

0:00:02.1 Katie Berlin: Emily Tincher and Jules Benson, thank you for joining us.

0:00:07.5 Emily Tincher: Thank you for having us.

0:00:09.6 Katie Berlin: It's nice of you to stop by and to have given up your original time twice because of scheduling issues none of which were yours.

0:00:15.7 Jules Benson: Some people are tardy, which we try not to be, that's okay.

0:00:19.2 Katie Berlin: Yeah, well I really appreciate it.

0:00:20.0 Emily Tincher: We hope to model collaboration in all ways.

0:00:25.8 Katie Berlin: Yes, as you do. Well would you mind just introducing yourselves, don't everyone talk at once, and letting us know a little bit about you and how you came to be here.

0:00:34.4 Jules Benson: So for the first year that Emily and I worked together, I used to make her introduce herself first and eventually she got upset enough to tell me that she didn't like that. So.

0:00:43.9 Emily Tincher: About the third time.

0:00:44.0 Katie Berlin: Did you know she didn't like it? Were you just waiting for that?

0:00:46.2 Jules Benson: I was just trying to be collaborative and like it doesn't have to be about me all the time even though obviously it does sometimes. But anyway, I thought it was a nice thing but apparently it was annoying. So I'm Jules Benson, I'm the Chief Energy Officer at Nationwide. I've been there for about three years. I took over from the amazing Dr. Karen McConnell who held the job for about a million and 17 years, I think it was 17 years, for the Nationwide and just an amazing figure who we all still talk about with such reverence and respect and a lot of love as well for her certainly at Nationwide and across the profession. I'm a Liverpool grad so I was lucky enough to take part in the ECFBG program which is delightful and I've been here in the States. It's the Educational Commission for Foreign and Family Graduates. It was a fantastic program because Liverpool was not an accredited school. And I practiced in Pennsylvania for about three and a half years full time and then a bunch of time part time. And I've been in the industry now for, this was far longer than I look obviously because I, my 35 year old boyish looks. [laughter] We were just talking about that. None of us have the looks that we thought we did.

0:02:06.3 Emily Tincher: No we had a whole conversation about how people didn't look their age and whether that was actually a compliment.

0:02:12.8 Jules Benson: That's true. Or whether it's zoom age time and I didn't ever tell how much smoothing there is.

0:02:16.3 Katie Berlin: Right or is it like, wow, that's really old. Like I had no idea you were that old. So everything depends on how you take it. It's not a perspective.

0:02:26.2 Jules Benson: Yeah, that's true. My focus areas in the profession are really, I've been playing with data and pet health data for over a decade now and I really focused on how do we use

that to get better outcomes for pet families and to really push forwards and get to the next frontier, which I think everyone acknowledges that data plays a big part in it. I think there's just not very many roadmaps to how that takes place yet. So we're working on that.

0:02:56.3 Katie Berlin: Yeah. That's true. And some people aren't data people as I was just talking about with someone earlier.

0:03:02.6 Jules Benson: Yeah. And we can, we'll let Emily introduce herself obviously, but I think like there's some great results out there and a lot of people who've been ringing the bell on data in the profession for a while and I think it's just one of those things where it's just not top of mind for many of us because unless it's coming into clinical work, it's sometimes really hard to get our heads around how is applicable, why is applicable and what should we be doing about it?

0:03:23.1 Emily Tincher: Yeah. And it's a lot more work than often we wish it was.

0:03:27.1 Katie Berlin: Yes. It's a lot more work than feelings, which is sometimes not a great guide.

0:03:33.0 Jules Benson: Otherwise we'll just press the AI button.

0:03:35.2 Emily Tincher: Yeah.

0:03:36.4 Jules Benson: That we have and it will solve all our problems.

0:03:39.5 Emily Tincher: Right like someone has that. Looking for it still. Yeah.

0:03:42.1 Jules Benson: Dr. Tincher.

