

## Central Line: The AAHA Podcast

**Episode Title:** Sustainability in Veterinary Medicine Takes Equal Parts GRIT + LOVE

**Guest:** Charles Hurty, DVM, and Alana McKern

**0:00:04.1 Katie Berlin:** Hello, welcome back to Central Line. It's so great to have everyone with us today for this very special episode that I'm super excited to do. We are here with two guests today: so we have Charles Hurty, a wonderful veterinarian who reached out through the podcast email address (so someone does check that email address and it's me!). So if anybody wants to reach out, please do, because I am so glad that Charles reached out and wanted to tell his team's story. And one of his team members is joining us today too: we have Alana McKern, who is by Charles's definition a badass unicorn who works in the same practice. So Charles and Alana, badass unicorn, it is wonderful to have you here.

**0:00:50.1 Charles Hurty:** Thank you so much for having us, Katie.

**0:00:53.7 Katie Berlin:** So before we get started, as usual we're gonna get into a lot of great stuff today, but I'd love to have you tell our listeners just a little bit about the both of you. So Charles, would you mind giving us a little bio on who you are, how you came to be here?

**0:01:08.1 Charles Hurty:** Yeah sure. So yeah and just again, I wanna make sure that we thank you for what you're doing with the podcast, the content of this program is awesome which is...

**0:01:16.6 Katie Berlin:** Thank you.

**0:01:18.1 Charles Hurty:** Which definitely compelled me to reach out to you.

**0:01:19.6 Katie Berlin:** I'm so glad.

**0:01:20.5 Charles Hurty:** And I'm just so happy that you were receptive to our story and we're happy to tell it and share it.

**0:01:26.3 Katie Berlin:** I think I can honestly say your story made my day and probably week, and everybody else's that I shared it with at AAHA, which is a lot of people.

**0:01:35.3 Charles Hurty:** Awesome.

**0:01:35.4 Katie Berlin:** So definitely the appreciation is mutual.

**0:01:39.5 Charles Hurty:** Well, thanks. Yeah, I'm Charles Hurty, I'm a veterinarian, I've been in practice, gosh, it's hard to even believe it, but 20 years. I traditionally am from the East Coast, I did my veterinary studies at NC State at the vet school there, did an internship at the University of Georgia, worked in Maryland for a little bit, in a small and old practice, and then moved out to the West Coast. My wife is also a veterinarian, and we actually bought the practice 15 years and two days ago, as I like to say. My son was actually born on the day that we bought the practice, we actually faxed...

**0:02:20.5 Katie Berlin:** Wow.

**0:02:21.1 Charles Hurty:** Yeah, we faxed the paperwork on the sale from the maternity ward at the hospital, so that's kinda how we gauge that. But yeah, we came out here to the Oregon coast, so that's where our practice is. And we're about a 20, 21 person practice, four, five veterinarians at any given time, just to kinda give an idea of the size of our practice, but yeah, small animal practice, and it's been a great journey this 20 years in veterinary medicine. And if you ever told me even a couple of years ago that I might be on this podcast talking about our practice, I maybe wouldn't believe you.

**0:03:06.9 Katie Berlin:** I mean, same. So...

[laughter]

**0:03:10.7 Charles Hurty:** Did wanna say too that we have partnered with another veterinary group, Western Veterinary Partners, just a couple of months ago, and I find myself on their veterinary medical advisory board, so that's been another interesting journey for me. But yeah, I guess that's kinda my quick story there, quick bio.

**0:03:36.2 Katie Berlin:** Yeah, that's a lot of years compressed into a couple... A few sentences there. But that's cool. Happy practice anniversary.

**0:03:47.0 Charles Hurty:** Yeah, right, thanks.

**0:03:48.8 Katie Berlin:** And you're clearly one of those people who doesn't do anything halfway - you buy a practice and have a kid on the exact same day, that's pretty hardcore.

**0:03:54.7 Charles Hurty:** It was definitely hardcore. When we found out all those things were happening, I looked at Natasha, my wife and I'm like, "Hey, if we survive the next couple of years, we can do anything." And yeah, here we are.

**0:04:10.8 Katie Berlin:** That's awesome. And Alana, what about you?

**0:04:17.4 Alana McKern:** Well, I guess... So I'm Scottish, I grew up in Singapore and Hong Kong with my parents, and I moved over here 13 years ago, about, maybe 15 actually, but moved over here to help my sister-in-law and all I'd been doing was customer service for 24 years pretty much. And I actually ended up getting bit by a dog, and I wanted to work at a vet clinic 'cause she was working for Grove at the time, and she pushed me, told me I couldn't, probably, because... And I totally agreed with her because I was terrified. Well, nine years later, I am the Operations Manager at Grove and...

**0:04:52.8 Katie Berlin:** Amazing.

**0:04:55.5 Alana McKern:** I'm Fear Free certified, and I work with dogs. So yeah. Yeah, yep, pretty much. Yeah, and I just love it. I just have always wanted to retire at Grove, I love everybody there and we're just a big family and that's pretty much where I'm gonna be.

**0:05:05.2 Katie Berlin:** That's fantastic. That's a good origin story, right? You don't hear that too often, so.

**0:05:11.9 Charles Hurty:** Yeah. And I would add that Alana is a lot of the glue that keeps the team together as well, she may not necessarily realize that. But I'll publicly embarrass you a little bit, but part of the well-being and mental health program and the different things that we're trying to do, she's fully behind, and honestly, I don't think we'd be able to do some of the things that we're doing without her dedication so thank you, Alana.

[chuckle]

**0:05:40.8 Katie Berlin:** That's wonderful, I love to hear that and...

**0:05:43.3 Alana McKern:** Thank you. Appreciate it.

**0:05:43.9 Katie Berlin:** We have... There are so many practices out there where there are a couple of team members that really do make it all work, it's always a team effort, and there's so many pieces that have to go right for things to work well. But for people like you, Alana, I think it's really important that you get recognized for that work because I think there's somebody at every practice who really does take on that role, whether they know it or not, and it's really vital, so that's great.

**0:06:15.0 Alana McKern:** Thank you.

**0:06:17.3 Katie Berlin:** And Alana is also wearing a really awesome hat, which we'll talk about a little bit later, but before we start, I always like to know a little bit more about our guests, and so the personal question I wanted to ask you guys today is: if you could put up a billboard or a tweet that everybody in veterinary medicine would see, what would it say?

