

Dealing with Difficult Clients: Turning Snappy into Happy

Amy Newfield, MS, CVT, VTS (ECC)

Veterinary Team Training

VetTeamTraining@gmail.com

No one told us there would be so many people involved. We went into the veterinary industry because we wanted to work with animals. We wanted to get away from people. Why are there so many people?! Not just people, but angry clients where nothing is good enough.

Clients Are More Demanding

There are no studies or data for what I'm about to declare, but in speaking to my colleagues the majority of us who have been in veterinary medicine for more than 20 years believe the following to be true. Clients are more demanding than ever.

While there is only a good amount of antidotal evidence about this statement when you think about it on the surface level it makes sense. The relationship has changed between pets and people over the past 20 years. The pet/owner bond is stronger than ever thanks to the introduction of effective flea and tick prevention in the late 90s. Owners, now more than ever, feel safe to bring their pets into their beds, up on their couches and fully integrated inside the home.

Thanks to social media clients can see other owners getting the best for their pets so when something goes wrong they scream about it to everyone. Social media has provided clients a voice they normally wouldn't have and that voice can make or break an entire hospital.

With Dr. Google readily available at everyone's finger tips it makes it hard at times to deliver perceived good care. After all, Dr. Google said that raw onions would stop fleas and your hospital prescribed a toxic flea medication that resulted in vomiting and anemia. This disconnect between falsities versus the correct information makes it hard for veterinarians to be successful around clients at times.

With integrating pets fully into our family we have seen them move from pets to "furbabies/furkids." More couples and individuals are choosing not to have human children. The babies they would be having are replaced with the furry kind. The maternal and paternal love that would usually be given to a child is now given to a pet. As such, they expect top notch care all the time, even when they cannot afford it.

Technology also plays into the increase in clients acting demanding. In the 1990s the internet was just a baby. Now the internet rules planet Earth. Clients expect lightning fast everything. Waiting for even a moment is unacceptable. Technology is good and bad for the veterinary profession. Clients are more demanding because they are used to faster service in all industries.

Clients are still behind in purchasing pet insurance for their pet. Veterinarians are behind in pushing for clients to get it. As such clients struggle to pay for the pet care they want. They want the best, but the best comes at a cost. Veterinary medicine is closing the medical gap between themselves and human medicine. Every month that ticks by veterinary medicine has the ability to do more high-end procedure that human medicine can do. We can extend pets' lives longer than we ever thought possible, but it's often expensive. The one thing that would stop clients arguing about money is having pet insurance. Until that day comes, we are always going to have that stress as veterinary professionals.

We Created the Monster

It's not a popular statement, but I'm going to say it. We created the demanding client or at least definitely contributed to the formation of them. The problem is we didn't take lessons from human medicine. We kept wanting to do and be the best. We never said no. We never set limitations. Clients expect everything right now and we give it to them.

Think about the last time you went to your doctor for bloodwork or radiographs. Did you get the results in under 30 minutes? No. In fact, in many cases it took weeks. Your results were mailed to you or perhaps dropped to a patient portal with a note "all within normal limits." That's it. If you had an ailment you would have to wait for your doctor's office to contact you with next steps.

I once had a high-grade stress fracture which was close to becoming a real break in my tibia. I had to wait two weeks to find this information out waiting on the results and my doctor to contact me. Meanwhile for two weeks I walked around and popped ibuprofen like it was going out of style. Certainly that level of care is subpar, but when you think about it perhaps veterinary medicine is offering too much to clients?

I once had a client leave his exam room and start screaming in the front office about how he had been waiting 45 minutes for bloodwork results and how he needed results NOW! After all, the last time he had results in 20 minutes so in his mind we were failing him and his cat.

Veterinary medicine needs to set better boundaries. Set the expectations to your clients up front. Be fair to them and your team. You can use the "no news is good news" for routine bloodwork and have your front desk email the results with a note saying "everything is within normal limits." It's okay to let your clients know they may not receive results for 1-2 business days, but if it is emergent they will be contacted immediately. Veterinary medicine has to get better at setting boundaries.

Trauma and Psychosis

I'm not excusing all nasty clients. There are quite a few that need to be fired from most veterinary hospitals. There have been a few in my career that I flat out despise as much as they despise the hospital. That said, I wanted to write briefly about trauma and psychosis since most veterinary team members have never been introduced to this important concept. For some of our clients, usually those that are acting completely out of their mind, they are having a true trauma-induced psychosis. The name alone will tell you that the client has suffered some type of traumatic event with their pet. Working in the emergency room I have seen plenty of these clients.