0:03:43.9 Emily Tincher: Yeah. So I am a 2016 Auburn grad, so it's still relatively recent, but I'm a second generation veterinarian. I grew up in my parents rural mixed practice in Southern Kentucky, less than an hour North of here. So I got to see my mom actually, making me have this trip, which was very fun.

0:04:03.3 Katie Berlin: And you're about to have a birthday.

0:04:05.7 Emily Tincher: About to have a birthday as well. I am roughly the age that I look, I hope, but I, um, we'll see more gray hairs every day.

0:04:13.8 Katie Berlin: Which is young.

0:04:16.1 Emily Tincher: So, uh, yeah. So I, after Auburn, I spent a year internship back in Kentucky and then practice clinically in primarily emergency medicine, a little bit of general practice relief in the Philadelphia area. So we all share having worked clinically in Pennsylvania.

0:04:33.1 Katie Berlin: Yep. In fact, you, we shared patients once or twice including my own...

0:04:38.1 Emily Tincher: We did. Yes. Which was quite fun. Yeah. Um, yeah. So I have always had an interest in taking what I've learned at a local level and trying to solve problems at a more

broad national or global scale. And that for me, I love communications. I love, uh, education and working kind of collaboratively with through partnerships all towards how can we work together with pet families to meet their needs, not necessarily the mean, the needs that we have, which is a, it's what brought me to Nationwide as the director of that relations. And it's what has me so interested in working constantly on a spectrum of care is just trying to acknowledge that there's a huge part of pet healthcare and everything that we do that goes beyond the medicine. It's how do we communicate in a way that people feel like they're part of the team with us and that their needs are being met along the way.

0:05:36.1 Katie Berlin: Love that. Okay. Bye.

0:05:39.8 Jules Benson: So tempted to jump in about the gray hairs, but you [0:05:44.8] ____ until now.

0:05:44.9 Emily Tincher: You just had to mention me to have any.

0:05:48.5 Katie Berlin: I mean, yeah, I don't, I don't know about those gray hairs. It's like I don't understand why they grow in so funny. Like why are they so wiry when they grow in?

0:05:56.2 Emily Tincher: They're very rude.

0:05:56.9 Katie Berlin: Just like I wouldn't know anything about it. I wouldn't, it's tough. So you both are at Nationwide now, but you've both seen a lot of different aspects of the industry. And I know, you know, we've had a lot of mutual friends and acquaintances. Emily and I met at another vet conference at the Uncharted Vet Conference. I think, did we have a secret handshake? Were we those partners? I can't remember. We were partners for something.

0:06:21.9 Emily Tincher: We were partners for something.

0:06:24.7 Katie Berlin: Yeah. We might've had like a bizarre secret handshake that had to do with horses and everything. It's so secret. It was just a while ago. It's been a while. But it's really nice to be able to spend some time and chat with you. And I've really enjoyed, like Jules, we haven't had a chance to meet until now, but Emily and I have seen each other at a few conferences this year. And it's really been nice to hear about everything that you guys are working on and passionate about.

0:06:47.0 Jules Benson: I can leave if you guys are lucky.

0:06:50.5 Katie Berlin: Yeah. You know, Emily and I were doing just fine without you is what I'm trying to say.

0:06:55.3 Jules Benson: That's unfair.

0:06:55.4 Katie Berlin: But although there were a couple of Zoom calls where we noticed that you had matching cats and things for the cats to run on. It was like, it was a continuous thing from one Zoom screen to the other. It was pretty cool. It's like a requirement to work at Nationwide. You have to have cat furniture on the wall.

0:07:15.4 Jules Benson: It's as if someone cool had it first and then someone else copied them. I

mean, if I was going to...

0:07:19.5 Emily Tincher: It's almost like that. Hard to say if that's the case or not. No, I have full credit that, so I have a young COVID cat, Exploding Popdart, and he needs to be entertained constantly.

0:07:33.4 Katie Berlin: So is your cat's name Exploding Popdart?

0:07:35.5 Emily Tincher: Exploding Popdart, yes. It's very fitting. It's from one of my favorite childhood books and it fits him. However, having seen Jules' catastrophic creations, I knew Popdart needed one. Yeah. I feel like I have to show it to my dad now because my dad has cats that I think would love some.