**0:06:38.8 Charles Hurty:** Yeah, I got this question, I've heard this on your program before and kinda saw it in the pre-program notes. And I thought about some of the things that we live by in the practice, and it's like, "Well, you know, those are gonna come up during the program." So I actually... I thought of something that I've actually championed and really promoted, and it's actually a quote by Margaret Mead, and I think it's an important one for everybody to realize. And I'm just gonna read it, because I don't wanna mess it up. But basically what she says is, "Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has." And it just it's such a great quote, because if you have... It's like if you have an idea, if you're contemplating, and you feel like maybe you can't get that out there or do it, but just... You just have to start.

And it can be one person, it can be a small practice, it can be a couple of people. And as long as you're intentional and thoughtful and you're moving forward with whatever your passion might be or this idea or this concept, it all starts small, all big ideas start small. Maybe that should be the billboard, but that's kind of... Our program started very locally, very small, and it's gained some momentum, and it's changed some lives. So that would probably be my billboard quote.

**0:08:09.9 Katie Berlin:** I love that.

**0:08:10.0 Charles Hurty:** 'Cause that's something that I have up on my wall, so. [chuckle]

**0:08:13.2 Katie Berlin:** I love that, and you're so right. I think a lot of people feel like a lot of the world is run by really big corporations or big groups now, and they feel like they're not gonna make

a difference anymore. And I think there couldn't be anything further from the truth, because what big groups can do and people with a microphone can do and people who can reach more than that small group can do is amplify the things that those small groups are doing. And that's what I would love to do with the podcast, with AAHA. That's what you're doing by partnering with Western Veterinary Partners and trying to bring change to more practices. And even if you don't change the whole world right away, you could be changing somebody's world at any given time.

**0:09:00.5 Charles Hurty:** Exactly.

**0:09:00.8 Katie Berlin:** And that's really... That's a fantastic one. So love it. Alana, how about you?

**0:09:08.2 Alana McKern:** I guess mine would kinda be short and sweet, I guess. "Wellness: you deserve it."

**0:09:12.1 Katie Berlin:** Oh. I love that. It is short and sweet and to the point, but it is a huge message, right?

**0:09:16.0 Alana McKern:** Everyone deserves it.

**0:09:18.1 Charles Hurty:** That's right.

**0:09:20.5 Katie Berlin:** Yeah. And something that I think everybody in this profession needs to be reminded of on a regular basis, so I love that one. We need to put that billboard on everyone's drive to work - it'd be great. Okay. Good. Well, let's get into it. The reason you're here is that Charles sent this email, and the words "grit and love" were in it. And you had a document attached to it, where you told your team's story and what you had been doing. And that grit and love phrase just captured my attention right away because there couldn't be anything that described our profession more accurately than those two words together. I haven't met a single veterinary professional who wasn't gritty and who wasn't absolutely full of love for the animals that they're taking care of. So I just... I thought that was just... Maybe you should write marketing copy because it's really good. So I'd love to just have you start by telling us about it. Charles, can you tell us the origin story of this program and what it is?

**0:10:28.6 Charles Hurty:** Yeah, sure. And yeah, thanks for the feedback on "grit plus love." And it was one of those concepts that... We're very intentional in the development of our culture, but I truly feel like we just kind of... Those words just sort of almost appeared before us. And it was just really exciting to be a part of it. And I guess in terms of the origin story, I would kinda rewind all the way back to the beginning of COVID. I'm not gonna relive all of that craziness. And we're still going through it, right? It's still happening. But when I think back on the beginning of COVID, and I think about the people that I was surrounded by, I just consider myself so, so lucky because I had a team that was open and ready and willing, and here we are. And one of the things that we did when COVID hit, with all that fear and all that isolation, we doubled down on the development of community, we really built on the concept of togetherness and connection. And I really think that those are some of the things that we kinda lucked into.

I'm just... I kinda try to think back like, "How did that happen? Why did we do that?" It really felt like the right thing to do, and that's what we did. And we recognized people for coming in to work, we recognized people for all the great things they were doing, we recognized everybody for their

perseverance, their resilience, pushing through all these hard times and hard challenges. And that's sort of where the grit comes in, right? And the grit word landed in the treatment area, because in September of 2020, in the midst of the height of COVID, our community was faced with wildfires. Literally, the skies turned bright orange, there was ash and soot falling from the sky, there were houses burning in the northern part of our county, and then further on in our state, we were just having towns completely devastated. But this in our community was a completely new thing, and we were doing curbside care. And we were wearing our KN95 masks, not only for COVID, but because we were breathing in this ash that was literally falling from the sky.

And people came to work, and we delivered the great care that our clients were used to. I couldn't believe that people actually came to the clinic, but they did, and it was more of like emergency work. But I remember kind of working on a team briefing and pulling people into the treatment area, and I was just like, "You guys are the grittiest people I have ever met. You're amazing." And that's where the terminology came, this grit plus love. And one of the concepts with love and the way that what that word means for us, is our empathy and our compassion and obviously our... Just our love. We're grounded in that.

**0:13:43.7 Charles Hurty:** But we took the empathy and the compassion a couple of steps further. I think we all sort of think about the veterinary profession and the people within it being the most empathic people on the planet. And yes, we are. We apply that empathy though pretty exclusively to patients and clients, and we kind of don't have the boundaries. And so when we... When that empathy is applied that way, I always like to say that empathy without boundaries is really self-destructive, you're not taking care of yourself. And so we turned that concept into a "Let's apply empathy to each other and also turn it back on ourselves." Well, compassion and some... Take care of yourself before we can take care of everything else, right?

And so that's our grit plus love. And then what this kind of evolved into, and I know we're gonna talk about this even more today, is I... We rallied around this concept for as long as we possibly could. But we all experienced it, right? The racial inequalities, the riots that were happening, the COVID, the politics, everything just kind of isolating us, pulling us into these corners. And you could see that happening. I could see that happening with the team, and we were all feeling the fear, the uncertainty, the doubt. And I'm showing up to work, and I'm like, "Oh my gosh, how are we gonna steer this thing?" Like, "How can I... How am I showing up and how can I ask everybody else to show up?" This is literally crazy. We're fear... We're flight, we're freeze, we're in all these constant... The amygdala was just in constant... Nobody's thinking any more.