By definition psychosis is "a severe mental disorder in which thought and emotions are so impaired that contact is lost with external reality." Some of you immediately thought about a client that fits that exact description. The National Institute of Mental Health describes psychosis as "conditions that affect the mind, where there has been some loss of contact with reality." It's important for us to remember that what traumatizes one individual does not traumatize another. To me the big events that I have seen trauma induced psychosis occur have been when a client has witnessed their pet being hit by a car, broken any bone for any reason, a dog fight, clots in a cat, respiratory distress of any kind, choking, burns, falling through ice, being removed from smoke-filled building, knife or gunshot wounds, seizures or any near death experience including death itself in the case of euthanasia.

I bring this up because in that moment when clients arrive at the veterinary hospital they are often not in a sound mental state. To me it is shocking how many can drive to the hospital

after the traumatic event. By the time they have arrived at the hospital they have run out of fuel. It is important to be aware that these clients cannot hear you and do not understand what you are saying. These are the clients that you may feel are being argumentative (you didn't tell me that) when in reality they never heard you say it in the first place due to the trauma.

Clients who are undergoing a trauma state will often have the inability to recall event or conversations, write simple facts, be breathing faster and have a wide range of emotions (anger to tears). While most are not aggressive, they can become aggressive if they feel provoked. In this mental state clients often try to regain control of the situation by creating unhealthy power struggles with the veterinary team (arguing, threatening, etc.).

In these moments when it is clear the client is out of control and acting irrational it is imperative to keep ourselves safe. De-escalate the situation by focusing on your eye contact, body position, soften your hand position, keep your voice neutral and calm, stand at the same level of them and breathe slower. By you breathing slower and with purpose they often can relax. Be sure you acknowledge what they are saying and you validate their feelings. "I recognize you are angry because you have not seen your dog in over an hour." Be sure you are clear in your language and indicate concern and empathy towards them. "We love pets here and we are trying to do the best for your dog that just got hit by a car. I know you love them too and you are upset." Lastly, find out if there's a friend or family member who can help them. "Do you have a friend or family member you can call to help support you through this? I know it was traumatic seeing him get hit by a car. I want to make sure you are okay."

This type of conversation and the ability to recognize when someone is suffering an altered mental state from a traumatic event is something that veterinary professionals are not taught, but yet it is so important to understand the basic concepts.

Difficult Client Types

For most clients they aren't suffering from a trauma induced mental state. They are simply being difficult, jerks, mean and rude. I find most clients become difficult because of two reasons: 1) money or 2) perceived level of care. Here are some of the most difficult clients we have in our hospitals and ways to convert them from snappy to happy.

The "I WANT IT ALL" Client (IWIA)

These are the clients that demand everything, all the time and nothing is good enough. This client likely spends a lot of money at your hospital and, as such, feel a sense of entitlement and a right to demand extra service or special "perks." This individual usually recognizes and appreciates your hospital and so long as her needs are met they will be your biggest fan.

The IWIA client usually has a tone of voice that is direct and could come across as aggressive. "Hello Susie. It's Ben. I'm going to need Doctor Kelly to see Nutterbutter first thing this morning." Because this person feels entitled they speak with authority.

How to Handle IWIA Clients

- Set boundaries with all clients and keep the lines drawn. Don't let the IWIA take control. Unfortunately all hospitals have "favorite" clients or clients they feel they must cater to more because "they've spent a lot of money." You need to recognize you may have played a role in allowing IWIA to get everything they wanted.
- Appeal to this client's sense of love and dedication to their pet. They want it all because they love their pet. When things get out of control acknowledge it. "I

know you love your pet, but we cannot see you first thing in the morning. We will do our best to squeeze you in during XYZ.”

- Assume good intention with these clients. Too often these clients are seen as burdens, which they are to some level. But there’s a difference between burden and argumentative. If the client service representative responds with, “Are you upset about the bill” that can be seen as an attack by the IWIA client. Assume the best of these clients to avoid conflict.
- Most IWIA respond well to the hospital being honest and direct. This evokes a sense of trust. Once I had built up a great relationships with some of my IWIA I was able to say to them, “Slow the roll there. I know that’s what you want, but here’s why it can’t happen.” Many of them would laugh, “Am I demanding too much?” My reply, “yes you are.”
- Keep reinforcing the boundaries. “Our appointment times only allow for 30 minutes and I can’t keep speaking with you because we’re cutting into the next clients time. I want to be fair to everyone.”

The “You’re In It For Money” Client (YIFM)

Most of the time these clients are struggling with money, but not all. I’ve had clients who have money, but they don’t want to spend the money. Regardless the answer is the same, “You don’t love animals. You just work here for the money.” Everyone in veterinary medicine has experienced this client. This one stabs us in the heart. We know we are struggling financially. We know we love pets and here is this client saying they believe us to be the opposite of that.

