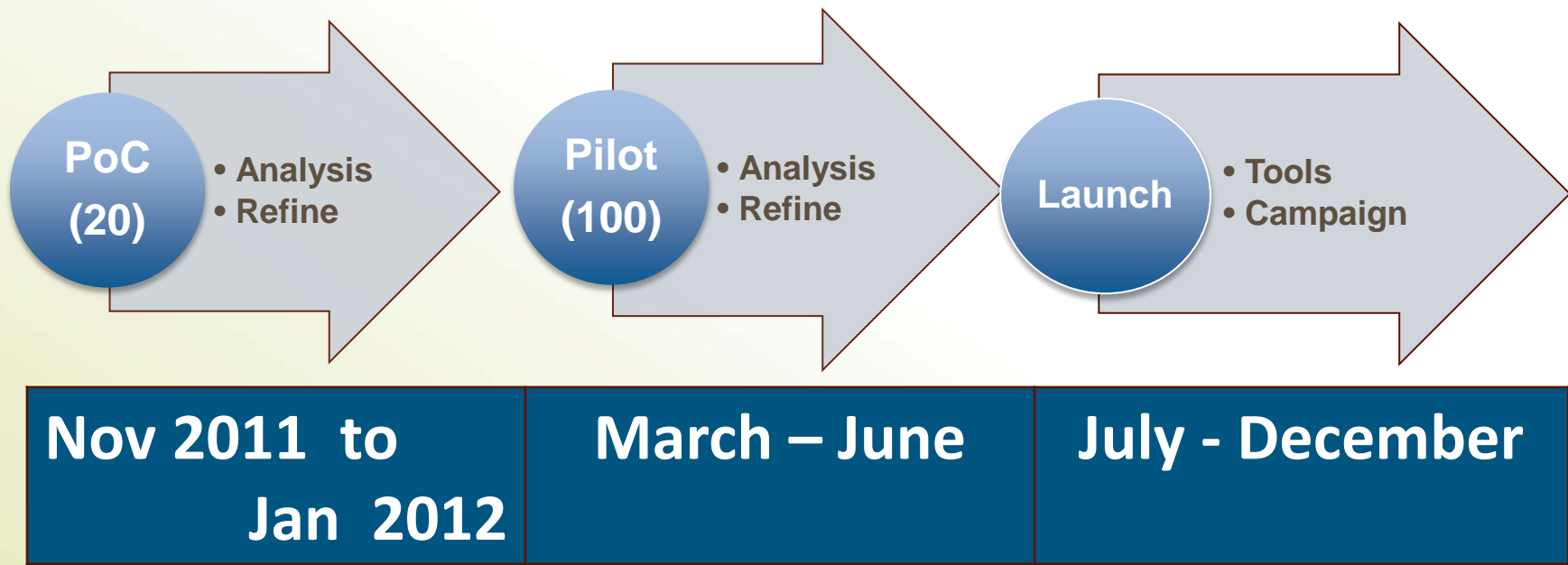
Example purposes only

1-5 Scale

Poor to Excellent



2012 Plans: “The Opportunity”





2012 Plans: **Engagement**

Drive Availability of Key Tools

Develop, Repurpose, or Co-Promote
(Not Reinvent the Wheel!)

1. Feline friendly practices
2. Implementing the guidelines
3. Communicating value & benefits of preventive healthcare
4. Use of internet & social media as practice marketing tools
5. Preventive healthcare payment programs



2012 Plans: **Engagement**

Case Studies

- 4-5 practices to be visited by management and communication consultants
- Participate in *The Opportunity*
- Write up and publicize the cases

Success Stories

- Practices completing “The Opportunity” would be interviewed initially and again 3-6 months later
- Those demonstrating successful follow-through and implementation of changes will be publicized to the profession



2012 Plans: **Consumer Awareness**

General Objectives

The Partnership's plans include a consumer awareness campaign to drive client visits

Strong sense that consumer campaign should follow practice changes in order to optimize the client visits

Subject to on-going review, 2012 consumer effort will be limited to:

1. Message development and testing
2. "Soft" launch via web and social media



The Partnership: An Unprecedented Opportunity for the Profession

- The profession has never before had such a broad coalition of associations and industry
 - We have never before had the level of resources available
 - 2011 Contributions: \$1.5 million
 - 2012 Commitments: \$2.5 million
 - Projected 2013 Commitments: >\$3.5 million
 - Total Projected 3 Year Total Resources: **\$7 million**
- Nevertheless.....**



The Partnership: An Unprecedented Opportunity for the Profession

- **This effort will not succeed without the engagement of the profession and the whole practice healthcare team**
- **It needs to start at our CVM's**
- **As a profession, we are not maximizing the health of our pets.**
- **We need more emphasis on promoting preventive care**
- **We must more effectively communicate to our clients the value of preventive care**



Partnership website



Partnership for Preventive Pet Healthcare

[Home](#)

[Challenge and Solution](#)

[Who We Are](#)

[News and Updates](#)

DEDICATED TO IMPROVING OVERALL PET HEALTH

The bond between pet and owner is fused from a mutual need for loving companionship. It takes a deep level of care to keep that relationship healthy. The veterinarian has an essential role in ensuring that the relationship is truly enduring by providing preventive pet healthcare.

Today, many pets do not get the preventive care they need. Over the last 5 years, common and often preventable conditions in cats and dogs continue to grow. As members of the veterinary profession, we can always do better to help pets and their owners enjoy longer, healthier lives together.

That is why we formed the *Partnership for Preventive Pet Healthcare* — a team of veterinary professionals, academia, and industry leaders focused on a singular mission: to ensure that pets receive the preventive healthcare they deserve through regular visits to a veterinarian.

Ultimately, our vision is to improve the overall health of our pets.

"The health of our pets is at risk. Veterinarians are the ideal partners, the best source of information, and providers of vital preventive care."

Dr. Ron DeHaven

CEO, American Veterinary Medical Association
Chairman, Partnership for Preventive Pet Healthcare

Want to know more? [Sign up here.](#)





**An Important Mission. A Powerful Partnership.
Be Part of It!**