And so we kinda framed this in a... In the concept of trauma, like we're really experiencing a daily situation where that is really hard to recover from. And we built this culture that we leaned on, but I think it's the culture that allowed us to take the next steps. And so the next steps were reaching out to a local social worker, a practitioner of cognitive behavioral therapy, CBT, and we brought a therapist into the mix. And we did quite an extensive program, eight, eight-and-a-half hours of training over four different sessions. And we've continued to have our social worker help us in the practice. Her name is Helen Beaman, she's amazing.

**0:16:29.6 Katie Berlin:** She is.

**0:16:31.3 Charles Hurty:** Yeah. I know you've met her and...

**0:16:33.2 Katie Berlin:** Yeah.

**0:16:33.9 Charles Hurty:** But what she did for us in the beginning and I think the most powerful part of it was the validation of what we were experiencing and an understanding of what we were experiencing, the emotions, the feelings, our experiences, we were all collectively having this, and we were all able to understand, explain and just have the vocabulary to understand trauma, stress, anxiety, depression, we even talked about suicide. And she gave us some tools to understand that and then we took it to the next level, where we then learned some of the cognitive behavioral therapy techniques on everything from meditation to visualization to grounding ourselves in the present. And that was something that I feel was just lacking, that was the little push we needed to get healthier and to learn how to process what was happening to us. It's a hard job.

And we're all hard workers, and we take a lot of it home, and we're... We live it, right? You hear about veterinary medicine and veterinary care, it's a calling, it's not a profession. But when it's a calling like that, sometimes we absorb it so, so deeply in everything we do, whether it be euthanasias or dealing with angry clients or dealing with team members that are having a problem. When we take it all of that on so deeply, it's hard to process and understand it. And I think we can do it for a period of time until something like COVID applies so much weight to our situation that really shows our weaknesses, really reveals where we need help. And I looked at Helen after the third session of going through this and I was like, "Helen, we're doing something special. This is..." Well, it was special for me, and it was changing my life. It was helping me be a happier, better, more grounded person in understanding what I was going through, and I did see that in my team members too.

There were multiple times where there were tears, but there was a lot of fun and this as well, and we came together. Just as part of our journey, I'm just so happy it has been part of our journey.

**0:19:17.8 Katie Berlin:** Yeah, that's incredible. I just think about all the things that lined up there to make it work, like you found Helen and she turned out to be so wonderful, but also you... That first step, like you came in and you said, "How can we survive this together, like how can we do more than just make it through these days, how can we take care of ourselves and each other so that we're doing our best to thrive as well as survive?" And that is such a central question, and so often I feel like veterinary professionals get stuck in the weeds of, "Okay, we have to get from today to tomorrow, and then we have to get from the first appointment to the second appointment, and there's no time to focus on those things," but those things are what are going to change that daily experience in the long run and make everyone's lives just so much better, and I'm so impressed and grateful that you... On your team's behalf, that you had that moment where you said to yourself, like, something's gotta give... We have to do something differently.

**0:20:26.5 Charles Hurty:** Yeah, yeah, it was... I knew I was at that point, and if I'm at that point and I'm reading the room right... I mean, there probably were a couple of episodes where a complete dysfunctional situation happened and I'm like, I've never seen that before, like this angry client... And you know, granted the clients were also experiencing intense craziness, we're all experiencing this together, but when you see those equal levels of stress and dysfunction and processing and emotion... Yeah, there was a couple of episodes where I'm like, I can't ask people to endure this for much longer without something... And the other part of it too, that I think helped us is we did ask... We leaned into the team for, how are we gonna do this, guys? We came up with a lot of ideas, but I remember... Alana, you can probably remember this day too, it's like there is no playbook, people,

like what do we need to do to make your experience at work better? What can we do to make the experience better for our patients and our clients who are sitting out in their cars? And we got a bunch of ideas, and I think we acted on all of those ideas, and I think that's also maybe a message, is, a lot of times, we hover in contemplation, and like with Margaret Mead... We have the idea, but we let it sit in our brains, and as long as it's sitting in the brain, it's not out there doing.

And moving from contemplation and getting into the action part, the action steps, and hopefully we can talk a little bit about those action steps, but that was another thing that we did, and I think that was part of delivering that message of grit plus love and connection, was like, "Let's connect ourselves to this experience, and let's all take ownership." And we had these colorful signs with cartoons, we had chalkboards that... We had Amy, one of our receptionists, she did the artwork on it. We added more phones, we put signage up in the clinic. We tried to make it as best as we could, but it was a collaborative effort, and I think it's that ability to accept collaboration as well, because... And I'll just say from... Practice managers and veterinarians in general like to try to control everything, and that's just not compatible with sanity anymore. We can't control anything.

**0:23:22.8 Katie Berlin:** Right. If we didn't learn anything else from 2020, we learned that, right?

**0:23:27.8 Charles Hurty:** Yeah, right. And so being able to collaborate and distribute those ideas and then act on them, I think is also a critical message.

**0:23:38.8 Katie Berlin:** Yeah. Alana, as a team member, you're in a leadership role in the practice, but it is very common, I think, for us to hear about wellness programs and initiatives taken by a company or a practice owner, and we hear about, "Oh, this worked great," or "Look at this wonderful thing we're offering our team," but you don't always hear from the team about how it worked for them, and whether they agree that things really did go well or that it really was useful. And so that's one of the reasons why I wanted Charles to bring one of the team to talk, because... A program is no good if the person who runs it is the only person who thinks it worked great. And I feel like... Oftentimes, we can't always tell the difference. So I'm curious to hear from you. First of all, do you feel like the program was extremely helpful for your team and that you have learned a lot about yourself and about how to sort of manage these difficult circumstances through it?

**0:24:52.5 Alana McKern:** Absolutely, absolutely worth it for every single last one of us. I mean, who's lucky enough to have a boss that comes on in and says, "Hey guys, we're all suffering here. I'm gonna make this better for you," and actually care enough to do this.

**0:25:07.7 Katie Berlin:** Food is important.

**0:25:08.0 Alana McKern:** I mean, we had great meals. When we went... I mean, he entices them with food. I mean, that's... We are all hungry all the time, right? And then this great message that we got, and it was obviously voluntary, but everybody wanted to be there and everybody benefited from it. And honest to God, Charles is a great boss and really empathetic and just is there for the team and I... Yeah, no, we couldn't have done it without him for sure, being at the helm for sure. But no, the best thing that ever happened, I mean... It's just we use the language every day when we see somebody getting upset, we just throw it out there. And before, I guess we used to say...