How to Handle YIFM Clients

- Have compassion for this client. They are arguing with you because they love their pet, but they cannot afford the care needed for their pet. Recognize this fact with the client and they likely will calm down. “Every one of us who work here love pets. I know you want the best for your fur-kid. Let’s talk this through so we can help you help your pet.” Once we get them back on planet Earth we can then discuss financial options or even suggesting they reach out to a friend/family.
- For those that have the funds, but refuse to help their pets they tend to just be jerks. There’s no sugar coating it. They have chosen to keep their money rather than care for their pet. This one stings us in veterinary medicine. While we want to yell and scream at this client about what buttholes they are there is no sense in doing so. You will waste your time and energy. It’s hard to let it go, but you must. Saying to a client, “I’m sorry you view the medical care as expensive. At this point I’ve offered several ways we could help your pet, but you keep bringing it back to cost. There is nothing I can do to make it any cheaper. Let me know what you decide if anything.” For these client there isn’t anything else you can do. They will make a decision to treat or not. The latter option is the hardest for us.
- Don’t change your pricing and don’t apologize. Don’t devalue your services because someone is yelling at you about their financial issue. Too many times we say, “I’m sorry it is so expensive.” None of us in veterinary medicine are living in a mansion. Most of us are struggling ourselves. Do NOT apologize. You have nothing to be sorry for. When you

apologize you are saying to the client “I admit fault.” Value the work your hospital does by not apologizing.

- Ensure you have done your part by providing estimates (even emergency ones) to your clients so you don’t do the shock-and-awe to them with the bill.

The “Nothing is Good Enough” Client (NIGE)

You have done your best, but it’s not good enough. The NIGE client is unhappy with you, the hospital and everything. This client has been given numerous solutions, but either they haven’t tried them or to the individual they have failed. I once had a client tell me as soon as they came into my emergency room, “My cat is here for some diarrhea. You’re going to suggest fluid and a bland diet. I’m telling you now it doesn’t work.” Awesome. My response, “How about we start with a hello and your cat’s name before we jump to the conclusion that medicine will fail you.” This client is going to require a lot of patience. That said, if you manage to please this client they will forever sing your praises and be a fan of you and the hospital.

How to Handle NIGE Clients

- Don’t let them tell you there’s no solution. You are the expert so tell them that. Inform them of how many other cases you have resolved with the same issue. Be confident and portray that confidence to them. “We know these are the solutions that work for this issue. If you don’t want to try them, that’s up to you.”
- Offer a FEW alternatives, but then stop! If you keep offering other ideas and trying to solve the issue when you know you’ve already given the solution you cause the NIGE to believe they are right. “See, even the doctor doesn’t know what to do.”
- Give details, data and handouts. Many times the NIGE doesn’t trust anyone because everyone around them as failed them in some way. Deep down they are sure you will too. Show them the data and provide clear communication for this individual. Let them see it will work for themselves because they read it from something someone else wrote. Putting things in writing for this individual gives them time to digest what you said and make the decision for themselves.
- Talk about compliance. Make sure they are aware that by not trying the solutions offered the responsibility falls on them.
- Check back in with them. Sometimes the NIGE client just needs time to think it over. By checking back in it shows you care. “I just wanted to call and check in on Fluffy. I know you left feeling pretty defeated, but I was hoping you wanted to follow up on the bland diet we recommended. I know that’s what is best for her.”

The “Exploding Bully” Client (EB)

These are the scariest and worst clients. These clients are quick to anger and even faster become aggressive and threatening. They are impatient, arrogant, verbally and sometimes physically abusive. Depending on the degree of your EB it may require you to call the police. The EB puts their needs above everyone else’s’. They are the only person that matters and they want everyone to stop what they are doing and fix their issue. The secret is, no matter what you do it won’t be good enough. You know this client because they raise their voice, get tense and start their demands. A “You’re In It For The Money” client can easily turn into an EB client if

not handled correctly. Also, refer back to the trauma induced psychosis I wrote about earlier. It is very possible your EB client is out of their mind because of a trauma that they just witnessed with their pet. Refer back to that section on how to help that individual and combine it with this section. In fact, any one of the clients mentioned in this can easily escalate to the EB client.

