



## Forming An Emergency Cooperative: Success Story

### Colorado Emergency Coverage Co-op Supports Patient Care and Practitioner Wellbeing



*Dr. Marc McCall*

The demands of providing emergency care to clients can be overwhelming, especially for solo practitioners and those in small practices. Dr. Marc McCall, who in 1985 founded Cherry Creek Equine as a solo ambulatory practice in Elizabeth, Colo., knows the demands all too well.

After being on call perpetually for nine years, Dr. McCall met for lunch in 1994 with three other solo practitioners in

his area, approximately 40 miles southeast of Denver. The four competitors shared important commonalities. Namely, each was a competent veterinarian and desired time off to be with their families and enjoy personal interests. Over lunch, the four struck an old-fashioned handshake agreement to begin sharing emergency coverage in the form of a co-op.

#### Founding principles

While the members of the co-op may have changed over the past 27 years—Dr. McCall is the only original member left—the tenets of the agreement have remained etched in stone: The on-call veterinarian must (1) be attentive to the needs of all cooperative clients when it is their turn, (2) treat each client as if they are their own, (3) refrain from performing “routine” work during the emergency visit, and (4) return each client to the practice of origin on the next business morning.

#### How it works

The emergency coverage schedule is determined quarterly, usually over a group dinner. The scheduling only takes about 10 minutes, and holidays are distributed evenly throughout the year. The remainder of the time is spent enjoying collegiality between colleagues, which strengthens the mutual trust and respect established through satisfactory emergency response to the others’ clients.

When a client tries to reach Dr. McCall after hours when he is not on call, he still chooses to have the emergency funnel through him first via an answering service that transcribes the call and sends him an audio recording and transcribed text. Dr. McCall forwards the message to the on-call veterinarian, occasionally adding a helpful comment such as alerting of a behavior idiosyncrasy with the horse.

During the initial phone conversation, the on-call veterinarian informs the client that payment is expected at the time services are rendered. Each practice bills their own work so there is no exchange of money between practices. Should the emergency veterinarian become unable to address all after-hours requests, they first call the client’s primary practice before reaching out to the other co-op members for assistance.

At the conclusion of each emergency coverage period, the on-call veterinarian phones the primary practice for any patient seen

during the shift to relinquish the case and discuss case details and next steps to ensure continuity of care. The call occurs at 7:00 a.m. to help the receiving veterinarian schedule their day in case there is a need for more urgent follow-up. Medical records are created and maintained by the practice that sees the emergency. Medical records and images aren’t transmitted unless requested by the receiving practice.

#### Obtaining client buy-in

When introducing the co-op to clients, each practitioner explains its purpose and endorses their colleagues, specifically letting clients know that all are exceptional veterinarians who will take excellent care of their horses. Clients support the concept almost universally—they are happy to have a veterinarian available to help if they were ever to wind up in a bind. The scant few objectors across the gamut of practices were free to seek emergency care outside the co-op.

Initially, the emergency caseloads of each participating practice were very different in volume, and Dr. McCall earned more revenue than usual when on call due to a higher number of after-hours requests. The emergency load leveled out after a few years, and over the long term, Dr. McCall’s annual emergency revenues have remained steady when compared to those accrued prior to entering the co-op.

Each founding doctor entered the emergency co-op expecting to lose a few patients to one of the other practices. Although some patient flux occurred, the impact was negligible as the minor shifts generally evened out across the practices.

#### Honesty and trust are essential

Dr. McCall’s emergency co-op has varied in size from as many as six doctors to as few as three; it currently numbers five. Almost without exception, those who have come into the group have been assets, which Dr. McCall attributes to a collective honesty and trust among members and a desire to treat each other fairly. Only twice in its nearly three-decade existence have co-op members left or been asked to leave due to differing desires for involvement or philosophies.

Being brave enough to take the leap in 1994 has turned competitors into friends and provided Dr. McCall his coveted life away from veterinary medicine to spend more time with family, traveling and attending meetings. He attributes his success, longevity and enjoyment of equine practice in part to his longtime participation in the emergency co-op.

In addition, he recently hired an associate and is convinced that the four-day work week with on-call responsibilities just one night per week and one weekend per month was critical to overcoming current labor market constraints—perhaps providing a blueprint for keeping overburdened equine veterinarians engaged in equine practice.