0:07:54.1 Jules Benson: I have to bribe. So our cat, who actually, so our cat Jethro is from here in Tennessee. We adopted him on a dirt road in Grundy County. His full name is Jethro Comfort Adams. Comfort is a family name from my wife's family and he was found on Adams Lane. So Jethro Comfort Adams. He has many, many names, as all of our pets do. But he's another orange cat. There is a requirement to have an orange cat as well as the cat furniture. And Emily has spent, I mean, there is some, there's not really competition to say competition is an unfair term because obviously Jethro is so superior, but like there's a lot of competition as to which orange cat is the best one. Yeah.

0:08:34.4 Emily Tincher: I mean, Popdart is perhaps more of a mascot at least. He likes to be on every team meeting, but they are both delightful, excellent orange covies.

0:08:45.5 Katie Berlin: Things are very serious at Nationwide. All business all the time.

0:08:53.8 Jules Benson: It's not serious always.

0:08:55.4 Emily Tincher: We have a lot of work to do, but we have fun while we're doing it.

0:09:00.5 Katie Berlin: That's the way to do it. I don't think there's anybody that got into the vet industry 'cause they didn't want to do work. I feel like there are just a lot of other ways to go.

0:09:06.0 Jules Benson: How do you get far as a lazy, unmotivated person in the industry? It doesn't feel like an easy profession to languish in.

0:09:11.9 Emily Tincher: I don't think so. Yeah. I get the impression that most of the people out there, like this is as relaxed as they get is like being at a conference cause you're not at the clinic. So yeah, definitely we're a profession of hard workers, but knowing how to have fun is good. So I wanted to ask you, there's a chalkboard right out there and it says, what does a better world look like? Because the theme of this year's at Connect City is create a better world. I'm sure you've taken some goofy pictures in front of that sign. I would like bet that you've done it or at least that you're going to before you leave, but also what do you think a better world looks like in vet med?

0:09:48.7 Jules Benson: Why don't you go first this time, Dr. Tincher? Is that okay?

0:09:52.0 Emily Tincher: Sure. That's great.

0:09:52.0 Jules Benson: All right. Fantastic.

0:09:54.8 Emily Tincher: There's so many things that we could consider with that. One of the side hats that I wear when I'm not at Nationwide is I'm on the board of directors for the veterinary leadership Institute. And I think part of the skills that we work on in that organization, leadership, communications, servant leadership, and using that to come back to your team and be a better leader within the vet profession. All of those things fit for me into how do we show up and be our most authentic selves and contribute well as we're not lazy in this profession, but contribute in a sustainable way to partner with pet families so that we can just provide more care for more pets. And I personally firmly believe that pets are not a luxury and they're not a privilege and everyone deserves the ability to own a pet. They are a responsibility. Of course you have to take care of them, but everyone deserves the ability to have a pet for the benefits that they bring. Mental health, physical health, just joy. I think even if anyone was questioning that before COVID, there's so many great stories of the ways that our pets made our lives better, pouncing all over us on Zoom calls during times of being stuck in isolation. And I think we have a responsibility as a profession to find ways to do that in a sustainable, business sustainable way. And for me, that looks like that's why I'm so invested in a spectrum of care.

0:11:30.6 Emily Tincher: How do we find ways to provide evidence-based medicine that is tailored to a communication style that's not judgmental to pet families from a range of basic, intermediate to advanced to whatever people are looking for, pet families are looking for to meet their goals and the available resources that they have, knowing that sure, it would be great if we could all afford and everyone was, you know, believed the same way that I did about pets. That's just not the world that we live in. So how do we find ways to, and I think that has so many implications for mental health in our profession, for sustainability of keeping our vet techs and our vet nurses and our veterinarians within this profession so that people, you know, if we feel like we're on the same team and not on this constant push and pull and divided on the pet families that we serve, I think that would be a huge step forward in getting us to be a more sustainable profession and a more sustainable pet health ecosystem.