How to Handle EB Clients

- Once a client starts yelling you can stop trying to make them happy. Your role is now to de-escalate the situation to prevent it from worsening. While it's hard to do so remain calm and polite. If possible move them to a private area so they can blow off steam without upsetting others. Some EB clients plant their feet and refuse to move. If that's the case let them be where they are. No sense in escalating the situation even further.
- Don't be intimidated. Admittedly, I almost always am, but do your best to portray confidence. The EB wants to intimidate you and if they see it is working they will usually get worse.
- It does not matter if you are right or wrong in this situation. You have an individual acting out of control. Save your energy and focus on reducing the threat.
- Apologize they are upset. You are sorry they are upset. It sure would be easier if they were not! Explain how you want to help them by saying, "I am sorry you are so upset. I want to help you and your pet, but I cannot right now until you calm down."
- Don't not take physical threats lightly. If there is any threat of violence, end the conversation immediately. "I am sorry you are upset, but I am not going to continue this conversation with you when you are threatening physical violence on the hospital/team/myself." Immediately remove yourself and get to a secure location. Call the police. Physical threats are never to be taken lightly.
- Try to get to what the bully wants by repeating back the issue. "I understand you are unhappy with your bill and you want to pay less." "I understand you are unhappy with the surgery and you want it fixed." Repeat back what you are hearing for them to (most likely) scream it back to you. "YES! I'VE SAID FIVE TIMES I AM NOT GOING TO PAY!"
- Confirm you want to help, but cannot do so at this time. "You are screaming at me. While I do want to help you I cannot at this time because my focus is on your screaming at me."
- Stop the conversation. "At this point I've confirmed why you are upset and have said I'd like to help, but you just keep screaming. This is not productive for either one of us so I'm going to end the conversation so we can both cool down. I'd like to think about what you've said and get back to you tomorrow/in a few days/via email once I've had time to process this conversation."
- When communicating with an individual who is escalating stay away from the following phrases as they will only cause the situation to get worse:
 - Don't take it personally
 - Don't be sad/mad/angry
 - No offense but
 - Don't get emotional
 - Always or Never (You always/never)
 - That's Stupid/Ridiculous
 - Everyone thinks

- I (You) don't care
- Last week/month/year you said or did
- Stay away from the word you including, but not limited to:
 - You are a, You are making this, Here you go again
 - You need to calm down
 - You are exaggerating
- Remember this: No one has the right to berate, belittle, antagonize or threaten you or your hospital team. When dealing with the EB you must stand up to the EB and let them know that their behavior is intolerable and unproductive. Be polite, but firm.

The "Know-It-All" Client (KIA)

Don't worry! They have a PhD in psychology so they know it all. They consulted on the internet so they know it all. They are a human medical doctor so they know it all. We all have these clients. They have come in with their diagnosis and a list of things you need to do to fix their pet. They are impatient because they've already done your work for you. This individual declines your recommendations including all lab work and medication because they know it all. The KIA client is highly critical of you and they will talk a lot to prove they know it all. The good news about the KIA client is they want the best for their pet even though they are wrong in their knowledge (like the time a MD gave their dog four ibuprofen and argued with me that I had no idea what I was talking about.)

How to Handle KIA Clients

- These clients know it all so in order to get them to understand what is appropriate for them and their pet you will have to build trust. To start with inflate their ego. "I'm impressed with the amount of information and research you did. You really love your pet. I wish more owners took a vested interest in their pet as much as you." Great, now you've got their attention.
- Do not second guess your knowledge. Be confident in communicating with them or you will lose their trust. I find that most KIA clients are right about some things. Play to that and you likely will build the trust even further. "You're right about some of what you mentioned, but I have concerns that it may not be Lyme disease and here's why." Now hit them up with your knowledge.
- Do not argue, call them stupid or make them feel inferior in their knowledge. Get them to think about what you are proposing by saying, "What do you think about what I'm suggesting?" This way it's their decision to agree to the knowledge they just heard. If they disagree politely say, "I understand you feel it is Lyme disease, but I still have the same concern." You can try explaining it another way to get them to buy into what you are saying, but ultimately it's up to them.
- Lastly you can try providing data, articles or other information to them. "Hold on. I'm just going to get my textbook on arthritis for you to take a look at." This makes them feel like they are part of the decision and you are trusting them to review the medical information because they are smart.
- If after three attempts the KIA keeps insisting they want it done their way "I know it's Lyme disease and I just need a prescription for doxycycline" politely explain why you are not going to follow their commands. "Part of me being a doctor is making sure I

prescribe the right treatments or diagnostics so I can do the best for your pet. You are not allowing me to do that because you are telling me what to do. I am offering to you what I know is the best care for your pet. If you are not interested than there's nothing more than I can do which will be a disappointment." When they exclaim they are going to do elsewhere politely reply back, "I think that's best. I'm sorry I could not help you."

Conclusion

We cannot please everyone. No one can. Most veterinary professionals assume the role of fixer and healer. It's hard for us to accept that we will fail our clients, but we will. Not because we didn't try or do the right thing, but because they were not willing to allow us to help them. Set boundaries with your clients. Stick to your integrity and believe in your knowledge. Protect yourself and your team. You cannot be everything to everyone. Remember you cannot control their response, only yours. By utilizing some of these techniques hopefully some of the clients will move from snappy to happy.