**0:25:53.1 Katie Berlin:** I am breathing.

**0:25:54.8 Alana McKern:** Hold to three, breathe. That didn't mean anything. It does now. When we say triangle breathing, square breathing, and it brings us back to all these things that we were taught by Helen and what actually was put into our laps by Charles, so... Yeah, no, it's 100%. Would never... Wouldn't change a thing. Would definitely do it all over again if I could.

**0:26:18.9 Katie Berlin:** But I loved hearing that, and I love how you said that, that it's not that nobody ever said, "Hey, just take a breath," before. It's that now it has a whole new meaning. And so instead of saying, "This person's flipping her lid," like "this person is so reactive, this person can't handle stress," it's "We all have these moments, and here's what we can do to help each other manage those moments," because it's about the moment and it doesn't define who you are as a person. And I feel like I've come into contact with a lot of people who... I didn't always deal very well with the stress of practice, and especially when unpredictable things came... You know, the wrench in the plans that inevitably happen like every day. And I like predictability, and so that was very... It was very hard for me, especially as a new vet, and I found myself a lot of times being defined by my reaction to a situation or my need to take a breath or to step outside or ask for help. And I didn't realize until much later that that was unfair, because who you are in a certain situation doesn't always define who you are as a person, and I feel like that is a very valuable lesson from going through all this together. Would you agree?

**0:27:44.7 Charles Hurty:** Yeah, I would completely agree, Katie...

**0:27:47.2 Katie Berlin:** Sure.

**0:27:49.1 Charles Hurty:** And you really kinda hit at a really good point there in terms of reaction to a situation versus response to a situation. And part of the program, this cognitive behavioral therapy is how you respond to whether it be a great situation or a not-so-great situation, something that's not ideal. Really... I'm gonna say, your happiness and your freedom lies in how you respond to different situations, and so a lot of what we practice and what's very applicable today in the practice is how we, one, communicate with each other when there is a situation that's not perfect or not... Well, I should say not ideal.

**0:28:45.0 Katie Berlin:** Right, not ideal. I love that.

**0:28:46.8 Charles Hurty:** And having a blurred out type judgy reaction, we really try to work through not doing that, and we try to have sort of the, "Let's process this. Let's respond to this. Let's recover from this. Let's figure out what's happening," asking, "How can I help?" versus "What's going on?" It's a very subtle difference in those comments, and I would say one of our major... And this would be maybe one of those billboard quotes is... And this is something we live by, and I think Alana and I probably talk about this every day, is being curious versus being judgmental. So if we can stay curious in a moment, if we can stay curious in a situation and not judge people by maybe their worst part of their day or the worst part of their week, they are not that negative situation, they're... You know we recognize everybody's humanity, but for example, probably something that everybody can remember in curbside.

We're not doing curbside anymore, but you know, you've got a client who's not super happy in the car and you can kinda hear, like there may be some kids in the background or they're screaming, there's some crying and this person's getting frustrated because the appointment's taking an hour and 15 minutes, whereas two years ago it took half an hour. If we can sort of look at that situation and



say, okay... Let's say we've got a client out there, kids are crying, dog's got diarrhea. Someone's got COVID, there's a lot of stress. There's a lot of fear. This is not about us, this is about whatever is happening in their life. Let's not put a label on them because they're having a moment. Let's help them through this moment and ask those curious questions and solve some problems that way. So I think that's been sort of re-framing some of those discussions, reframing some of the ways that we approach different cases, people, each other, that re-framing has been so key, and I think that's been one of the lessons that we've learned and really carried forward from Helen's trainings.

**0:31:16.9 Katie Berlin:** I love all of that. And I was just thinking as you were talking about that, of a lot of the posts I've seen recently on social media, which unfortunately, sometimes I feel like you're right, the veterinary profession is really good at empathy and compassion for our patients, for sure. Sometimes, we're not as good about doing... About those things when it comes to the clients that come with the patients. And I don't think there's one of us that doesn't care about every animal we've ever touched, but the people that come with them sometimes make it a little harder to love them... especially if we're not in the best frame of mind that day.

But I really love that you were talking about how the cognitive behavioral therapy techniques and training and sessions that you've had with Helen and work that you've done with each other has also helped you reframe how clients might be acting and respond differently to that, because there's such a big element of that now, especially after the last two years. Clients have been going through more than they ever have, just like all of us. And that "us versus them" mindset just seems to be getting more pronounced, it seems like, in a lot of the veterinary forums that I've been on. And we're not gonna get anywhere that way.

**0:32:43.0 Charles Hurty:** Yeah, that was actually one of our... That was actually one of the initiating concepts to bring Helen in, and I think that's exactly what we called it, was, "Look, we can't have an 'us versus them.'" Sometimes you feel like you're in this bunker, like the clinic is just this bunker. We're in an older building, there's not a ton of windows, and you're like... We're doing this...

**0:33:07.4 Katie Berlin:** This is where it all goes down.

**0:33:10.7 Charles Hurty:** Yeah, it's like what's happening in the inside of that veterinary clinic. But you could really see that, sort of, where we were really wanting to speak about our inclusion and the community, you could see the "us versus them," and like we gotta get in front of this because this is an us thing. We need to bring everybody in and make everybody part of this. And I really think that the program has helped us do that, but that's exactly how we framed it to the team during one of our meetings, and "Hey, we gotta change that narrative a little bit."

**0:33:47.8 Katie Berlin:** Yeah. Alana, have you noticed from your perspective that those attitudes have changed since you started this work? The attitudes toward clients and being able to empathize with them a little bit more?

**0:34:01.0 Alana McKern:** Yeah, it's gone from, you know, "Oh God, this... So and so... I have to deal with so and so," to...

**0:34:07.8 Katie Berlin:** It's an opportunity.

**0:34:08.2 Alana McKern:** Oh, I get to deal with so and so, you know what I mean? I'm just gonna make the best of it. It's an opportunity to exceed their expectations and do it with a great attitude, so... Yeah, it definitely has for sure. Yeah, everybody has embraced it completely, and we all know... We all speak the same language, right? So we all know what the other person's going through at that time, and we just...

