

Dr. Jessica Martin

"I went from being on call 50% of my life to 16–22% on call per quarter," said Dr. Jessica Martin of the emergency cooperative established in early 2022 between Mountain Pointe Equine Veterinary Services in Hackettstown, N.J., and nearby B.W. Furlong & Associates.

The catalyst behind its establishment, according to Dr. Martin, an associate with Mountain Pointe Equine, was a mutual interest in improving quality

of life for doctors while maintaining a high level of around-theclock care for the practices' equine patients in northwestern New Jersey and eastern Pennsylvania.

Getting started

Doctors from both practices initially met informally over dinner to discuss the feasibility of an emergency cooperative. In the ensuing weeks, participants hashed out the logistics more formally via a Google Doc, including client communication and rollout procedures.

Client communication is key

According to Dr. Martin, Mountain Pointe Equine created a list of clients it considered potentially apprehensive about the change in emergency services and called each personally prior to the announcement to discuss the shortage of equine veterinarians, introduce the idea of a cooperative and address any concerns.

"Many of these phone calls were surprisingly well-received, and there was a lot of support from our clients for improving our quality of life," she said.

Almost four months after the initial group dinner, the practices introduced the emergency cooperative to clients in a joint letter and held a joint Zoom meeting with interested clients to answer questions and allay any concerns.

How it works

Depending on the time of year and availability, between four and eight practitioners participate in the rotation. The emergency coverage radius is approximately one hour in all directions. There is no backup emergency DVM. If the on-call veterinarian is slammed or is tending to an emergency in the opposite direction of a horse that needs to be seen promptly, clients have been provided a list of commercial shippers that could be available to haul their horse into the clinic. In addition, several referral centers within a two-hour radius are available to take emergencies.

During the initial conversation with the on-call veterinarian, the client is informed that payment is required within 24 hours of service and that an Emergency Client Relations Form, including credit card information, must be completed prior to arrival or at the farm as services are rendered. Clients must also enroll in the practice's EZ Pay service that streamlines the payment process by authorizing the credit card to be charged within 24 hours of service.

Each case is transferred back to the primary practitioner the next business morning via phone call or text message with notes on the case and whether further attention is warranted. Medical records are forwarded to the primary veterinarian's practice by 9:00 a.m.

"The biggest growing pain was adjusting to a busier on call schedule with clients you may not be familiar with," said Dr. Martin. "In addition, both of our practices have moved to time-of-service payment, and collecting information from the owners or trainers can sometimes be challenging in the heat of the moment. Most of the clients have come to expect payment at time of service, and this has been extremely helpful in the long run."

Building trust between the groups

The collegiality established among the emergency cooperative veterinarians continues through a monthly virtual meeting during which they hold journal club discussions and address any concerns from recent cases.

The formation of the cooperative has also created an organic support system for the veterinarians. "We have no hesitation calling one another for case input or advice, as each veterinarian has their own specialties and interests," said Dr. Martin.

Dr. Martin credits the success of New Jersey's first emergency cooperative to the comprehensive effort that went into setting it up and communicating the roll out to clients. Within several months of its formation, three additional cooperatives were formed by practices in the state. Her message to other practices that may be thinking of forming a cooperative:

"Find another practice that is the right fit for you and make sure you effectively communicate all expectations with your clients. And don't be afraid of what clients may think—they may surprise you and be incredibly supportive of your efforts to improve your quality of life and mental health!"