0:12:41.2 Jules Benson: Yeah. I don't think there's any suggestion that it's not challenging. So there are always going to be challenges, especially when it comes to the affordability of pets and the affordability of care, right? But we know that the uptake of veterinary services and the inflation that we see, not in our prices necessarily, but in the ability of us to do things, that curve outweighs, you know, the affordability for a lot of people. So I think the grave import of trying to find out how we can provide a level of care that everyone can agree is an acceptable level of care without feeling like they're failing their pets. And that's where I think both of us have been in jobs where it's felt like that hasn't always been afforded to us. And I think that created so much anxiety and tension. That isn't good for us, much less for the families we're serving. So yeah, I agree.

0:13:32.0 Emily Tincher: That's so true. And I'm thinking of 500 examples in my head right now where I didn't feel free to make choices that would have allowed me to provide some treatment within the limitations that I had. And one of them was my first job. I really didn't have a lot of freedom. And I thought that was how it was going to be forever. And that was really devastating. And luckily I wasn't, you know, there were other great things about that job. And I really loved the people that I worked with. But it was not a place where I had a lot of leeway to make my own decisions. And as a new grad, too, you know, you worry about every decision you make. And so I

was simultaneously relieved not to have to be able to make those decisions because I would have worried about that, too. But we don't learn to be good vets unless we can work within the confines of that exam room, that pet, that family. And we've had some really good conversations, Emily, again, completely without Jules there.

0:14:29.7 Jules Benson: Yeah. Just to say. Yeah.

0:14:33.1 Emily Tincher: Yeah. Just where we talked about, you know, the idea of talking about this to veterinarians in all stages of their career and making, trying to pass on the message that this isn't subpar medicine. It's medicine. Yeah. Yeah. And that is a, that's a cultural shift. It's a movement.

0:14:57.1 Jules Benson: Yeah. Everybody is.

0:14:57.8 Katie Berlin: I think the all stages of our veterinary career, we just launched our college program earlier this week for this semester, which is a two hour communications workshop on spectrum of care. And the first hour is just talking about listening, communication skills and all those things feed into how to have, how to collect an excellent history. That thing that allows us to get to 85% of the diagnosis is just the history. Although, and I would, if someone would have just told me that in vet school, I would have been like, oh, all this time that I'm spending as a student collecting histories and doing not the cool stuff that I want to do, I would have thought maybe that was more important. So histories are really important. So you focus on those communication skills and listening and doing that within that framework of non-judgmental communication and providing the evidence based medicine for them. And it's so incredible. I'm not sure where our biases begin and are kind of instilled into our brains that the most advanced care is always the best, most appropriate thing. But they don't think that way. Yeah. I think it's really cool that earlier in their career that the workshops we've done so far, they really get it. They really get that meeting pet families where they are is where they need to begin with their conversations. And it's really cool. I'm excited to see how it goes the rest of the semester.

0:16:22.2 Katie Berlin: That's awesome.

0:16:23.6 Jules Benson: And even challenging some of those norms about leading with the most advanced level of care recommendation. I know that's the conventional wisdom at this point, but we just completed some research which basically supports the observation that that's not what pet families are looking for most of the time. That while that may be the most advanced care may get the, in most cases, the most favorable medical outcomes. We talk a lot about Emily's design the workshop around things like Parvo and the Colorado state protocol and just the disparity between the outcomes between the highest level, the most advanced level of care and a more moderate level of care. The outcomes are not massively different and being able to provide that evidence-based approach to care and to be able to communicate appropriately with families around what are your choices here and how do you move forward? It's been really great to watch this come together.