**0:34:32.6 Katie Berlin:** You know, Ross Palmer, Dr. Palmer, who was on the podcast earlier this year, had talked about how he now views client interactions where he realizes the client was not reading him the way that he wanted them to, and that maybe they were... They had some misperceptions about who he was or what he could offer them, and it could be because of something he didn't say or something that they came in expecting. But he said he now views it as an opportunity to show them what he can do for them, and how much he does want to help them. And I loved that because it's like a little challenge, and what veterinary professional doesn't love a challenge, right? "Well, you think I don't care? I'll show you how much I care." And it's completely different from, "Well, get the heck out of my waiting room then, if you don't think I care." So... Yeah, love that.

**0:35:25.0 Charles Hurty:** I listened to the episode. Dr. Palmer, Colorado state, is that right?

**0:35:29.1 Katie Berlin:** Yes.

**0:35:29.2 Charles Hurty:** Yeah. Yeah, and I felt for him, when he was having that mismatch with that client, it got him in his heart, and that interesting story from him and how he... Well, one, he's not gonna define himself as he might reflect on that as one of his worst moments when this client challenged him that way, but he turned that into an opportunity, he talks about it and he teaches others. But yeah, that's a great example of reframing how we look at what's happened to us.

**0:36:09.3 Katie Berlin:** Sometimes easier said than done, but that's why you have each other, right?

**0:36:11.9 Charles Hurty:** Exactly. You gotta have each other's backs, yeah.

**0:36:16.0 Katie Berlin:** Yeah, so I was wondering... We were talking a little bit about how you all did get really lucky, of course, in finding Helen and in having her be so wonderful and so willing to help you. And she donates proceeds to a Dachshund rescue, and she's just like a super gem of a human, but also, I was wondering if you feel like this is a program that almost any practice could do, even if it's not with Helen or it's not in exactly the same way. Do you think that bringing a therapist in to work with the team and taking some of those lessons and continuing on in work with them or with each other, do you feel like that's something that's repeatable for pretty much anyone?

**0:37:04.6 Charles Hurty:** I do think it's repeatable. Now, I think each team is gonna be different, each team is gonna have different needs, but I do feel like the whole veterinary, let's call it the ecosystem, is super open and receptive to recognizing now that we have a work-life balance problem in this industry. And so that level of openness and receptivity to these kinds of ideas is there, and as long as that's there, I think that these kinds of programs can definitely work. But that is one of the biggest questions, right? So we're trying to share this story. The reason I reached out was, I wanna put this out there in the universe. I wanna put this out there in the world. It was very helpful here, can it be helpful in other places? And I honestly have to believe that it is, and I feel like when

you're looking at all the different emails and stories that focus on mental health right now, and focus on well-being in the veterinary profession, there's little bits and pieces, there's little gems out there...

Such and such practice in Wilmington, North Carolina, they've got a veterinary social worker they've brought on. AVMA has wellness resources that maybe not a lot of people or practices know about, but they've got a great program with some good training. AAHA has some tremendous resources on bringing wellness and well-being practice into a business. So these little bits and pieces are out there and we just need to figure out a way where we can get people to again, pass the contemplation phase. And so does it have to be as extreme? And I actually don't even wanna use that word extreme, of bringing a therapist in? I would encourage everybody to truly think about it, but then also pick up the phone and ask some questions and maybe it's a therapist, maybe it's a social worker, maybe it's a resource of AAHA or AVMA. Maybe it's looking at every webinar you could possibly find on wellbeing, there's a lot of those out there right now...

But one of the things I would say that when I look at a lot of the different webinars and one hour training things for leadership, they talk about it, but they don't have a lot of action steps at the end of these webinars, and so those action steps really need to fall on you. And this doesn't even necessarily have to originate from a veterinarian or a practice manager or an operations manager, if there's somebody in your practice who's jazzed up by, let's bring some of this stuff into the practice - challenge them, encourage them, engage them to be that person that brings it in. Now, be part of it because you've got to bring this in systemically, but there are some really easy steps. And I think the other message is, you don't need to put together an entire cognitive behavioral therapy program in the beginning, it maybe something that you kind of wade into with one or two things and you ask for some help because you...

I go through the impostor syndrome. I'm like, Why am I talking about this? Who am I to talk... I'm a veterinarian, right. But you know, if... I'm not trying to prescribe therapy, I'm just keeping the conversation going and then we're all kind of working together and practicing all of this together, but don't feel like you have to... We're gonna bring cognitive behavioral therapy in, and you guys we're gonna do this, that's not gonna probably take off, that's gonna probably hit the floor and then...

**0:41:29.3 Katie Berlin:** Like a ton of bricks, yeah.

**0:41:32.5 Charles Hurty:** Maybe be exciting for two weeks and then it's gonna thud. And so you... Baby steps, little steps, work your way into it, but I think getting pass past contemplation, it is helpful to bring somebody in who does this stuff as a career, and with Helen, I honestly can't even give you an idea about the cost of this, because Helen's amazing, and she did all of this stuff just to become part of our team and to help our team because she saw what the veterinary industry is, the situation that we're all in. One thing I would say though, if you... In terms of cost and a way to reframe the expense is, one, you're gonna change someone's life, I guarantee it.

You might even save someone's life. Right? I mean, who knows what's happening in the minds of everybody on our team, but if this were something that actually saved a life, you may not ever know it - but feel confident that you might actually save someone's life. But the retention of the team and then the development of the team, what you get in terms of the social connection like... It's amazing, I love my team. I love my team, and I'm very happy to say that. And we had a great meeting yesterday. And all the dopamine was way up here and it was awesome, but you're gonna feel a connection to people that will make your life better. And this is... I'm saying this to move people to

action, but the other part is, retaining your team, we've got this shortage of people.

We're having a lot of issues in the veterinary world with just having enough team members to get through the day. You're gonna retain your people, 'cause what this says is, one, you really care, like you really, truly care, and that's gonna be communicated, and you're gonna show a little vulnerability and you're gonna be leading from the middle, and that is a team you wanna be a part of. The other thing is recruitment, so we've actually used this concept in our recruiting, when I put an ad out there for a veterinarian, I don't put on there all the bells and whistles, we start our ad with grit plus love, and we've hired three veterinarians in the last six months.

**0:44:19.9 Katie Berlin:** I just heard all of the veterinarian, the practice owners listening to this, who are trying to hire vets, I just heard them all collectively fall out of their chairs. Like where did they come from?

**0:44:27.1 Charles Hurty:** We put Grit + Love, because this is what we are working on, we're working on developing our team, we are working on focusing on ourselves so that we can do all the great veterinary work that we do, and that great veterinary work, it falls into place because we are happier and we are doing what we love. And so retention, recruitment, and just recovery and resiliency, these are things that we all need, and honestly, we went to vet school, we went to tech school, we didn't go to school to be cognitive behavioral therapists. So get some help. And I guess... So reframe the cost of bringing someone in – let's retain, let's engage, let's recruit. I can tell you that on our local level, we're kind of remote, we're an hour-and-a-half away from the closest emergency clinic. We're on the Oregon coast, which is beautiful, but we're a smaller community, we're not downtown Portland, where recruitment might be a little bit easier. But we've pulled people to the coast to come check out the practice. And I just feel like this is something that's paying off for us in so many different ways that it truly is almost like a priceless deal. So invest in such a program.

**0:46:09.6 Katie Berlin:** I'm ready to go and invest right now, and we had a practice that is very effective.

**0:46:13.9 Charles Hurty:** I just think... I think it can work. And one of the big questions for me... And this came up with Sonja Olson, who I think you've had on your program, you know her as a person who is intimately connected to well-being and creating resiliency within the veterinary world. But we've talked about like, "How do we get people to act on this stuff?" And one of the things that we've talked about is, "What happens if you don't act? What's the price of inaction?" And I think the price of inaction is we just stay on the record player, and we circle right back to where we are with all of the different emotional baggage or lack of coping, whatever we wanna call it, that well-being balance. But if we don't act on ideas like this, yeah, we're gonna just find ourselves playing the same song over and over and over. And we really think we've established in the last year or two that there needs to be some change in the industry. We need to do different things. And maybe this isn't the program, but it's definitely worked on the local level.

**0:47:31.7 Katie Berlin:** Yeah. And I think there's such a big tendency in our industry and in every industry to think, "What is the answer? What's the answer to the veterinarian and tech shortage that... Or at least perceived shortage? What is the answer to burnout? What is the answer to us not being able to keep teams happy and healthy and watching people leave the field?" And there isn't just one solution, there have to be so many.

**0:47:58.6 Charles Hurty:** Exactly.

**0:47:58.8 Katie Berlin:** Because people have to try something on and see how it fits or if what works great for one team won't work for another, or they're not ready for it. Like I can picture, Alana, you clearly loved working at Grove before any of this started, right? I can tell that you had that love for the team and the practice already, and for Charles as a boss. But you... That time during 2020 would have tried any team, no matter how cohesive they were at the beginning. And so I'm sure that culture helped you to implement this program so effectively. Like, Alana, you mentioned it was voluntary. And I don't... I think maybe Charles didn't mention at the beginning that the participation in these sessions is voluntary, and... You had 100% participation. That just blew my mind, when I read that in your email. Because I don't know any team, including really, really healthy teams, where everybody would have been like, "Yeah, I'm gonna go to this session where we talk about feelings." So I just... I think that's...

**0:49:08.4 Alana McKern:** It was mentioned we weren't gonna be doing kumbaya, so I remember the first time it was brought up, and I was like, "Okay, alright." So then we... Charles kinda... But he made it... Seem like it was okay. The way that Charles came across to us was just that it was gonna be okay, we didn't have to do it, but it was gonna help us.

**0:49:31.5 Katie Berlin:** Amazing. You also mentioned, Alana, earlier that you're Fear Free Certified now, which I love, because you had started off being so nervous around dogs. And I was just thinking about all the money. I'm Fear Free Certified too, I love Fear Free. But I'm just thinking about all the money and resources that teams spend to train their people to be Fear Free. And they'll paint the walls a different color, and they'll order different color lab coats, and they'll buy a towel heater, and they'll spray Feliway everywhere. Feliway is expensive, man!

And it's so much money and effort, and it's all completely worth it in my opinion, that is so worth it. But what are we doing to make our practices "fear free" for our people? We are not spending that money, and we're not committing that time as resources, because we feel like we don't have it. But if we can do it for our patients, we can do it for ourselves. And we have to, otherwise what good is it if only half the people in that room are feeling comfortable?

**0:50:37.4 Charles Hurty:** Right.

**0:50:37.9 Katie Berlin:** Yeah. I just... I love everything that you just said, Charles. And I hope you inspire somebody listening to go out and at least take the first step past contemplation to think, "What would be realistic for my practice?"

**0:50:53.9 Charles Hurty:** Yeah. And the other thing that I've tried to talk about too, is when we are trying something new on like this that does feel so different, a lot of times, you'll hear people kinda blow it off as, "Oh, this is just soft stuff," like, "This is whatever." Well... The reason we don't do it is because it's actually... It's hard stuff. We're not maybe geared to talk about how we might be feeling or having this conversation, and it's actually, for a lot of people, very uncomfortable. And one of the things I'll say is this has to be a new habit, that it has to be a habit-forming kind of thing, but embrace the discomfort that comes with a new habit. We all can... One of the most relatable things is, gosh, I haven't been on a run for a long time, and I'm gonna go for a run, and oh my gosh, it hurts, and you gotta work through that and you have to establish this new routine of getting back in shape or whether it be any kind of exercise. It's the same kind of thing, and you're gonna be a

little bit uncomfortable potentially bringing something like this up because it's not your normal conversation, but embrace that discomfort.

If you're feeling a little bit uncomfortable, you might actually be doing... You're working. You're wading into a space that's not your comfort zone. And getting out of that comfort zone to do something like this, which is only bringing positivity and happiness and health... It's okay to feel uncomfortable.

**0:52:35.3 Katie Berlin:** Yeah.

**0:52:35.7 Charles Hurty:** You just gotta work through it. And for sure, I would say in the practice... We were pretty jazzed up and it was pretty fun. I remember after the first several sessions, we were all ready to start, like let's incorporate this, let's do this. And so we were all pretty jazzed up by it, but there were moments like okay, how am I gonna deal with this situation? Or coming out to a problem or just bringing the issues up and keeping the conversation alive, sometimes it is a little uncomfortable, but it's definitely worth it to stick with it.

**0:53:25.0 Katie Berlin:** Yeah, it sounds 100% true, and your team is the proof. And I know a lot of people feel like maybe they've lost a little bit of that team cohesiveness during the pandemic, I know our team did, in the practice I was in - just because we weren't all... It was a big team and we weren't all together. It was a skeleton crew for a while and working in teams to avoid cross-exposure and at two different hospitals, and we didn't have team meetings anymore for a while. And it's so hard, and so it seems like what you're talking about, the techniques that you learned, so for instance, assigning new meaning to the words like, "Okay, just breathe," like you've said Alana, those things could be implemented even in a team where maybe they weren't ready to attack some voluntary longer modules with some more deep work, maybe that comes later. And I was gonna ask you at the end, but are there resources that you can share that you think would be helpful or do you have resources for your team that you would be willing to share that offer a little bit of help with those techniques, even if people can't bring somebody in at this point?