0:17:20.8 Katie Berlin: Yeah. Are we closing in, do you think on resources that sort of, because I do feel like standard of care is a little bit loosely defined. It's like Captain Obvious statement, but you have situations where you know there's a ceiling, we can't go below this ceiling because then we're on the wrong floor and we're not going to get to where we want to go. That's kind of freeing to know that at least we know where that level is sometimes. We know that this leg is broken and if

we can't do what we need to do surgically, then maybe amputation is the best bet. We can't send it to a fancy specialty center, but we can amputate that leg and the pet could have a great quality of life. But that amputation is out of the realm of possibility for that owner, but it might be easier to focus our efforts on raising the funds needed, finding the funds needed for that amputation, knowing that that would be a curative treatment. But not everything is that obvious. And so we've been talking a lot at AHA about how to work spectrum of care discussions into the guidelines. Maybe not writing them into the guidelines themselves, but taking time to create resources that help people decide where that line is for endocrine diseases or kidney issues, something like that, and helping to guide our colleagues so they don't feel like they're letting somebody down because they can't choose the top tier of care.

0:18:55.6 Jules Benson: And I think part of that is also, and this is happening more and more in human medicine, gathering things like client specific outcome measures. So knowing that we have three allergic dogs, there may be different tolerances for what resolution looks like to the owners in those three different circumstances. So some of them may be okay with the very moderate approach you may get with antihistamine. I know that we're not using antihistamines anymore, but from a generic over the counter point of view with some EFA's and some dietary change, and again, maybe more committed to the long view with less money versus somebody who's looking at a pharmaceutical approach that's going to cost more versus going to a specialist. The three different people may have different views of what that means to be successful. And I think that's when we start talking about outcomes, I think we're talking about outcomes for the family rather than a purely medical outcome for the pet. So I think that's where some of our focus is shifting because I think, and again, shifting over to the data side of the house, trying to capture information around outcomes, obviously it's incredibly difficult and it's not something that we've done particularly well as a profession, but trying to get to a place that is more evidence-based that speaks more to the needs of the pet family rather than just what we believe might be medical resolution.

0:20:13.6 Jules Benson: And I know that we see great advances in medicine, but sometimes we see incremental advances in medicine that result in very high costs for the pet parent. I know that we're having good conversations about those things or at least giving the most information we can to the pet family?

0:20:39.5 Katie Berlin: That all makes a lot of sense. And also, I think I've always thought that we don't treat the pet, we treat the bond between the family and the pet because that bond looks different for everybody. And this just makes that so much more solid when you say improving the outcomes for the family, which in some cases may be euthanasia because they can't support the life that that pet would have if we can't do the gold standard of care. But that is a very different way than we're taught in school. So these conversations are so important in talking to people who are just out of school or in school and solidifying that idea while they're still solidifying all the other ideas like when I took my acupuncture course and there was a vet student in it with me and I've been out 10 years and she was still in school and she picked that stuff up so fast because everything was still getting molded. And I had these very rigid ideas in my head about how things worked. And then they telling me to put needles here to fix this thing here. And my head just exploded. And she just flew ahead of everybody else. And I feel like it's the same type of thing, planting these ideas while everything is young and letting everything form around that is so valuable.

0:21:46.9 Emily Tincher: You know, I do think that's helpful. But I will say that having grown up in my parent's vet practice, practicing within a spectrum of care and knowing that there are various

ways that you can help pet families that are all acceptable. I love one of our teammates came up with the phrase basic isn't bad. It feels a little bit like a return to how we practice medicine a couple of decades ago. And knowing that everyone just has very different resources buckets to pull from and there's often a trade off in time, convenience and money and other things too. But those trade offs exist. And I think we have a lot to learn from those of us who haven't been out as long have a lot to learn from the practitioners that have kind of been through that and figured out MacGyver different ways to get through what basic could look like in a way that meets everyone's needs, including the welfare of the pet.

0:22:41.2 Katie Berlin: Yeah, we tend to kind of scoff at like, oh, it's like medicine from 20 years ago or whatever. But like, sometimes you can learn a lot from when they didn't have the stuff available that we have. Yeah, I love it. Well, thank you both. This is so much fun. I love talking to both of you. And like, in all sincerity, I mean that you guys are both really fun, but you're you are bringing so much the profession and I love what you're doing. So thank you so much for taking the time.

0:23:06.5 Jules Benson: Thank you very much for having us,