**0:54:45.3 Charles Hurty:** Yeah, I think... There are a lot of... Like say we wanted to go with something like cognitive behavioral therapy, there's a lot of resources out there, and there's some very simplified resources, you can find these online, that are like card decks that you can draw the card and it talks about different techniques that you can apply to help cope. I don't know specific authors. I would say there's a couple of resources that I feel very fortunate to have encountered that kind of helped frame some of this stuff for me, and I can mention a couple of books that I've read. So Brené Brown, obviously, she's amazing and she's got a new HBO Max special going right now, but anyway, her book, *Dare to Lead*, it's amazing, if you need something to help ground you into how to think about leadership or how to think about teams and how teams work, *Dare To Lead* is an amazing book. It's on audio, but I'm not Brené Brown's... I'm not a sales person.

**0:56:03.0 Katie Berlin:** [laughter] No, I'm trying to decide if it's actually on the shelf behind me - it might be, because those are all my favorite books back there, but I'm so with you. Yeah.

**0:56:12.8 Charles Hurty:** Yeah, it's on my nightstand and I also listened to the audio book, but her stuff is great, so if anybody needs a starter for getting inspired to... If this doesn't work, this podcast, and you need somebody else to move you to action, Brené Brown. Brené Brown, Brené Brown. And then Johann...

**0:56:35.1 Katie Berlin:** [laughter] Alana is laughing, she's heard this before. [laughter]

**0:56:36.8 Alana McKern:** He gave me the book. [laughter]

**0:56:41.5 Charles Hurty:** Yeah, and then Johann Hari, H-A-R-I is the last name. He has a book called *Lost Connections*, which really kind of helps to frame how important connection is. I don't even know how this book fell into my lap, I wish I could tell you, but I can't. But in terms of societal disconnection, what the pandemic has done in terms of separating people and talking about loneliness, and just the detrimental aspects of loneliness, so Johann Hari, great book, great read on really communicating the importance of connection. And then there's another book called *Compassionomics*, I do not have the author, this is...

**0:57:38.3 Katie Berlin:** I love the title.

**0:57:39.7 Charles Hurty:** Yeah, and these are a couple of MDs who scienced up the idea of compassion and empathy in medicine, and there is a full circle concept here, so basically they're talking about how when we apply empathy and compassion, we actually get a feedback loop that makes us feel better, happier and more grounded, caregivers high, that kind of thing, but it's another push to really think about how we are applying empathy and compassion in veterinary medicine. I got that book from a Freakonomics podcast. But those are three books that really kind of set me in motion in terms of our culture development and movement to action. So in terms of specific resources, I would say look at those kinds of things that help us build culture in our practices first, and then move into some of these ideas that help really solidify the culture and then make the team even more healthy.

**0:58:53.1 Katie Berlin:** Yeah, I love to hear that, those words of wisdom from you, because I can imagine in some of the cultures that I've seen, where if one team member said to the other one, "Okay, just try some box breathing." It wouldn't go well.

[laughter]

**0:59:11.1 Charles Hurty:** That's right.

**0:59:11.2 Katie Berlin:** It would not be well received.

**0:59:11.1 Charles Hurty:** That's right. Right.

**0:59:13.1 Katie Berlin:** So culture always is important, and maybe that's where we start. Because even just to focus on that shows that you care and that you want to help the team, and that that authenticity about wanting to help the people you work with live better and work better together is a huge step in the right direction. So Alana... I'm sorry, I don't mean to put you on the spot, but I'm gonna close out here, and I was wondering if you had words of wisdom, that question that I put on the outline. Do you have any words of wisdom for a person who's not in a "leadership role" in the practice, but who really wants to start talking about this in the practice, and they're a little nervous to bring it up? Do you have any words for how that person might go about doing that and not feel such a big fear of failure?

**1:00:09.3 Alana McKern:** One of the things they could do is play the podcast. Play this podcast.

**1:00:11.9 Katie Berlin:** [laughter] That's true. Charles made a really good case just now.

**1:00:16.9 Alana McKern:** He did make a good case.

[laughter]

**1:00:19.1 Katie Berlin:** I like that answer. Yeah, everybody should go play the podcast. And the transcript will be available, so if somebody doesn't like to listen to podcasts, you can just download the transcript and take chunks out of it, and I'm really serious about that. Some people need to know that this is evidence-based too, and I love that you recommended a book where MDs actually took the idea of compassion and empathy and integrated it into what most practice managers and practice owners need to know, which is, "Is this really gonna affect how we do our jobs? Is it gonna make us better at what we do? Can we see results from it that we can measure?" And that could go a long way with some people for sure.

**1:01:05.4 Charles Hurty:** Yeah.

**1:01:07.0 Katie Berlin:** I'm all feelings all the time, so I'm just like, "Yeah absolutely, we should talk about empathy." But I've never been in charge of a practice, so.

[laughter]

**1:01:14.9 Katie Berlin:** Yeah, so Alana, you're right, giving them tools for that conversation would really help. What about if you know that the person you're talking to is maybe not used to getting feedback from the team, is there a way that you feel like they could approach that? Would you recommend having them go up to their manager or practice owner in person or send them a message? I'm just thinking about so many people I've known who have such great ideas and they've just been afraid to speak up.

**1:01:49.1 Alana McKern:** Oh, that's just such a shame. I guess that's really a hard one for me 'cause I don't... I've never...

**1:01:55.0 Katie Berlin:** You're clearly not that person.

**1:01:57.7 Alana McKern:** Yeah. [chuckle] In the past, I have had bosses, I guess that weren't so approachable as... But in the last nine years, I've had Charles and he's anything but not approachable. He's so approachable and there's no way that you couldn't... And every single staff meeting, every little debriefing or anything, it's always... He always announces, "If please, if you need it to talk, if you wanna give me feedback, if you anything, we are here for you, and please come and approach me if you're uncomfortable." Yeah, it's just... I haven't had a boss like that that I couldn't approach in a long time, you know what I mean?

**1:02:39.5 Katie Berlin:** Yeah.

**1:02:40.6 Alana McKern:** But I feel like I would... If you're more comfortable with a co-worker, maybe have yourself and a co-worker who would kinda have the same ideas, get together and then



maybe bring it to somebody. Obviously not in the attacking... You know what I mean? Don't attack the person that you wanna talk... Your boss or anything like that, but bring it to them in a way that, "Hey, this is what I learned, I'm wondering if... What do you think?"

**1:03:05.8 Katie Berlin:** Yeah.

**1:03:07.4 Alana McKern:** "What do you think about this being brought into our practice... Could we do this, could we give it a roll?" Reach out. I guess I've just been very lucky, my whole team is...

**1:03:17.3 Katie Berlin:** You will never know till you try too... right? People can surprise you, and I love the way you phrase that. Where you said, "What do you think about this?" So you're not waiting, and also that the right moment is important. Not running up to the person in the middle of the treatment area on a Saturday morning is probably a good idea. I probably would avoid doing that. But a quiet moment where you're not overly emotional seems like it would be a good time to talk about it.

**1:03:44.9 Alana McKern:** Yeah - ask them for feedback, right?

**1:03:47.8 Katie Berlin:** Yeah. Yeah.

**1:03:49.5 Alana McKern:** Ask them, "Can I provide you with some feedback?"

**1:03:52.7 Katie Berlin:** Yeah.

**1:03:52.8 Alana McKern:** That's something else we also learned in communications, which worked great with the team. And then they're expecting that, they're not just caught off-guard and feeling pounced upon.

**1:04:01.9 Katie Berlin:** Yeah, that's great advice.

**1:04:03.6 Alana McKern:** Pick your time.

**1:04:04.8 Katie Berlin:** Pick your time and take the risk because you never know. Yeah.

**1:04:09.2 Charles Hurty:** Yeah. And one of the things that I think we also talked about in the clinic too, is that we frame communication as an act of compassion, and if you really think about all of the... When we are communicating, if you think about communication as compassion, it's gonna lead to action. So if you feel like really deeply like, "Hey, this conversation needs to be had because it's going to impact the team in a positive way. Let's put it out there. I'm gonna be compassionate and act on this. Let's take this and have a conversation." So if you frame it that way, I think a lot of times too you're gonna think, "I have to do this. I have to bring this up, I have to start this conversation because it's an act of compassion."

**1:05:04.0 Katie Berlin:** Yeah, there's somebody listening right now who's feeling like they have to do it, and I hope they'll go out and do it after listening to the two of you, 'cause I feel optimistic about the profession and about how our teams can weather all of the tough challenges that have been thrown at them and are still being thrown at them. I feel more optimistic about that after

having talked to both of you. So thank you for that.

**1:05:28.9 Charles Hurty:** Thanks. Yeah, no, and... I appreciate that, I think, yeah, applying some optimism is part of this whole thing, and I'm glad that you are taking that away, but I will throw that back at you and say that when I listen to Central Line and listen to you guys talking with your awesome guests, I come away optimistic, it jazzes me up so...

**1:05:50.5 Katie Berlin:** I'm so glad.

**1:05:51.5 Charles Hurty:** It goes both ways. [laughter]

**1:05:53.5 Katie Berlin:** Yeah, that means so much, 'cause that's what I hope for with every conversation because our guests have so much to offer, and I wish I could talk to each of them for three hours, 'cause I feel like we're just barely skimming the surface, but there are so many people in our field who are working hard for change, and you all are some of them, and I love that, so I'm so glad that you reached out and we connected. And I know we're gonna be crossing paths again in the future, because I feel like this is all too good and too fortuitous that this is gonna be it, so I'm sure we'll be talking again.

**1:06:27.8 Charles Hurty:** Yeah. For sure, I hope so.

**1:06:29.9 Katie Berlin:** Yeah. And in case you're listening or watching and you missed it, Charles and his team were in a NEWStat story too that our reporter, Tony McReynolds, our NEWStat editor and reporter, wrote about just recently. So I will link to that story in the show notes for this episode too. And please, if you want to get in touch with Charles and his team, send me an email at [podcast@aaha.org](mailto:podcast@aaha.org), and we can see if we can get you in touch or connect you with some of the resources that we talked about today.

**1:07:04.9 Charles Hurty:** Yeah. And I would definitely say I invite any kind of questions, any kind of additional information. I'm very happy to share, because I think this is how it all changes is we put it out there, so if your next action is writing an email to Katie, make that your next action, it's an easy baby step, and then we can help you with the next steps through some conversations. So I totally invite anybody to reach out 'cause I honestly, I love talking about this, I love sharing it, and I'd love this to have a life beyond what we're doing here, so...

**1:07:46.0 Katie Berlin:** I think you've...

**1:07:47.6 Charles Hurty:** Thank you, thank you for having us.

**1:07:48.8 Katie Berlin:** Pretty sure you've made that happen.

**1:07:49.8 Alana McKern:** Thank you. [laughter]

**1:07:51.0 Katie Berlin:** And Alana is wearing... If you're listening and not watching, and I can't tell if they'll be able to see on the video, but Alana is wearing a hat, it says, "Grit + love," and, "Grove Vet Clinic," so they have swag. So any good initiative, right? If you want it to catch on and have a life bigger than its own, it needs swag. So...

**1:08:11.9 Charles Hurty:** It does need swag.

**1:08:12.4 Katie Berlin:** If there's nothing else, yup, you can... If you're just doing an initiative at your hospital and you launch it with some swag, I wanna see that too, because I'm a huge fan of the swag, so I feel like that just helps everything just take on a little bit more energy, and love.

**1:08:29.1 Charles Hurty:** Well, maybe we should... We'll have to get your address, Katie, and we'll get you a little swag.

**1:08:36.8 Katie Berlin:** Oh my God, I'd be so excited. [laughter] Everyone is gonna be so jealous. Alright, well, we'll exchange swag then, so you'll get... You'll have some Franky stickers coming. [laughter] Well, Alana and Charles, thank you so much for joining me and for everything you're doing for each other, for your clients, for the profession, because it really is for the profession now, and I want you to remember that on the hard days, that you're helping a lot more than just the people you see in the room with you, so.

**1:09:11.0 Alana McKern:** Well, thank you so much for having us.

**1:09:13.8 Charles Hurty:** Thanks, Katie.

**1:09:14.3 Katie Berlin:** Alright, thanks to you all for listening and we'll catch you next time on Central Line.